



Project Kali – Midyear Update 21

Single Homeless Project (SHP)

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EXECUTIVE SUMMARY

The Project Kali one-year report highlighted the many successes of the service so far and the ongoing systemic barriers facing our clients. This report begins to expand on some of those barriers and outlines how our service has continued to improve and produce great outcomes for our clients.

Through our work so far, we have unearthed barriers such as the inability to access female offenders prior to release for pre-tenancy work and unclear and often rapid release dates. These issues were only exacerbated by the Covid-19 pandemic where services were often stretched and constantly having to adapt to the ever-changing situation. Pre-tenancy work such as obtaining ID for clients and establishing benefit claims is vital in ensuring our clients success after release and when paired with rapid or uncertain release this can lead to gaps in support for our clients and the possibility that we lose clients to unsafe or unstable accommodation options. The pandemic highlighted many areas for development and many successes in supporting clients, with the Local Government Authority publishing the lessons learnt from councils' response to rough sleeping during the COVID-19 pandemic report outlining this in detail.

As Project Kali continues, we will continue to collect data around our housing outcomes, client feedback and housing clients directly from prison (through the gates). Project Kali is a beneficial tool in this through the gates work as it not only allows women to enter accommodation on release from prison but also works to alleviate the gap between the transition which often results in women falling out of the system and back into high-risk patterns and often dangerous relationships. Additionally, we will be able to collect data around our client's experience of more gender specific issues such as sex-work and domestic violence.

The Project Kali service has obtained great results for the clients we have supported through this service in several areas including mental health, physical health, tenancy sustainment and offending.

Additional to our quantitative data we are now also collecting qualitative data around our clients' opinions of the service to ensure that the service continues to reflect our clients needs and that we can begin to create a more co-produced approach to the support provided.

- Project Kali is currently working with **15** clients with **100%** of the clients placed in either private rented accommodation or Local Authority provided temporary accommodation. With all the clients in private rented accommodation currently sustaining their tenancies.
- Of these 15 clients, **80%** presented as domestic abuse survivors at referral.
- We have supported **10 out of 15** clients to move into more suitable accommodation.
- At the point of referral **14** clients were still offending. Of the clients with continuing offending behaviour **93%** of clients have reduced their offending and **50%** of clients have been diverted from prison.
- Through Project Kali we have supported our clients into specialist support such as domestic violence support and through the Multi-Agency Risk Assessment Conference (MARAC) process and into sexual health services.

Introduction

Since Project Kali began in 2018 SHP has continued to achieve great outcomes in relation to the female ex-offender client group. By utilising the Housing First model we have continued to ensure that these women can be supported into housing, in a secure environment to begin to address their support needs.

The previous report highlighted the impact that Covid-19 had on the Project Kali service in relation to client support and access to accommodation, however due to the ongoing uncertainty around the Governments lockdown several issues highlighted in the previous review have persisted with our service. We are continuing to work innovatively to continue our intensive support with clients.

Covid-19

Over the past year Project Kali and the homelessness sector has had to address unprecedented challenges due to the COVID-19 pandemic. When the Government announced the lockdown in March 2020 Project Kali was forced to adapt to the new lockdown restrictions and assess and address how the imposed lockdown restrictions would impact support for our clients, especially regarding face-to-face contact with their Project Kali worker, their ability to access the local support services that they have come to rely on and access to housing.

The First-Year report highlighted some of the measures we have implemented to ensure that our clients are still able to receive the intensive support required whilst ensure client and staff safety. These included the standard measures around the use of PPE and applying other risk reducing measures, however what became evident during this period is that the issues faced by our client group such as domestic violence, sex working and their unique experiences of multiple disadvantage/complex needs required our staff to develop various measures to ensure that our clients could be kept safe and enable them to continue to navigate a complex system of support which is not always adapted to supporting clients with the level of need that our clients present.

In this report we will continue to explore our outcomes so far, and how Covid has forced our service to adapt, including client case studies.

We will also discuss the Project Kali service in relation to the services many of our client's encounter, and how by the implementation of female specific services it serves a vital need in the homelessness and offending sector and can contribute to reduction in the public cost associated with accessing these services often at the point of crisis.

Update from Previous report

Our previous report provided an update on the success that the Project Kali project has had in the first year of operation.

We outlined several next steps that we would be taking over the coming months to ensure that the Project Kali service is able to support clients in the most effective and efficient manner.

Access to Housing

As mentioned in the last report we have been working with Redbridge council to gain access to social housing stock across our general Housing First service, which can also be applied to our Project Kali service, in cases that meet the criteria set by the local authority. We have continued to work with Redbridge and have received confirmation of 3 properties for Housing First clients (non-specific to, but inclusive of Project Kali)

that will be initially made available for our clients and we are in the process of arranging viewings for these property allocations.

Widening referral methods

We have continued contact with Homelessness sector partners in various forums such as the Women's Homelessness Action Forum (WHAF) and continued contact with Bronzefield prison. We have received several referrals through these further contacts we have established, and we are continuing to work with these partners.

Engagement with Clients and Local Partners

The service continues to work closely with local authorities and establish relationships with local teams such as Newham Homeless, Prevention and Advice service (HPAS) and similar teams in other local authorities to ensure that our clients can be appropriately housed.

We have also received referrals from Integrated Offender management teams and have been able to work together to form great multi-agency interventions for clients to form links between probation services and Project Kali. Additionally, we are also working closely with navigator and outreach services to locate and support clients.

