



Guidance to support implementation of strategy

Guidance on gender-informed practices

Here we set out practices that organisations can take to embed gender-informed working within homelessness and multiple disadvantage contexts.

This is by no means a comprehensive or restrictive list, but intended as an aid to recognise and support development of gender-informed services

and practices. It should be noted that any gender-informed practice should also be trauma-informed.

This information is based on our interviews and surveys, existing literature and continuing conversations with a wide range of services conducted over the past year.

Support characteristics

- Expert VAWG and multiple disadvantage support and understanding.
- Trauma-informed working with an understanding of gendered experiences which may lead to trauma, including all forms of gender-based violence, child removal and sex working.
- Support around gender-specific needs which include but aren't limited to: pregnancy, having children removed from care and child protection processes, sexual violence and exploitation, sex working, all forms of VAWG including harmful practices, gendered experiences of the criminal justice system, gendered economic precarity (including financial abuse, lower earnings, impact of maternity, childcare and caring duties on ability to work and earn, benefits needs).
- Caring, kind and empathic approach.
- Support centred on building relationships and trust between client and service/worker.
- Working at the client's pace and level of need, with an individualised approach, and to the client's identified priorities.
- Emphasis on agency, empowerment and offering choice wherever possible.
- Flexibility in service provision and approach.
- Non-judgemental approach without assumptions, for example around relationships.
- Involvement of the client in decision making and multi-agency meetings.
- Provision of psychological support for clients and for advising and guiding staff.

In-depth understanding

- Understanding of gendered and intersectional causes and experiences of homelessness, including VAWG, child removal, gendered contact with the criminal justice system, economic precarity, and racism and discrimination.
- Understanding of risks based on experiences of homelessness, multiple disadvantage and cultural identity, for example awareness of the impact sexuality, gender, cultural background, race and ethnicity can have on the nature of risk and violence, whether from partners, wider personal networks or the public (such as racially motivated abuse and violence from the public).
- Strong understanding of VAWG and its ongoing impact.
- Trauma-informed working with women should understand the stigma women face when they do not conform to stereotypes and therefore the more severe responses they often receive when exhibiting trauma responses such as aggression or emotional distress.
- Understanding of lack of trust and breakdowns in relationships with services and figures of authority, particularly for women who have had children removed, fear deportation, or have experienced systemic racism, discrimination and marginalisation.
- Understanding of complexity of relationships, particularly within the context of homelessness and multiple disadvantage.
- To improve understanding, whole services should be trained on VAWG - including harmful practices and sexual violence - women's homelessness, multiple disadvantage and trauma-informed working. Training should include understanding of intersectional experiences of homelessness and violence, including impacts of race, ethnicity, sexuality and gender.

Practical - staff

- Support, training and processes in place to support safe engagement with perpetrators by staff and safe interventions and responses in the case of witnessing incidents. This is important in safely addressing dangerous behaviours and turning attention from victim/survivors to perpetrators, thereby supporting prevention as well as responses to violence.
- Support for workers, including reflective practice/clinical supervision, awareness of and support for symptoms of burn-out, compassion fatigue, and vicarious and secondary trauma.
- Support for workers must include adequate training and access to advice outside their specialism.

Practical - service

- Referral processes should be wide-reaching and non-restrictive, reaching out to services women may approach first or feel safest at (including VAWG services), and reducing or removing barriers to entry such as CHAIN verification or local connection.
- Safety planning and risk assessments informed by an understanding of experiences of homelessness and multiple disadvantage and the differing risks and safety measures involved.
- Slower, more informal assessment processes. Longer engagement periods with an emphasis on building trust and relationships.
- Limited conditions on engagement and what this looks like. Where cases have to be closed, re-engagement with a service should be as easy as possible. Case closure for women should not solely be based on e.g. a set number of unanswered contacts taking little account of lifestyle, patterns of engagement, access to phones and potential coercion and monitoring from partners.
- Gender-informed outcomes, including a mix of 'soft' and 'hard' outcomes. See guidance below.

- Workers and services must have time, capacity, support and appropriate outcomes structures in place in order to be truly able to work with gender-informed practices.
- Policies and procedures around VAWG, working with couples, and responding to incidents of violence between clients, both within and outside of the service.
- Close partnership working with other agencies to provide integrated support, particularly with VAWG services. Training and co-locations between specialist services, including VAWG

and led ‘by and for’ organisations. VAWG services can also support through advice to professionals, particularly valuable if support workers have concerns which the client is not yet ready to address with a VAWG service. This can help workers to feel supported by expert staff and help build their own knowledge and expertise and could include case consultations for more in-depth support.

