

## Appendix C: Equality Impact Assessment - Rough Sleeping Addendum: Homelessness Prevention Strategy

Reference No	EQUA591
Title of proposed EIA	Rough Sleeping Addendum: Homelessness Strategy
EA is in support of	New Strategy
Responsible Officer(s)	Rashid Ikram, Kalvinder Kohli
Directorate	Adults Social Care
Division	Commissioning
Service Area	Homelessness and Rough Sleeping
Created	10/11/2020 11:40
Quality Control Officer(s)	Channa Payne-Williams
Accountable Officer(s)	Kalvinder Kohli
Purpose of proposal	
Data Sources Used in the EA	<p>Data Sources Used in the EA</p> <ol style="list-style-type: none"> <li>1. Surveys &amp; consultation results taken as part of consultation on the strategy with, <ol style="list-style-type: none"> <li>i. people with lived experience of homelessness;</li> <li>ii. stakeholder professionals working within the homelessness sector;</li> <li>iii, members of the public.</li> </ol> </li> <li>(See: Rough Addendum &amp; Action Plan, Final RS Addendum Consultation Findings Report November 2020)</li> <li>2. Relevant Strategies - The overall <a href="#">Birmingham Homelessness Prevention Strategy</a> launched in 2018 which is the current active strategic framework for the preventing and tackling all types of homelessness in the city.</li> <li>3. Statistical Database - snapshot date of 116 rough sleeping outreach service clients - covering twelve-month period up until August 2019.</li> <li>4. Relevant Local and National Research: <a href="#">Birmingham Homelessness Review (updated 2017)</a>; <a href="#">Health Care Issues Among the Homeless in Birmingham</a>; Analysis of routinely collected patient data from a specialist homecare centre (University of Birmingham; Birmingham Rough Sleeping Needs Analysis January 2020 (BCC Adults Social Care), <a href="#">Ending Social Injustice in Exempt Accommodation</a>, Research and Feasibility Report from Commweal Housing, <a href="#">MHCLG Homelessness Statistics</a></li> </ol>
<b>QUALITY CONTORL SECTION</b>	
Could the policy/proposal be modified to reduce or eliminate any adverse impact?	Yes, suggested actions included in EA and amended strategy.
How will the effect(s) of this policy/proposal on equality be monitored?	Progress on delivery the strategy will be reported annually, with more regular periodic updates provided to stakeholders. Regular updates include monthly reporting to, Birmingham Homelessness Partnership Board, Birmingham Homelessness Forum and Rough Sleeping Service Users.
What data is required in the future?	At year 2 of the strategy (April 2022) - a review of all data should be fed into a comprehensive homelessness review as per legal requirement. The Homelessness Act 2002 requires local authorities to regularly review the levels (and likely future levels) of homelessness in their areas, and to formulate a homelessness strategy.
Are there any adverse impacts on any particular group(s)	None
If yes, please explain your reasons for going ahead.	None

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<b>Socio-economic impacts</b>	<ul style="list-style-type: none"> <li>▪ Housing exclusion experienced by people who end up rough sleeping or homeless, is frequently associated with broader socio-economic policy impacts and outcomes. Immigration and nationality legislation is one such area of social policy, which directly impacting on access to public funds and consequently access to housing to mitigate destitute rough sleeping.</li> <li>▪ Homelessness also is strongly linked to lower incomes levels that require support from housing benefit and consequently access to a more limited range housing and accommodation. This can often be associated overcrowding, sofa surfing and other precarious housing circumstances making their housing unsuitable. For people under the age of 35 the the range of housing accessed on housing benefit, is accessed is limited accommodation falling with shared room rates of housing benefit (£60 per week).</li> <li>▪ Rough Sleeping Households - come from Single adults and couples without dependent children due to their priority status (under housing law) with housing assistance, the top reason for homelessness amongst this group is friends and family no longer willing to accommodation, followed by the ending of a tenancy.</li> </ul>
<b>Please include any other sources of data</b>	<p>5. Other - feedback on the received on the draft strategy from local stakeholders including Birmingham Homelessness Forum, BCC Public Health, Healthwatch Birmingham, Homelessness Partnership Board.</p>

### ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS

<b>Protected characteristic:</b> <b>Age</b> <b>Age details:</b>	<p>Service Users / Stakeholders</p> <ul style="list-style-type: none"> <li>▪ The proposed actions in the Rough Sleeping Addendum seek to address age characteristics and inclusion positively with proposed delivery of services spilt into two broad groups (16 to 24) young people and older adults (25 and over), with adaptable pathways of support for groups with specific care and support needs.</li> <li>▪ Consultation finding results where respondents disclosed details within specified age groups by largest group were; 35 to 59 years of age (48%); 25 to 34 yrs.; 65 and over (16%); 18-24(5%; 60-64 (3%)</li> <li>▪ The overall age profile taken from available caseload (Summer 2019) of rough sleeper reveals in contact with rough sleeping outreach services, 4% are aged under the age of 25 years; 86% are aged 25 to 49 years; and 10% are aged 50 years &amp; over.</li> </ul>
<b>Protected characteristic:</b> <b>Disability</b> <b>Disability details:</b>	<p>Service Users / Stakeholders</p> <p>The Rough Sleeping Addendum and associated actions consider a range of needs such as physical and mental needs.</p> <ul style="list-style-type: none"> <li>▪ Although overall sample of 87 was relatively small, 30% people taking part had lived experience of homeless and rough sleeping. Statistical data clients known to rough sleeping outreach services (Autumn 2019) had a recorded long-term sickness or disability that prevented them from working.</li> <li>▪ National research conducted by the University of Birmingham into the health needs people accessing specialist homelessness health situated in and covering Birmingham, "demonstrated a high prevalence of multi-morbidity, mental health conditions particularly substance and drug misuse; and infectious diseases, notably hepatitis C, amongst the registrants of the specialist homeless healthcare centre in Birmingham. The extent of multi-morbidity identified in this population, despite their mean age of 38.3 years, is comparable to 60-69-year olds in general population."</li> </ul>