Data Review

At present the team consists of two female Specialist Housing First Workers and we are currently working with 15 women. Over the last few months Project Kali has been steadily building up caseloads, with the service currently being at case capacity. The referral pathway has been adjusted to reflect the wider need of a women specific service in surrounding boroughs such as Newham. One of the cases has been absorbed from our Newham Housing First service and another case from the Redbridge service as both client's complex needs can be more appropriately met by Project Kali's gender specific approach.

We are continuing to work closely with partnership agencies such as Solace Women's Aid and probation services, attend MARAC panels and liaise with landlords to support our clients with tenancy sustainment. We are continuing to network and build professional relationships in the sector, with there still being continued need for more specialist services for women with multiple disadvantages.

Client Overview

Project Kali is currently supporting 15 clients, with 3 clients now closed to the service.

Project Kali currently has 2 referrals awaiting entry to the service, which is currently not possible due to case capacity.

There were an additional 8 referrals to the service who were not accepted as they did not meet the criteria.

In line with our previous report most of our clients are within the 26-35 age bracket, with 40% (6) sitting within this group, with the 36-45 age range having the second highest percentage with 33% (5) clients in this group.



The ethnicity of our clients has remained stable and in line with CHAIN 20/21 Quarter 4 Greater London statistics¹ highlighting that the highest percentage of rough sleepers (30.3%) reported to be rough sleeping were White British. This is reflected similarly in the ethnicity of Project Kali's clients with 67% (10) of our clients being White British.

FIGURE 1 PERCENTAGES BASED ON ACTIVE CLIENT'S.

Accommodation

Project Kali continues to house clients through the Private Rented Sector (PRS) with clients being housed across North East London in properties falling within the one-bed Local Housing Allowance (LHA) to ensure affordability.

¹ Greater London, Jan-March 20/21 Chain report, Rough sleeping in London (CHAIN reports), Greater London Authority (GLA).

Prior to January 2021 our Project Kali workers led on the sourcing of properties for clients. We have since expanded our PRS service organisationally to provide support in the sourcing of properties to our Housing First services relying on PRS accommodation.

Covid-19 has also presented a shift in how local authorities are intervening in homelessness with the pandemic leading to a more rapid housing interventions, with many of our clients being housed in Local authority Temporary Accommodation (TA), with sight to move into the most appropriate form of accommodation which may be PRS or social housing, depending on client need and choice.

- **10 clients are placed in TA or emergency accommodation.**
- **5 clients placed in Housing First accommodation**
- **10 clients have been supported to more appropriate accommodation.**

100% of clients are currently housed.

Project Kali continues to achieve considerable success in tenancy sustainment. Through the relationships that our PRS worker has established with landlords and through the intervention and support of our Project Kali workers our clients are consistently provided with the intensive support required to sustain their tenancies and deal with any issues that arise.

Offending analysis

All our Project Kali clients enter the service with either current or a history of offending.



FIGURE 2 PERCENTAGES BASED ON ACTIVE OFFENDING CLIENTS SUPPORT NEEDS (14 CLIENTS).

diverted from prison. Not only are these great outcomes it addresses a key issue in the female offender population of reoffending, highlighting the effectiveness of an intensive Housing First approach. With the intensive support provided through our Project Kali workers, we are able to support our clients to intervene in difficult situations to prevent crisis situations, such as difficulties around benefits which may lead to re-offending.

The Prison Reform Trust's, Home truths: housing for women in the criminal justice system report highlighted that "A lack of appropriate and safe accommodation increases the risk of (re)offending - without stable housing it is harder to engage in employment and training, or to access support services"². This provides a

Figure 3 highlights our key statistics in relation to the offending of our active clients.

Through the support of Project Kali, we have seen excellent outcomes in offending behaviour with 100% of our clients who were offending at referral reducing their offending, 93% being supported to engage with probation and 57% being

² Prison Reform Trust, Home Truth: housing for women in the criminal justice system, 2018

basis to the assumption that due to Housing First prioritising housing for our clients this has impacted the need for offending in our clients due to having a secure base with intensive support around various aspects of their lives.

Health outcomes and female specific support

There are various reports that document the different health outcomes, disparities and specific needs of female rough sleepers with multiple complex needs.

In the last report our outcomes mirrored the general pattern in homelessness statistics demonstrating a high prevalence of mental health needs upon referral in female rough sleepers.



FIGURE 3 PERCENTAGES BASED ON ACTIVE CLIENTS WITH MENTAL HEALTH SUPPORT NEEDS (15 CLIENTS).

Like our mental health statistics, our physical health data follows a similar trend to our last report with *67% (10) of clients reporting physical health needs at referral and 90% (9) of clients supported into further treatment.* Additional to the issues such as mental and physical health issues, female rough sleepers often have needs associated to Domestic Abuse, Sex Working and Sexual exploitation, involvement with the care system and may experience complex trauma related to their experiences.



FIGURE 4 PERCENTAGES BASED ON ACTIVE CLIENTS WITH PHYSICAL HEALTH NEEDS AT REFERRAL (10 CLIENTS)

Spotlight highlighted that 32% of women indicated that Domestic violence contributed to their homelessness³. Additionally, a University of York report found that 54% of their residents slept rough as a result of having experienced violence or abuse from a partner or family member (Women and rough sleeping: a critical review of current research and methodology)⁴. The recently passed Domestic Abuse act 2021 has provided further guidance and will provide further protections to the millions of people who experience domestic abuse and strengthen measures to tackle perpetrators. Additionally the Homelessness code of guidance for local authorities outlines that in regards to Domestic violence individuals have a priority need if they are “vulnerable as a result of having to leave accommodation because of violence from another person, or

³ Safe Lives, Spotlight, Homelessness and Domestic abuse

⁴ Women and rough sleeping: a critical review of current research and methodology, University of York, 2018

threats of violence from another person that are likely to be carried out”⁵ which in combination with Multi-Agency Risk Assessment Conference (MARAC) meeting can lead to successful outcomes in relation to the vulnerable women that we support in our service.