- Shared responsibility across the service and across partnerships, pathways and forums.



Guidance on gender-informed accommodation

As the strategy sets out, gender-informed accommodation is crucial to improving women's experience in homelessness settings. Here we set out attributes of gender-informed accommodation, many of which are applicable to mixed and single-sex settings.

This is by no means a comprehensive or restrictive list, but intended as an aid to recognise and support development of gender-informed services and practices.

This information is based on our interviews and surveys, existing literature and continuing conversations with a wide range of services conducted over the past year.

There are some very positive small-scale models and some experienced services can have good practices in working with women, however this is

far from widespread. This may in part be due to the lack of recognition of and guidance on specific need and risks, and replication of traditional models which allow less for innovation and are not designed with women in mind.

There are some excellent services, but commissioners should be analytical when considering replication of high demand services, looking at quality of service and whether the model best meets the range of needs. High demand may be an illustration of lack of choice and desperate need for services for women and a range of options are likely necessary for meeting demand and needs. Services in existence should be supported to develop comprehensive gender-informed practices, including support around capacity and set-up.

Environment

- There should be a range of mixed-sex and single-sex accommodation within boroughs. There should be enough services to cater for a range of needs and for a range of recovery stages, for example emergency, supported, second stage and move on accommodation.
- Single-sex services should ideally be small-scale.
- Accommodation should provide physical and psychological safety through trauma-informed approaches.
- Accommodation should include safe regular spaces for women to use and women-only clusters of rooms within mixed-sex accommodation.
- Proactively inclusive to LGBTQ+ and trans women, including training, policies and inclusive use of language.
- Accommodation must have private spaces for casework support and individual, sensitive conversations. Projects without this severely limit vital onsite support and relationship building.

Principles of working

- Relative flexibility and non-punitive approaches, for example around eviction and returning to service (where possible).
- Understanding of the gendered use of accommodation, including absences at varied times of the day or night or more extended absences, for example due to relationships which can involve coercion, fear of violence or sex working practices.
- Policies and training around safe working with couples, including risk management policies.
- Ability to work safely with potential perpetrators, including residents.

Support

- Suitable support for level of need.
- Specialist VAWG and multiple disadvantage workers and leads.
- Close links, co-locations and partnerships with intersecting support services.
- Flexibility in working and engagement, including key-working sessions outside accommodation.
- Provision of language support.
- Gender-informed outcomes, including a mix of 'soft' and 'hard' outcomes. See Guidance below.

Access

- Within mixed-sex accommodation, ring-fence spaces for women in order to respond to patterns of referral and need, include longer referral times, and gradual moving in periods.
- Support gradual move-in where possible, including viewing, engagement support and staggered assessment and intake processes.
- No requirements for CHAIN verification for women and limited requirements for local connection for women, and/or exchange options with other boroughs.
- Wide referral pathways linking to VAWG services, social services, health, criminal justice system and self-referral where possible.
- Out of hours/24 hour intake for emergency accommodation and emergency spaces.
- Access for women with no recourse to public funds.
- Supporting emergency transfers in case of changing safety risks.

Other

- Whole organisational training on VAWG and trauma-informed working for mixed and single-sex services, including on sexual violence and the needs of women who are sex working. Training should include understanding of intersectional needs and experiences and services should have close partnership working with led 'by and for' organisations to improve accessibility.
- Policies and procedures around VAWG, working with couples, responding to incidents of violence between clients, and eviction in the case of domestic abuse.

Developing existing mixed-sex accommodation services

The above points are applicable, but services could particularly focus on:

- All staff training on VAWG and experiences of women who are homeless.
- Development and use of gender-informed walkthroughs and audit tools to support and equip services to enhance provision for women.
- Create safe women's spaces and/or clusters of women's rooms within services.
- Introduction of gender-informed policies and procedures on VAWG and working with couples.
- Specialist in-house VAWG and multiple disadvantage workers/leads. Drop-in sessions and co-locations with led 'by and for' services and wider support services.

Further information can be found in Guidance on gender-informed practices above.