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	<ul style="list-style-type: none"> <li>To strengthen work in this area it is recommended that over the course of the strategy - work is undertaken covering health and more broadly accessibility to ensure services prevent exclusion. It is suggested links are made with new and established peer informed and led research in Birmingham included Health Now, No Wrong Door, HealthWatch Birmingham.</li> </ul>
<b>Protected characteristic: Sex</b> <b>Gender details:</b>	<p>Service Users / Stakeholders</p> <p>The proposed actions in the strategy seek to address gender characteristics sensitively and positively with regards to women. The action plan recognises the skewed nature of and types of accommodation which present some potential barriers, with a commitment to explore and address specific provision for women affected by rough sleeping.</p> <ul style="list-style-type: none"> <li>Caseload statistics indicate 87% of rough sleepers in contact with outreach services are male and 13% female.</li> <li>It is recommended to further strengthen the strategy, opportunities to engage with regionally commissioned research concluding in 2021, to inform future action plan updates.</li> </ul>
<b>Protected characteristics: Gender Reassignment</b> <b>Gender reassignment details:</b>	<p>Not Applicable</p> <p>Insufficient data to determine negative or positive impact.</p>
<b>Protected characteristics: Marriage and Civil Partnership</b> <b>Marriage and civil partnership details:</b>	<p>Not Applicable</p> <p>Insufficient data to determine negative or positive impact.</p>
<b>Protected characteristics: Pregnancy and Maternity</b> <b>Pregnancy and maternity details:</b>	<p>Service Users / Stakeholders</p> <p>Caseload statistics indicate 13% of rough sleepers are female. Actions include identifying and addressing gaps in provision for women includes alternatives to refuge and local provided authority accommodation.</p>
<b>Protected characteristics: Race</b> <b>Race details:</b>	<p>Service Users / Stakeholders</p> <p>The proposed actions in Rough Sleeping Addendum seeks to address gaps in provision linked to this protected characteristic through action associated with migrant homeless communities.</p> <ul style="list-style-type: none"> <li>The main gaps linked to race are also associated with immigration and nationality status, in relation to migrant communities that experience no recourse to public funds with some becoming destitute rough sleepers.</li> <li>65.5% of rough people sleeping in contact with the outreach services were White British and 12.1% from BAME communities.</li> <li>Looking more closely at the 14% destitute rough sleepers (No Recourse to Public Funds), the largest ethnic group was White Other 69% (mainly EU countries), followed by 12.5% Black African.</li> </ul>
<b>Protected characteristics: Religion or Beliefs</b> <b>Religion or beliefs details:</b>	<p>Not Applicable</p> <p>Positive impacts have been identified through the inclusion of working with community and faith-based organisations that have been involved in working collaboratively with the council in the provision of support to individuals in the form assistance with feeding, clothing and up until the COVID-19 pandemic communal night cold weather night shelter provision. All commissioned providers of services are expected to demonstrate diversity competencies as part of the contract selection and award processes.</p>

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Protected characteristics: Sexual Orientation	Not Applicable
Sexual orientation details:	Positive impact
Socio-economic impacts	<ul style="list-style-type: none"> <li>Housing exclusion experienced by people who end up rough sleeping or homeless, is frequently associated with broader socio-economic policy impacts and outcomes. Immigration and nationality legislation is an area of social policy, directly impacting on access to public funds and consequently access to housing to mitigate destitute rough sleeping.</li> <li>Homelessness is strongly linked to lower incomes levels that require support from housing benefit and consequently access to a more limited range housing and accommodation. This can often be associated overcrowding, sofa surfing and other precarious housing circumstances making their housing unsuitable. For people under the age of 35 the range of housing accessed on housing benefit, is accessed is limited accommodation falling within shared room rental rates of housing benefit (£60 per week). For single adults and couple without dependent children, the top reason for homelessness is friends and family no longer willing to accommodation, followed by the ending of a tenancy.</li> </ul>
Please indicate any actions arising from completing this screening exercise.	<ul style="list-style-type: none"> <li>Include on-going consultation and engagement with people with that have lived experience of rough sleeping and homelessness as part overall actions associated with Rough Sleeping Addendum &amp; Action Plan.</li> </ul>
Please indicate whether a full impact assessment is recommended	No. The amended Strategy following the conclusion of the consultation include actions address this.
What data has been collected to facilitate the assessment of this policy/proposal?	Please see details of listed data sources referred to at the beginning of this assessment.
Consultation analysis	<p>Respondents overall very positive and support of the proposed policy.</p> <p>See Executive Summary and Key Findings of Final RS Addendum Consultation Findings Report</p>