As we understand that these are central issues that many of our client’s face, we are now collecting data around sex work and domestic violence to understand how these issues affect our clients and their subsequent engagement in the services relevant to their needs. Our most recent data is shown in the figure below:



FIGURE 5 PERCENTAGES BASED ON ACTIVE CLIENT’S SUPPORT NEEDS.

Various reports have highlighted the importance of social engagement and finance and how the absence of support around these two factors can lead to offending and can also contribute to reoffending. The National Offender Management Service (NOMS) in their nine pathways to reduce reoffending specifically mention, 9 recognised pathways to reduce reoffending for women which include:

- Accommodation
- Finance, benefit and debt
- Children and families
- Education, training and employment

Through the Housing First approach specifically the fourth principle of Housing First ‘The service is based on people’s strengths, goals and aspirations’⁶, this aims to support our clients to identify their strength and goals, develop the knowledge required to achieve these goals and increase their self-esteem, self-worth and confidence, and to integrate into their local communities and begin to work on things such as social engagement and finance to lead to a reduction in re-offending.

Qualitative data (Client feedback)

Above we highlighted our quantitative outcomes, however since our previous report we have begun to collect more qualitative information around the client experience and their feedback around the support they have been provided through our service. With this information we can begin to work iteratively to

⁵ [Homelessness code of guidance for local authorities, Ministry of Housing Communities and Local Government, 2018](#)

⁶ Housing First in England, The Principles, Homeless Link, 2017

improve our service, through co-production with our clients to ensure that the service meets their needs and is working effectively to do so.

“Co-production is not just a word, it’s not just a concept, it is a meeting of minds coming together to find a shared solution. In practice, it involves people who use services being consulted, included and working together from the start to the end of any project that affects them”⁷.

Through conversation with colleagues within the sector and our own personal experiences in services with attempting co-production, we understand that clients are often hesitant to engage, and that the method of approach is vital to ensure that we can collect useful data from clients. We have previously attempted a written questionnaire, for clients to complete with their worker, however we encountered the usual disadvantages of this approach, being:

- Unanswered questions
- Dishonest answers linked to social desirability i.e., yes to a lot of questions.
- Difficulty in analysis with closed ended questions showing a great base level of simplified information but what is vital is to know the ‘why’ behind our clients’ answers.

With this pre-work and understanding of our client group we used a short informal questionnaire over a phone call, with open questions to utilise a conversational approach to our questions, to allow our clients to feel more at ease. To attempt to reduce the social desirability aspect the Project Kali service manager and Housing First Strategy and Partnership manager completed the phone calls.

As to be expected the response rate for the calls was low due several reasons, being:

- Clients currently being in crisis or emergency situations such as hospital admission, sexual assault, domestic violence.
- Inaccessible due to having no phone.
- No response via telephone

We asked clients 3 core questions:

Q1 Are you currently happy with the support you are receiving?

Q2 Did you feel supported throughout the pandemic?

Q3 Do you have any suggestions on how we can improve the service in the future?

Each question was followed with informal conversation to further understand either their yes or no answer, or further understand the answers they provided.

⁷ Think Local Act Personal (2011) Making it real: Marking progress towards personalised, community-based support, London: TLAP.

Question 1

Of the 4 clients we were able to speak to all clients reported that they were happy with the support they were receiving with one client feeding back that their worker was,

“Brilliant, she really looks after me”.

Question 2

All clients felt supported through the pandemic however one client fed back that as she was rough sleeping, she did find this difficult but took personal accountability stating that this *“was partly down to me not engaging”*.

Question 3

Two clients fed back suggestions for the service. One client felt that video calls would have been useful, especially through pandemic so she could feel *“part of society”* by seeing her worker face to face rather than just a voice over the phone.

The other client fed back that she felt key workers could be *“clearer on what they do and follow through with what they say they are going to do”* and to be able to have a method of feedback if they are not happy with their support.

Summary

Although the sample size of feedback is small, we have been able to receive some key points around the service and better understanding around our client’s current satisfaction.

The feedback was highly positive which was great in reinforcing our approach to support however what also shone through was the personal accountability taken by the clients in the feedback that was provided.

The Housing First approach provides clients with autonomy and supports clients in a strength-based approach allowing them to have power in how their support is shaped and focuses on the positive things they can achieve, rather than the risk averse approach traditional approaches take which removes autonomy and control of their clients in their support, focusing on the negative aspects of their behaviour and avoidance of this. We can assume that our clients’ answers are a result of this approach as they have understood what they are accountable for but also able to identify what they would like their worker to be responsible for and made this relative to what the role of the worker is.

As Housing First is a shift in working approach for both the homelessness sector and for our clients who may be more accustomed to the traditional method of approaches, it is vital to ensure that our clients are clear on what the role of their worker is.