Guidance on gender-informed outcomes

This guidance details considerations for formulating gender-informed outcomes for services working with women experiencing homelessness.

This work has been compiled due to a repeatedly identified need in the Women's Development Unit's survey and interviews with London-based services and practitioners, and responses from women with lived experience to us and other projects. This has been produced from feedback from these sources as well as a specific focus group with a range of stakeholders, and existing and new research and reports on this emerging and important matter, including Fulfilling Live's recent Re-thinking Outcomes guide and WiSER project evaluations.

It is worth noting that while this is an emerging area of work, a number of specialist projects have been successfully developing their work with outcomes over recent years. While there is less established convention in terms of how these outcomes are worded and measured against, there is plenty to replicate and build on, and evidence to show that these methods of working can be very successful.

It is also worth noting that these projects are often funded through non-government and local authority funding sources, which is seen by some

projects to have increased their ability to innovate and explain their approach. This could be due to less restrictive application processes and a greater openness to innovation.

The considerations below are not an exhaustive or prescriptive list: outcomes for services need to be considered in the context of the service and its clients, and in conjunction with both client and service. Formulating gender-informed outcomes should be done with creativity and a recognition that adaptations and development may be needed.

It should be recognised that some of this more relational work may be in progress already as necessary for achieving existing outcomes. Adapting outcomes will better allow for this vital work; improve consistency; reflect the need for this work in service design and commissioning; and improve reporting of progress made by workers and clients which currently goes largely unseen. Without gender-informed and relational outcomes, more relationship-based work is harder to justify and complete and is hindered by targets and outcomes which don't fully support it. It is also harder to demonstrate the true impact of a service's work with a client.



What are gender-informed outcomes

Overall, gender-informed outcomes involve using a trauma-informed approach, a focus on relationships and relational, ‘softer’ outcomes, and an awareness of the specific and intersecting needs of women.

Gender-informed outcomes should take into account gender-specific needs, including:

- Support around safety, risk and experiences of VAWG
- Support for pregnancy and sexual health
- Support around sex working
- Support around sexual violence and sexual exploitation
- Support around child contact, child protection processes and child removal

Relational and hard and soft outcomes:

There is increasing understanding of the need for holistic and trauma-informed support for those facing multiple disadvantage, which should be reflected in the way we set outcomes and measure progress towards them. Effective outcomes centre around building relationships to improve engagement and trust with services, and increasing agency.

This is particularly the case for women experiencing homelessness and multiple disadvantage who are likely to have a higher level of need, have been repeatedly let down by a wide variety of services and been unable to find trusting support, and whose sense of agency may be further reduced through repeated experiences of violence, abuse and control.

Practitioners repeatedly reported to us that building relationships and trust is a vital prerequisite to any successful progress with women. It should be noted that this was accompanied by fears of not having the capacity or expertise to support the higher level of need and risk, especially within their existing caseload size and without recognition of the increased support required.

Using relational outcomes and outcomes focused on factors such as wellbeing is therefore crucial to working with women.

Fulfilling Lives describes relational, hard and soft outcomes as follows:

“Distinction is often drawn between ‘hard’ outcomes (such as moving into employment, maintaining a sustainable tenancy, or improved health) and ‘soft’, and ‘relational’ outcomes (such as improved confidence, quality relationships or engagement with services).

Traditionally, far more emphasis is placed on hard outcomes. However, better support for people experiencing multiple disadvantage means changing that convention and placing more weight on relational outcomes.”

Fulfilling Lives also found that:

“[Services supporting people experiencing multiple disadvantage] have focused on relational approaches that seek to get to know better the people they support, thereby creating more trust between people and organisations, developing better connections with services, and supporting individuals’ power, choice, and autonomy.

These relational approaches are progressively showing results. They are throwing a spotlight on the difficulties experienced by society’s most vulnerable people and are providing a greater understanding of the need for wholesale system change.”

Wider considerations in formulating gender-informed outcomes

What does success look like?

Who is defining success and are all stakeholders (including clients) agreed on the definition of success and progress? Policy makers, commissioners, service providers and clients may be inadvertently working against each other if they are working towards different measures of success.

What is realistically achievable and what are realistic timeframes for success?

What resources do services have to achieve outcomes such as moving into accommodation, or securing mental health support? If services cannot control access and supply of accommodation, or mental health pathway processes, for example, their control over progress towards these outcomes may be limited. Unrealistic targets and timeframes may mean clients are set up to fail

through pressure to take unsuitable accommodation options which remove them from their support network, do not provide enough support, or are inappropriate environments. This can cause clients to disengage in response. In contrast, much positive work can and is done to support clients to be ready for accommodation. This work is often not reported and may be undone through unsuitable accommodation options.

Do commissioning practices allow for or encourage applications that explore different outcomes and approaches?

Services can be discouraged from using a less established approach if application processes do not support this or allow for explanation of the approach.

Supporting delivery against gender-informed outcomes

- To successfully use gender-informed outcomes without adding to pressure on a service, they should be used alongside gender and trauma-informed working practices and approaches. This includes smaller caseloads, sufficient support for staff, training, specialist staff (VAWG and multiple disadvantage workers/ leads), longer service timeframes, longer support periods and client-led practice.
- Having in-house or access to external women's safe spaces can support progress against relational and gender-informed outcomes.
- Close partnership working and multi-agency client meetings (involving the client) can help to achieve shared goals, avoid duplicate work and support relational outcomes around improving engagement with services.
- Services often face pressure and lack of capacity, making innovation and adopting new approaches practically difficult. Services should be supported deliver against gender-informed outcomes through developing and placing higher value on work which often goes unrecorded. This may help avoidance of adding to expectations and workload.
- Progress towards gender-informed outcomes can be achieved through gradual change, for example inclusion of one or two new outcomes for re-commissioned or new projects and within existing models. More significant change, however, will require funders to work with services and clients to reassess what success looks like and how services can be supported to achieve this, for example through providing longer-term funding models.

Important principles for formulating gender-informed outcomes

- Co-production: women with lived experience, frontline workers and service managers should be involved in designing outcomes for new projects or adapting outcomes for existing projects.
- Project outcomes should include a combination of 'softer' and 'harder' outcomes and shorter and longer-term outcomes.
- Outcomes should allow for individualised work at the client's pace, on their priorities and reflect their circumstances and experience. For example, progress and success against an outcome may look different for each client.
- Outcomes should be flexible in response to work completed with other agencies, focusing on complementary aims or supporting engagement with that service on that goal. For example, engagement with drug and alcohol services on stabilising or reducing problematic substance use which may be vital for a sustainable accommodation outcome.
- Outcomes should reflect different starting points, pace and relativity of progress. Progress should be measured at regular intervals against starting measures, rather than final outcomes alone. For example, for some, registering with a GP may be simple, for others it could take a year and mark a significant change. Alternatively, a woman may recognise and be ready to receive support to leave an abusive relationship; another woman may not identify an abusive relationship as her greatest risk and may not wish for support with this. Beginning to identify risk may therefore be a significant achievement for her. Measuring progress at intervals also helps to recognise non-linear progress (e.g. progress followed by relapse), which measurement only at case closure or disengagement may not capture.
- Time and capacity is necessary for building trust. Progress may involve multiple re-engagements with the service. Time-limited interventions should therefore be avoided as far as possible and case closure should be non-punitive and allow for easy re-engagement.
- Involve clients in reporting outcomes and reflect their progress back to them, ensuring their perspective is recorded and their progress is celebrated with them, providing motivation.

Outcome areas

- Improved understanding of VAWG, increased engagement with conversations around VAWG, risk and safety.
- Increased physical and psychological/emotional safety.
- Reduced level of risk and reduced contact with perpetrators where applicable.
- Improved engagement with services (including the service in question and external services).
- Improved relationships with the service and workers as well as with personal networks. Increased support networks.
- Safer or reduced involvement in sex working (as relevant to needs/circumstances).
- Improved engagement with discussions on mental health and with mental health services, and improved mental health.
- Improved confidence, self-esteem and self-efficacy and increase in sense of value.
- Improved wellbeing and self-care/reduction of self-neglect.
- Access to training and opportunities to develop skills.
- Improved health-seeking techniques and understanding, including increased awareness of how to access support, increased engagement with discussions on health and increased access to services, including support with sexual health.
- Support needs around children and pregnancy.
- Increased financial independence and wellbeing.