Cost Analysis

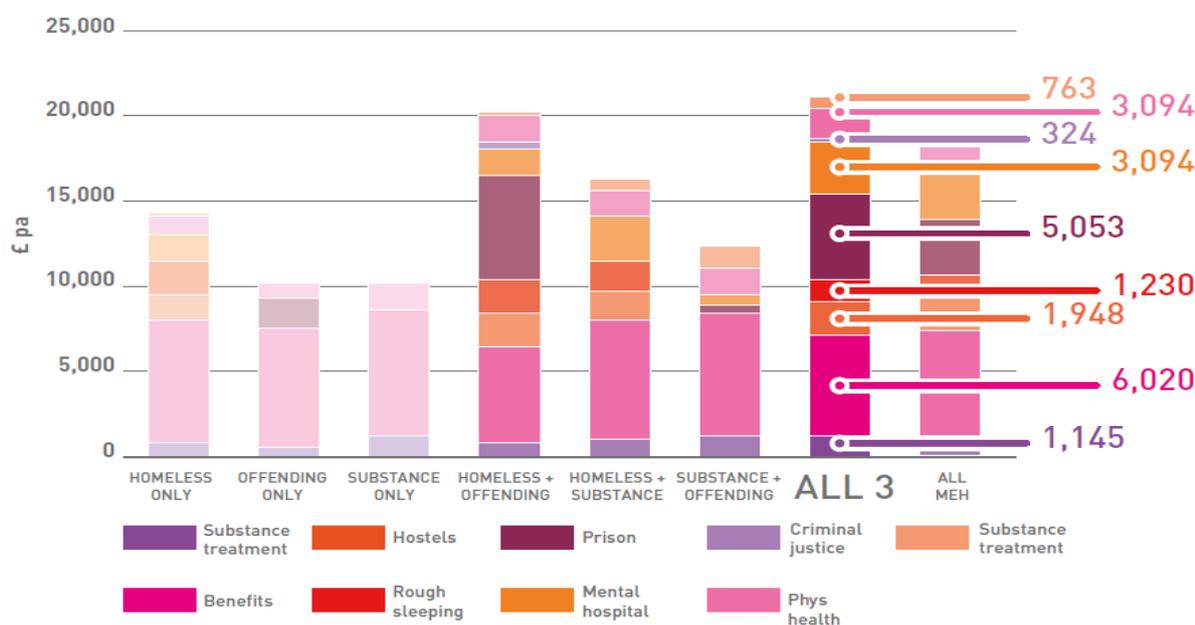
Financial impact of Multiple- complex needs and Housing First

The Lankelly Chase report published in 2015⁸ found that for individuals sitting in the SMD3 (Severe Multiple Disadvantage 3) group, experience all three relevant disadvantage domains. (i.e., ‘homelessness + offending + substance misuse’) spending was particularly high.

For the “SMD population represented by Multiple Exclusion Homelessness (MEH), total public expenditure relevant costs attributable are around £19,000 per year, 4–5 times the benchmark, with particularly high spend for homeless-offending, homeless-substance and SMD3 categories”.

Figure 16: Composition of annual public spending by detailed SMD based on ‘ever experienced’ (MEH sample)

²⁸ www.justice.gov.uk/transforming-rehabilitation



The Lankelly Chase report analysis can be used to provide a grossed-up cost for their composite estimate of £4.3bn for the SMD2/3 populations. The graph above from the report data also highlights that of all the three MEH categories (Homeless, Offending and Substance misuse), the Homeless and Offending category was second to highest in annual public spending with the Homeless, Offending and Substance misuse category being the highest. With Project Kali clients sharing the characteristics of these groups it could be assumed that our clients would fit into either category of public spend. This graph also highlights the impact that housing has had on prison, mental health hospital and hostel spend further highlighting how the Housing First approach can not only be beneficial in relation to public spend but directly towards our client’s wellbeing.

The Pleace and Bretherton 2015 report made clear that there is potential for Housing First to reduce the financial costs of homelessness by reducing long-term and repeated homelessness however it is simplified to imply that the cost per day is less.⁹ With the provision of secure housing being integral to the Housing First approach and the emphasis on multi-agency working, we can assume that it is the pairing of these elements that contribute to reduction in factors such as reduced crisis interventions and the cost on

⁸ Hard Edges: Mapping Severe and Multiple Disadvantage in England (2015)

⁹ Housing First in England, An Evaluation of Nine Services, Joanne Bretherton and Nicholas Pleace 2015

interrelated services. Additionally, in our last report we highlighted the Battrick et al¹⁰ two-year study of the Making Every Adult Matter (MEAM) pilots, that found that better coordinated interventions from statutory and voluntary agencies can reduce the cost of wider service use for people with multiple needs by up to 26.4%.

Our [data review](#) section provides evidence how through the support of Project Kali and the intensive support provided, our clients have been able to engage in interventions to reduce, prevent and divert our clients away from harmful patterns of behaviour and focus on their strengths to build their self-esteem and social relationships.

Financial cost of offending

The Ministry of Justice, Female Offender Strategy highlighted that Female offenders cost the Government approximately £1.7bn in 2015/16, including estimated police costs of c.£1bn¹¹. With female offenders committing on average less serious offences than male offenders and often pose a low or medium risk of serious harm to the public. With theft from shops being the most common indictable offence which 34% of females were convicted for in 2019¹². Due to the chaotic lives and complex needs that female offenders have they also have a repeated need for services and a disrupted family life.

With this context, paired with the information in the above sections around the motivations for offending and the social impact it can be assumed that through more intensive support and intervening after prison release this could lead to a reduction in female reoffending, due to their support needs being adequately addressed.

The Centre for social justice made several recommendations in their March 2018 report which aims to help transform the approach to women offenders, to improve outcomes, reduce crime and improve community safety. With recommendations around improving gender-specific sentencing options and improving residential based accommodation support for female offenders in the community¹³, in which Housing First pilots in relation to female offenders are mentioned. This report and the previously mentioned reports highlight how vital and impactful it is to have well rounded and holistic support to not only address female offenders, offending but their needs that ultimately lead to the continuation of this offending cycle.