Gender-informed outcomes can have a significant impact within more traditional and fixed service set-ups, but the more flexible and less fixed service outcomes can be, the more individualised support can be. As an example, WiSER (a specialist project working with women facing VAWG and multiple disadvantage) focuses on achievement against broad aims which encompass the varied experiences of clients:

- Access to sustained support
- Economic wellbeing
- Health

- Safety
- Opportunities to enjoy and achieve

WiSER measure progress against these outcomes as 'distance travelled', taking into account different starting points and pace.

Measuring and indicators

Measuring against relational outcomes is less established practice and by its nature harder to measure. Measuring therefore involves greater use of qualitative data, a more creative approach and an acknowledgement that it will divert a little from existing quantitative practices.

- A mixture of quantitative and qualitative indicators should be used to meet different needs and demonstrate different outcomes as appropriate.
- Qualitative measures should include feedback from the client as well as professional judgement and evaluations from practitioners.
- Qualitative data should be highly valued and can complement and interpret quantitative data. For example, client attended 2 out of 5 appointments (and comparison to previous attendance) and client feedback and professional judgement showed this was more meaningful engagement/ had x impact/ resulted in x actions.

- Actions taken should be reported as well as the impact these actions had, based on client feedback and professional observation. For example, client attended in-reach hair appointment and appeared more cheerful in the following days/reported feeling good/ seemed to have increased autonomy and agency, self-esteem.
- Measurements against outcomes should account for different starting points and pace.
- Examples of data collection can include client questionnaires, professional observation and reflection and client interviews. A combination of approaches are likely to be needed as, for example, a client's view of their progress may be more negative than other observers, but an improvement in a client's view of progress may be an indicator in itself.



Guidance on gender-informed commissioning and funding

This guidance details considerations for developing gender-informed commissioning and funding.

The project's attention was drawn to commissioning at an early stage and repeatedly throughout the year as a key component in ensuring adequate and suitable provision for women and the difficulties for women-specific projects in fitting into existing commissioning frameworks. It was also noted as a mechanism for

effecting culture change. Also noted was the need for support from above to help commissioners to encourage and enact change, for example through making women's homelessness a priority in national, regional and local strategies and policies.

The considerations below are based on the project's work in interviews and conversations with a range of stakeholders across the year, including a specific focus group with stakeholders including service providers and commissioners.

What needs to change?

- Time restraints for commissioners and services were reported as a significant factor in limiting opportunities for innovation, ambition, building better practice and restricting scope of services. Without women's homelessness being seen as a priority or a specific and emphasised need, stakeholders at all levels reported that good practice work addressing women's homelessness is seen as an 'add-on' and therefore 'the first thing to go' when taking into account time to apply, funding limitations and pressure to deliver. There is a clear need to extend timeframes at nearly every point of the process, but in absence of this, ensuring women's homelessness is a priority and including at least some requirements for gender-informed practices will ensure it can be included and considered as essential from the start.
- Co-production is vital for developing gender-informed services and commissioning, but time and resources are frequently factors preventing this. To support commissioners to co-produce, processes and lived-experience groups should be established so that there are resources to access quickly and it becomes standard practice. The establishment of lived experience groups and consultation processes would have beneficial reach and use far beyond commissioning.
- There is widespread recognition that services supporting women and people with multiple disadvantage are hindered by being funding as pilots and short-term projects. Setting up and closing down services within a short space of time furthers experiences of abandonment and feeling let down by services, hindering engagement and recovery and producing additional and more complicated work for the next service to re-establish engagement. While short-term models with gender-informed practices and relational models can still have very good success, their effectiveness is greatly hindered by the short timeframe. To be most effective, services need to be commissioned over longer timeframes, allowing for consistency of support - including when clients return from gaps in engagement - increased trust and greater feelings of safety. Short project timeframes and commissioning cycles also lose vital professional knowledge and expertise and contribute to increased staff turnover.
- Gender-informed outcomes are important for ensuring women receive gender-informed and effective support. Commissioning can support the development of gender-informed outcomes as well as gender-informed practices.
- It is notable from existing research and interviews that led 'by and for' VAWG services have particularly suffered from cuts to funding in recent years and over the pandemic. Reduction in provision and lack of integration between led 'by and for' and generic services may impact on support for particular needs and understanding within services. Commissioners could look at providing greater

support to new and existing grassroots, community and led 'by and for' services and promoting partnership working between existing led 'by and for' and generic services.

- Many (though not all) projects and pilots displaying innovative and trauma-informed practice have funding that isn't reliant on

government and local authority sources. This can in some ways increase opportunities to innovate, perhaps in part due to less restrictive application and reporting processes which better support trialling new or different approaches.

How we can achieve that change?

- Ring-fence or allocate funding for bed spaces, specialist worker posts and improving gender-informed practices (for example through training). Ring-fencing can help to account for different patterns in sourcing referrals and the need in some cases for a longer move-in timeframe for women, and can support services to allocate budget to make effecting working with women a priority. This can help with resource commitment and ensuring equality of provision.
- Establish gender-informed practices such as specialist VAWG and multiple disadvantage roles, training and gender-informed policies (see above Guidance on gender-informed practices), as specified aspects of tender requirements, with expectations on services to report on progress in this area.
- Time restraints were frequently raised as an issue in terms of writing tender requirements and the speed at which new services are often required to set-up and mobilise. Ideally time could be spent formulating innovative and rethinking existing services to best support women, including longer mobilisation periods, which could be a long-term goal. In absence of this, adding gender-informed requirements to existing tender structures would allow all parties to focus on this from the start, even in time-sensitive situations for both commissioner and provider. Services reported that this would help them to ensure this is essential from the start, rather than an extra factor which can more easily be dropped due to lack of time and resources.
- Adaptations to procurement processes could allow for scoring for inclusion of gender-informed practices and negotiation of models prior to decision-making to allow for commissioners and services to explore and explain how their work will be effective for women. This is particularly important as services reported that the nuances of their project can be hard to express within frameworks and application processes which currently reflect more traditional models.
- Speak to existing specialist projects supporting women, particularly those funded through different routes, to increase understanding of how current commissioning applications and processes restrict communication of the impact of projects and how they work, and what would support services to apply. Where commissioners have launched bids which were expected to attract more women-specific projects, speak to services which may have been expected to apply to understand the barriers, which can often include restrictive application processes and time pressures.
- Increase understanding of current service limitations in providing gender-informed provision and how this can impact underrepresentation of women in data and services. Walkthroughs of existing services with women with lived experience to examine which aspects of services form barriers for women or could be more gender-informed would support understanding of limitations and aid commissioners and services in identifying how provision can be improved, helping to prepare for future commissioning/funding.
- Funding requirements that encourage and facilitate collaboration between the VAWG and homelessness sectors, for example through co-located staff, resourced training and joint forums.
- Emphasis on or requirements for partnership bids within tenders, including with VAWG and specialist led 'by and for' services. This can improve provision of specialist support by ensuring a single service does not have to provide for a full range of needs, and can

support specialist grassroots organisations to provide support through funding models which may ordinarily be closed off to them, for example due to capacity or need for building space. This would also acknowledge the incredibly wide range of needs which third sector homelessness services are usually have to meet without specialist input.

- Encourage and include gender-informed outcomes within tenders and grant agreements, supporting organisations to develop and deliver these.

- Consider in-depth mapping of existing services which provide support to women, improving awareness for commissioners and services about services available as well as the gaps in provision. Mapping should not simply consider numbers of bed spaces against CHAIN/rough sleeping figures as this will not reflect the true picture of need, the pace of move-on within services, and the suitability of services for meeting a range of needs.

Indicators for commissioners that services are considering the needs of women and working with gender-informed practices

- VAWG training for the whole service/organisation.
- Specialist female caseworkers for working with women, VAWG and multiple disadvantage.
- Specialist women's/VAWG leads to promote understanding of needs and experiences and embed approach across the whole service and organisation.
- Increased welfare checks for women, for example where there are concerns about risk of VAWG.
- Focus on relationship building and long initial engagement periods.
- Women's spaces, including clusters of women's rooms within accommodation services.
- Prioritisation of physical and psychological safety, including expert gender and trauma-informed safety planning and risk assessments.
- A sensitive approach to engagement, evictions, use of bed spaces and needs of women with NRPF which understands the impacts of women's needs, risks and experiences.
- A focus on choice, agency and person-led support, working at the women's pace.
- Trauma-informed approaches, including small caseloads and support for staff.
- Provision of psychological support which can meet women-specific needs, including access to support in their first language, from a female therapist, and therapists with an expert and cultural understanding of VAWG and its impacts and risks, multiple disadvantage, and the impact of child removal.
- Partnerships and strong links with VAWG services and led 'by and for' services.