Project Kali utilising the Housing First approach is able to address our clients support needs in a holistic manner, enabling us to positively intervene in the cycle of offending which is highlighted in our [data review](#) section which highlights that through our support of our clients still offending we have been able to support *92% of our clients to reduce their offending, 85% to engage with probation and 46% of our clients overall have stopped offending.*

Financial impact on interrelated services

Above we highlighted the cost of offending in relation to female offenders and how Project Kali and the Housing First model actively address issues that lead to re-offending. Various studies have been conducted highlighting the impact that financial impact of rough sleeping on interrelated services such as the health service, including ambulance callouts and A&E visits.

¹⁰ Battrick et al (2014), Evaluation of the MEAM pilots – Update on our findings, A report by FTI Consulting and Compass Lexecon for Making Every Adult Matter (MEAM)

¹¹ Female Offender strategy, Ministry of Justice, 2018

¹² Women and the Criminal justice system, National Statistics, Ministry of Justice, 2019

¹³ A Woman-Centred Approach, Freeing vulnerable women from the revolving door of crime, Centre for Social Justice, 2018.

According to a Department of Health study, homeless people are 3.2 times more likely than the general population to be an inpatient admission, at an average cost 1.5 times higher implying a gross cost of £76.2m per year which rises to £85.6m when outpatient usage and accident and emergency attendances are added.¹⁴

The Changing Lives, too complex for “complex needs?” 2018 report¹⁵ examined work with victims of domestic abuse, who also have multiple and complex needs. In this report they conducted a cost benefit analysis attempting to make a link between the results of interventions with a reduction in public service costs, which includes cost relation to interaction with the use of the following statutory services.

- Housing – accommodation, housing benefit entitlement, making a new housing benefit claim, making a homeless application and being evicted.
- Crime – arrest, charge, caution, nights in police custody, prison, court proceedings, probation activities.
- Fire – fire service callouts. Health – 999 calls, ambulance callouts, A&E attendances, hospital stays, outpatient visits, GP services and prescriptions.
- Mental Health – inpatient and outpatient treatment, support from various outreach and community mental health teams and various therapeutic appointments.
- Substance Use – residential rehab, inpatient detox, specialist prescribing, outpatient and community outreach alcohol and drug services.
- Social Services – contact with social workers and weeks children spent in care.
- DWP – new JSA/UC claim and amount of benefit entitlement.

This report took information from a small sample of women on referral and then 6 months on to demonstrate how engagement with services may contribute to significant savings. The cost-benefit analysis found that in the 6 women they evaluated the total reduction in spend ranged from £382 to £8,448, with the median reduction being £5,575. The largest reduction in expenditure was 90% with the spend going from £9,399 to £8,448.

Although this shows a significant saving it is important to note that this tool did not reflect the cost of repeat victimisation of women in terms of factors such as police call outs, MARACs and criminal proceeding and that many of the changes contributing to a reduction in costs may not have been directly related to the project but due to other circumstances. With this we could assume that when equating in MARAC's and other extraneous factors the cost may be slightly increased. However irrespective of this it is clear that through effective support the cost on interrelated services on average can be significantly reduced.

Social cost of offending for female offenders

Various publications have discussed the link between rough sleepers often having and offending histories. With the 19/20 St. Mungo's CHAIN report highlighting that 34% of rough sleepers have a history of being in prison¹⁶. With the Ministry of Housing Communities and Local Governments 2020 Rough sleeping questionnaire finding that 32% of women questioned had served a prison sentence¹⁷.

¹⁴ Evidence Review of the Cost of Homelessness, Department of Communities and Local Government, 2012.

¹⁵ Too complex for “complex needs”? Learning from work with victims of domestic abuse, who also have multiple and complex needs, Changing lives 2018.

¹⁶ Greater London 19/20 Chain Report

¹⁷ Understanding the Multiple Vulnerabilities, Support Needs and Experiences of People who Sleep Rough in England, Ministry of Housing Communities and Local Government, 2020.

When we begin to examine the cost or impact of offending this can be examined either in the tangible financial sense in terms of the cost on the system and how much these incarcerations cost per person annual. However, cost can also be broadened to explore the social cost of these sentences and periods of imprisonment to the women. It is also important to explore the motivations for offending as through understanding the motivation we can then begin to address with the client how to reduce this.

Motivations for offending

It is important to explore what the motivations for offending are which are closely tied to the social and economic impact.

The stigma attached to offending in women affects their life in several ways. The British Association for Counselling and Psychotherapy (BACP) highlighted in their 2013 report on Women in the criminal justice system that over 80% of sentenced women entering prison have been convicted of non-violent offences and outlined that women are more likely to offend as a way of resolving practical difficulties. Such as satisfying a drug addiction, unemployment, unsuitable accommodation and debt and satisfying a partner's drug addiction which was found to be a reason in 48% of women¹⁸.

When you look at this report in relation to the women, we are supporting through Project Kali we can assume that our clients offending was/is also grounded in those factors. Our data provides evidence of similar need in the Project Kali clients in the areas of housing, substance misuse, social and financial support. Our data highlights the positive outcomes we have been able to achieve in all 3 areas with our service supporting all 15 clients into housing, seeing a 57% reduction in intake of drugs and 79% of clients accessing substance misuse treatment. We have also been able to support our clients to access a personal budget and provide support around access to benefits, which can be assumed to reduce the need for low level crime to address their basic needs.

When we consider the findings in the BACP report we can assume that through the support we have provided to clients leading to the reduction in the previously mentioned areas this has led to a reduction in the offending behaviour of clients.