Further information can be found in Guidance on gender-informed practices above.



Guidance on wraparound and multi-agency services

This guidance details example attributes of multi-agency and holistic, wraparound support to meet the varying needs of and counter access barriers faced by women experiencing homelessness.

The need for better and increased multi-agency working has been made clear by practitioners and service users alike since the start of our work, with women feeling repeatedly let down and retraumatised by communication breakdowns and lack of aligned working between services, compounded by the need for support from a large number of varied services.

Likewise, it has been clear that often having to move support or accommodation services, and therefore repeatedly ending support with services and workers, breaks trust and prevents long-term recovery. Wraparound services can help to prevent this.

Multi-agency and wraparound services are also needed due to the difficulties and exclusion women with multiple disadvantage repeatedly face in accessing services due to stigma, discrimination, lack of understanding, and capacity, which frequently require the support of a specialist advocate to resolve.

The information provided here is based on barriers and recommendations raised throughout our interviews, survey, contact with services and women with lived experience, a specific focus group on this topic with a range of stakeholders, and examples from existing best practice services.

This is not a comprehensive or step-by-step guide to such services. Those setting up such services would benefit from contact with existing projects and there are existing good practice projects which could be expanded or replicated.

What do we mean by multi-agency and wraparound?

Wraparound support should be holistic support from a specialist advocate or navigator at the intensity a woman needs (rather than low needs floating support, for example), with a focus on trust and relationship building. This support can work well when not attached to accommodation so that support can move with the woman through accommodation changes, avoiding repeated changes in support leading to disengagement, disruption to recovery and support breakdown. When attached to accommodation, this works well in gender-specific Housing First programmes which are having significant success, for example in Westminster run by Standing Together and Solace, and Fulfilling Lives Islington and Camden in conjunction with Solace WiSER support.

Multi-agency support requires a close network of professionals working with in-depth understanding of VAWG and multiple disadvantage. It also requires shared information and referral processes to avoid continual repetitions of traumatic personal information, support strong communication and provide coordinated support.

To be most effective, wraparound and multi-agency intervention can be provided together to be able to meet the range of needs, share responsibility and risk, and support common difficulties in needing to engage with multiple providers at once. Projects such as this could include a single caseworker/navigator as the lead worker for the client within the network of agencies.

Considerations

- Projects could be cross-borough, allowing for broader reach and ensuring eligibility isn't borough based. This is particularly important as some women will need to leave an area due to violence, which often results in a breakdown of support.
- Projects could be cross-sector funded to improve integration across sectors, including VAWG and health. Ending and preventing women's homelessness requires an approach that reaches beyond the housing and homelessness sector.
- A large model could include a multi-agency project with workers from a range of different agencies and specialist multiple disadvantage and VAWG advocates. This could also be a multiple disadvantage service with advocates with different specialisms such as mental health, problematic substance use, sex working, immigration, VAWG, physical and sexual health. All workers should have understanding of VAWG and multiple disadvantage.
- A smaller model could be a team of female multiple disadvantage and VAWG advocates/navigators (including specialists from a range of led 'by and for' organisations), with close and established links, referral pathways and networks with other agencies.
- Currently, there is a very small number of multiple disadvantage projects doing this specialist work. This means they are only able to work with those with the very highest levels of need, and can only work with a small number of clients. There is a need for many more such services who can therefore work with a greater number of women and a greater range of need. This can reduce threshold for access, therefore helping to prevent levels of need from escalating to crisis point and high complexity. Intensive work at earlier stages is vital for prevention and better intervention.
- It should be noted that working with women facing multiple disadvantage, homelessness and experiences of VAWG is very intense work. This is what makes support difficult to provide within large caseloads and traditional support models, and can lead to high levels of burn-out, even in specialist services. Workers need intensive support and staff turnover may be regular.

Key principles of multiple disadvantage and wraparound projects

- Strong understanding of multiple disadvantage, VAWG and trauma for all partner services and workers.
- Strong communication processes between services.
- Strong agreement on principles, approach and aims between partner services.
- Strong understanding from all staff of needs and experiences specific to women, including pregnancy and maternity, child contact and removal, VAWG including harmful practices and sexual violence, and sex working, supported through comprehensive training. This should include recognition of specific needs and experiences, for example relating to sexuality, age, gender, race and ethnicity, immigration, and disability.
- Wide referral pathways linking to VAWG services, social services, health, criminal justice system and self-referral where possible.
- Emphasis on choice, and work should be client-led and individualised with no one size fits all approach.
- Limited conditions on engagement and what this looks like. Where cases have to be closed, re-engagement with a service should be as easy as possible.
- Long/gradual initial engagement periods.
- Peer mentorship/support programmes can be successful integrated support for clients.

- Assertive outreach practices from services and workers, enabling workers to meet clients 'where they are', physically and emotionally.
- Projects should have psychological support delivered with a flexible and trauma-informed approach, providing support to clients and expert advice to workers.
- A key focus on building trusting relationships with the client. Advocates should be working to engage clients beyond keywork/action-focused work and in different environments, with value given to all types of engagement.
- A key aim should be to eventually reduce dependency on the project and lead worker, empowering and developing the client's ability to engage with services independently.
- Key aims should include increasing safety and reducing risk.
- Projects should have gender-informed outcomes and practices, as well as gender and trauma-informed approaches.
- Projects will likely need to work to develop strong relationships with and support upskilling of services and professionals outside the project. This vital work should be recorded and recognised.
- Services could include specialist workers/ advocates to support women through pregnancy and child protection processes. This is a specialist area of support which often falls to workers who may have limited knowledge of processes, or to children's social workers who through their responsibilities can have a complex dynamic with parents involved in child protection plans.
- Projects could be linked to support for women in and leaving prison, or who have contact with the criminal justice system, including specialist in-house workers and close links to probation services.

Key structures

- Clear roles and responsibilities for workers, managers and organisations/services involved.
- Clear lead workers for each client as the main point of contact to build a trusting relationship with the client and to coordinate work with other agencies. Where possible, clients should have some choice around lead workers as the relationship is key and agency is important.
- Joint or shared assessment processes which are trauma and gender-informed and are written with an intersectional perspective. (Effective and safe information and data sharing should be considered carefully from the start).
- Connected to or hosting a women-only safe space where women can access support from the service, as well as have a safe space to use as they need, access groups and activities and meet basic needs. This can support greater access to the service, as well as improved wellbeing and trust.
- Joint agency meetings which include the client, supporting her to be a key agent in her own recovery.
- Reflective practice/clinical supervision and support for workers and whole teams with strong management structures to ensure effective support for staff. Staff from different specialisms must be able to access regular support and advice from within their own specialism.
- Low caseloads of 5-7 clients per worker.
- Close working with and involvement of statutory services is essential.

Key services identified as being present in the project or directly connected:

Core specialist staff and services:

- Specialist multiple disadvantage support
- Specialist VAWG support, including from led 'by and for' services
- Homelessness services (specialist third sector services)
- Housing services (statutory)
- Psychological support

In addition:

- Mental health services
- Drug and alcohol services
- Immigration advice and support
- Adult social services
- Led 'by and for' services, including support for Black and minoritised women
- Gender-informed outreach
- Language support
- Peer mentoring
- Probation/criminal justice system
- Children's social services
- Perpetrator services

Projects should also have workers from, close relationships or drop-in sessions with:

- GP and health services
- Sexual health clinic
- Welfare benefits support
- Hospitals
- Maternity services
- MARAC and police



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Solace

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St Mungo's

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Glass Door

Housing For Women

Marylebone Project

Micro Rainbow

Sign Health

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Solace

Solace is a leading specialist charity in the UK supporting women and children experiencing domestic abuse and sexual violence. Whatever form violence comes in, from rape to trafficking to relationships based on psychological or financial control, we work to end it. We know that escaping the effects of violence can be the hardest thing to ever do. That's why the lifesaving support that Solace provides to more than 23,000 women, children and young people each year is so important.

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Solace Women's Aid is a charity registered in England & Wales. Charity number 1082450. Company number 3376716.

Women's Development Unit

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The Connection at St Martin's

The Connection at St Martin's works with people who are rough sleeping to move away from, and stay off, the streets of London. We're alongside people as they recover from life on the streets and move towards a meaningful, fulfilling future. We do this by tackling the underlying causes of rough sleeping as well as offering practical help and support to get into accommodation.

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