Social cost/ impact of offending

Estrada, F. & Nilsson, A. (2012) highlight that there is a commonality in experience between the male and female experience of offending such as both groups having low educational achievement, problematic family backgrounds and poverty however what was highlighted was that 'Female offenders are more stigmatized than men since they not only break the law but also the norms and expectations associated with their femininity'.¹⁹ This study highlights importantly that the effect of female offending disperses into many aspects of their life in a more detrimental manner than their male counterparts leading to these women being socially excluded, unemployed and facing difficulties supporting themselves and forming stable family relationships.

With this context it adds explanation as to why females have a higher average number of reoffences per reoffender compared to males, which highlighted in the Ministry of Justice, 2019 report on Statistics on Women and the Criminal Justice System,²⁰ due to crime being the way that these women ultimately use to sustain themselves.

¹⁸ Women in the criminal justice system, British Association for Counselling and Psychotherapy, 2013.

¹⁹ Estrada, F. & Nilsson, A. (2012): Does it Cost More to be a Female Offender? A life-course study of Childhood Circumstances, Crime, Drug Abuse, and Living Conditions Feminist Criminology, 7: 196-219.

²⁰ Statistics on Women and the Criminal Justice System 2019, Ministry of Justice

As outlined above the social impact for offending is significantly higher in women. The British association for counselling and psychotherapy highlighted in their 2013 report several issues facing women in the justice system such as separation from children, Distance from home and loss, mental health issues and Re-offending: Remand, short sentencing and managing transitions.²¹

These experiences for women can be very traumatic and when also considering the childhood and early years of these women often also being traumatic with many of these women coming from chaotic and fractures homes this can lead to a very detrimental experience for these women leading to further negative impact in their lives and leave them susceptible to falling back into past habits and un-healthy relationships.

These experiences generally directly mirror the experiences of our Project Kali clients who experience multiple and complex needs. The Housing First approach of support attempts to begin to address these barriers and needs in several way to work to eliminate the impact of the stigma that some of these women face, address the economic marginalisation and support them to lead pro-social lives. Paired with the through the gates approach, where women are supported directly from the prison gates this can intervene in women leaving prison falling into past patterns upon prison release.

Additional to the factors mentioned above the inability to access housing and navigate the complexities of the benefits system are also factors that inhibit female offenders specifically those with complex needs from being able to lead pro-social lives after prison release. Factors such as the lack of funds for a deposit, lack of references from a previous landlord, being an ex-offender and being on benefits can all act as inhibiting factors blocking female offenders from accessing housing. When this is paired with the complexities of navigating the benefits system many clients may not be able to access housing due to affordability issues.

In the system change section of this report we will examine how as a service and organisation we are working to address the gaps in understanding around these specific support areas and outline evidence around the specific support needed for vulnerable women.

System Impact Level

Project Kali utilising the Housing First model has several benefits in relation to how this model can support the women and how It is able to begin to address issues within the system through better ways of working and working relationships with our partners.

Above we have explored the economic impact of our service in relation to the complex issues that our clients face however on a wider system impact level, the work of Project Kali can be influential in how it continues to highlight issues within the system, allowing these issues to be address and create a more effective system for our clients to navigate.

The Housing First model of housing and support works in a non-traditional manner in comparison to most mainstream services which are more outcomes focused and housing is contingent on a person demonstrating that they are addressing their support needs. This manner of working is new and is in a stark contrast to how other service such as hostels work. In the wider sense the support services that our clients will also be accessing are largely outcomes based, which leads to difficult when working with clients with multiple complex needs who will often engage sporadically with support.

²¹ Women in the criminal justice system, British Association for Counselling and Psychotherapy, 2013.

Case study

In the case study below, we will outline the case of one of our Project Kali clients and break down several elements of their journey of support and discuss how this relates to the wider homeless sector specifically relating to gender specific work.

Client W was first referred to SHP in May 2020, when she started living in one of our hostels following a long period of rough sleeping. W started using crack and heroin and became involved in sex work from a young age. She has been in and out of prison since she was a teenager, and has been diagnosed with learning difficulties, ADHD and Bipolar Disorder.

Client W's Housing First worker has been able to support her in several areas of her life to support W to achieve her goals. There are multiple partners involved in Client W's support including the local council, the Nia Project, Advance Minerva, Probation services and St. Mungo's, through the support of the Project Kali service her worker can navigate these multiagency relationships to enable W to access support she is entitled to and work closely with her to prevent and divert her away from crisis situations.

Housing

On referral to Housing First, Client W's was living in a hostel however she went back into prison for 3 months, resulting in her losing her place in the hostel. Unfortunately, the afternoon before her release the local council informed W's worker that housing had not been found leading to Client W's having to make her way from Bronzefield prison into the community.

Due to Client W's workers continued efforts and working closely with all agencies involved W was placed in shared accommodation however due to Client W's sex work, drug use and risk of violence from another person locally. Client W was not comfortable living here.

Client W's housing issues are linked to her age and questions around her ability to access the under 35 local housing allowance exemptions. This is an ongoing issue with not only Client W's case but many cases, due to individuals with multiple complex needs often being unable to manage shared accommodation due to their complex needs and increased vulnerability, meaning shared accommodation leaving them at increased risk of exploitation and violence.

Fortunately, in Client W's case her worker was able to confirm that she can receive the under 35 exemption and is working closely with the local council to ensure that Client W is housed in an area and property where she is safe once she is discharged from hospital.

Health

As stated, above Client W is currently in hospital, this is due to ongoing issues regarding a blood clot in her leg. Due to her drug use and general lifestyle W often discharges from hospital however she has been advised that she may lose her leg if she does this due to a worsening infection. Client W's worker has been able to support Client W whilst in hospital and has been able to work collaboratively with the local council to prove her under 35 exemption to Universal Credit, ensure that after release she will be able to move into a property that is closer to transport links and is suitable to her needs due to the issues with her leg.

Benefits and wellbeing

As highlighted in the health and housing section, benefits and finance are a going thread that runs throughout support for clients. Client W's case is not dissimilar to many of our clients who experience difficulties accessing benefits and the subsequent support that this is tied to.

An additional issue to the under 35 exemption that Client W faces is her ability to access a bank account. Due to her lack of I.D this was initially not possible resulting in Client W being unable to access her universal credit entitlement leaving her in a similar situation to a lot of rough sleepers where she had to use the bank accounts of people she knows, leaving her open to financial exploitation.

This affected Client W's wellbeing due to her being unable to buy basic things leaving her to rely on SHP and probation services for financial support for essentials such as food and clothing. Through the support of her worker W was able to be supported to get her own bank account and has been awarded a grant to get photo ID so she can get a bank card, however presently she is able to go into the bank to withdraw money.

In the wider context, banks such as HSBC have now begun to allow people with no fixed abode (NFA) to open bank accounts opening the opportunities for our clients however this is still an ongoing issue requiring system change to enable our clients to access this more easily.

Offending

Client W has been at risk of recall over the last few months, but the wrap around support we have given has helped her to refrain from reoffending. Client W told her HF Worker that *this is the longest period she has not been in prison and would like to continue to work hard to stay out of prison for good.*

Summary

This case study is not only a testament to the support provided by Project Kali but also highlights several gaps within the system that limit our clients' abilities to progress once released from prison and out in the community.

This case study also highlights the importance of an intensive support approach with clients with multiple complex need, as this case study demonstrates that in every situation where an issue existed, through the support of Client W's Housing First worker a preventative approach was able to be taken to ensure that these situations did not escalate to the point of crisis. In the instance regarding Client W's health where this did escalate to a crisis point our support was able to ensure that this situation was effectively managed and that next steps were put in place to enable a smooth continuation of support.

Housing, benefits, health and wellbeing support are all standard issues across the homelessness sector however when we add the caveat of multiple complex needs and gender into this these issues become more specific to address and often more difficult due to the specialist knowledge required, the absence of and limited capacity of gender specific services and the adaptations that need to happen within the system to ensure that services can address the needs of our client group. At SHP we are continuing to explore how we can adapt our gender specific approach to ensure that support is inclusive of all our client's needs, we also continue to work closely with local partners, working to provide further education around needs, seeking to partner with local partners to create effective system.

Service adaptations and system change

Change at SHP.

At SHP we are constantly adapting our approach to ensure that support is holistic and able to support the wide range of clients that we support in our services. In relation to gender specific support through our ongoing business planning services we are evaluating the gender specific support that exists across the organisation and working to understand the gaps that exist and what additional work we can do in this area.

On a more service level through Project Kali, we have been able to utilise the Team Around Me method of case conferencing developed by Fulfilling Lives Islington and Camden (FLIC). This model is designed to ensure that there is better co-ordination and accountability in the way that agencies work together²². This model was initially piloted on women however it can be adapted across homelessness services generally, this model allows clients to be part of their case discussion and allow them to have an active part in decision making around their support. This model of case conferencing has proved useful in cases such as the case of Client A where there is extreme risk.

Client A is 32 and has been working with SHP for around 2 years. She has experienced a lot of trauma during her life, including the breakdown of family relationships especially when she went through transitional therapy in her 20's to begin to identify as female.

Client A has sex worked for many years and uses multiple substances sometimes with customers and often blacking out as a result. She is incredibly high functioning however due to these needs she is extremely vulnerable and requires support around her day-to-day tasks such as managing bills, managing her personal safety, understanding around healthy personal relationships, and engaging in the relevant support services.

A Team Around Me meeting with Client A which she said she found very beneficial. She set out clear and realistic goals, many of which have already been achieved, including setting up her council tax account, registering with a local dentist, reducing her drug use and setting up an appointment at her local drug service. She was able to identify barriers, such as triggers for drug use, indicating excellent insight into these areas of her life. She also knows about and uses the Crisis Line and has called the police when she felt at risk or being assaulted.

Client A's case highlights a variety of needs that through the support of Project Kali and FLIC she was able to access all the services relevant to her needs however this case study and the case study previously highlight that there is still a clear need for system change regarding the various other aspects of support and the relevant services that our client's access.

Housing

At SHP we have adapted our approach to housing our Housing First clients inclusive of Project Kali. We are now utilizing our in house PRS service to assist in the procurement of PRS properties for our clients. This has several benefits such as the ability to use approved landlords that we have established relationships

²² Team Around Me, a collaborative approach to system blockages

with and are familiar with our client's group so issues can be dealt with in a proportional and effective manner to ensure that our clients are able to sustain their tenancies.

Covid led to a shift in housing for local authorities, with the Everyone In initiative moving an estimated 90% of rough sleepers into hotels, bed and breakfasts and other temporary accommodation (as reported in the Local Government Authority (LGA) report based on MHCLG statistics)²³, with MHCLG outcomes highlighting that in London 3,509 people were provided emergency accommodation in response to Covid-19 pandemic²⁴

Although temporary housing is not be the solution to this due to the cost and the existing issues around temporary accommodation, the pandemic highlighted that when there is a large-scale multiagency approach to housing, rapid and very successful outcomes can be achieved with the LGA outlining that the main contributor to the 'Everyone In' success included:

- Rapid and expansive response in picking up and accommodating people sleeping rough and people living in unsafe conditions at risk of sleeping rough.
- Comprehensive needs assessment, including health, substance abuse and specific needs of women.
- Characteristics of hotel accommodation giving important feelings of safety and self-worth.
- Multi-agency services coming to the emergency accommodation and encouraging engagement.
- Councils working closely with a broader range of partners than usual, including health, criminal justice, housing associations and the voluntary and charitable sectors. This led to a better understanding from all partners of what the others could do and the potential to bring together and allocate different sets of resources in new ways.

On a local level we have seen these changes across the local authorities we work in, with Redbridge council now in the process of trialling a social housing offer for our Housing First service, which Project Kali clients who meet the criteria will be able to access. This is a great first step and we will be continuing to work closely with Redbridge to ensure the success of this approach and continue to seek out to the sector to expand the social housing offer for our Project Kali clients.

This report also highlighted specific interventions in relation to support for women, particularly those facing domestic abuse, with some intervention beings:

- Involving specialist Violence Against Women and Girls (VAWG) agencies in planning move-on accommodation and support for women, which takes into account that many are survivors of domestic abuse.
- Not evicting any domestic abuse survivor from emergency accommodation without an offer of accommodation and support
- Providing specialist accommodation and support for women facing multiple disadvantages, including Housing First where appropriate.

This highlights the need for a different approach to ensure that women survivors of violence and abuse and those requiring ongoing specialist support are supported in a clear manner.

²³ Lessons learnt from councils' response to rough sleeping during the COVID-19 pandemic, Local Government Association, 2020

²⁴ Coronavirus (COVID-19) emergency accommodation survey data: January 2021, Ministry of Housing, Communities and Local Government (MHCLG), 2021

Female specific support

The Mapping the Maze report²⁵ outlined various recommendations for improving Services for women experiencing multiple disadvantage in England and Wales based on a review of services across these areas looking at Support for women experiencing multiple disadvantage in the areas of, Substance use support, Mental health support, Homelessness support, Support for women involved with or at risk of offending and Other support.

They found that services were very siloed, addressing a singular need i.e., substance misuse and not an intersection of needs i.e., substance abuse and involvement in offending. In relation to offending they found that most support exists in women's centres and outside of this they found that in terms of identified offending support there were 9 liaison and diversion schemes, 5 through the gate resettlement support services and 23 type of gender specific provision for women under probation.

Additionally, in terms of other types of support they found women's centres were the most common type of support available, followed by Support for women involved in sex work. It was report that there are only 8 community-based domestic and sexual abuse services for women with complex needs and 7 services that support women who have had their children removed from their care.

Overall, they concluded that holistic, strength based, culturally inclusive, person centred, and emotionally safe services were the most valued and successful services.

Although this study is now four years old and the number of services may have increased due to increased focus around gender specific support and initiatives such as the Mayor's Office for Policing and Crime (MOPAC) funded female offender diversion pilot and the Ministry of Justice's commitment to invest £5 million of cross-Government funding over two years in community provision for women²⁶, the conclusion of this study still rings true to support for women in 2021 and going forward.

Project Kali acts as an embodiment of the above recommendations, by using a holistic and person-centred approach by way of the Housing First model. Through maintaining fidelity to this model, we continue to work to ensure that this remains true. As mentioned in the data review section the service is currently at case capacity however due to the niche support gap that this service provides, we are exploring how we can acquire additional funding to increase the capacity of the service through additional workers to begin to support more female ex-offenders with multiple disadvantage.

Internally as an organisation we have begun to explore what gaps exist in local support around the understanding of female specific issues and how we can work to support our partner agencies in their support of our clients. This may be through training around the Team Around Me approach, conversations about trauma-informed work in relation to female ex-offenders, the language to use in relation to issues such as sex work and how to be conscious of this in their day-to-day work. We have started seeking out to local agencies to understand what training exists to support our staff to provide the best support for our clients.

²⁵ Mapping the Maze, Service for women experiencing multiple disadvantage in England and Wales, Alliance for Women & Girls at Risk (AVA), 2017

²⁶ Female Offender strategy, Ministry of Justice, 2018

Conclusion and next steps

As outlined across the various sections in this report we have seen excellent outcomes from the Project Kali service so far, the issues mirrored in the service widely reflect the large systemic issues that affect both female rough sleepers and female ex-offender rough sleepers with multiple complex needs. This has been evidenced throughout the report in the various mentioned report.

At SHP we are committed to our gender-specific work and have committed in our 5-year strategic plan to scale up Project Kali, to ensure that we are able to continue our work with female ex-offenders with multiple complex needs and expand this support both in terms of the length and capacity of the service.

With Project Kali being one part of the wider system, we will continue to work closely with partners we have developed so far however over the next 6 months we will seek to:

- Continue to explore social housing options and opportunities for the service and our clients, working to utilising the social housing models for Housing First clients that are currently operational within our existing services when seeking additional opportunities. Whilst continuing to work closely with the PRS team to secure tenancies for our clients upon their move from TA.
- Contact organisations and bodies within the sector such as the Mayor's Office for Policing and Crime (MOPAC), the Greater London Authority (GLA), relevant Local Authorities (LA) and Homeless Link to discuss how the aims of Project Kali align to existing and expanding priorities around female offending and multiple disadvantage. In Addition, seeking to promote the service and seek additional funding for the expansion and continuation of the project.
- Explore our gender specific work organisationally and work to develop an internal offer of training around sex-work and other relevant issues.
- Continue to work on our internal and external communications around Project-Kali and our gender specific work.
- Work closely with clients to further develop our Co-production work, including quarterly surveys with clients and focus groups, expansion of our current survey to capture more client data around their service experience and using this information to begin to inform parts of our work such as supporting clients to find meaningful uses of time and social engagement.
- Explore access to counselling and therapeutic group work with clients to ensure that they can access all the support relevant to their needs.