

# **Birmingham Homelessness Prevention Strategy 2017+**

Consultation Findings Report

October 2017

v0.3

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## Executive Summary

### I. Introduction

Birmingham strives to be a city where everyone works together to eradicate homelessness. This is our vision for the new Birmingham Homelessness Prevention Strategy.

Approval to consult on the proposed new Strategy was granted by Birmingham City Council Cabinet Member for Housing and Homes and Corporate Director for Place on 16 August 2017.

The public consultation focused on the proposed vision, key aims and associated approaches to preventing homelessness in Birmingham.

### II. Key findings

The proposals put forward to tackle homelessness in Birmingham and prevent it happening in the future received a good response with 276 questionnaires submitted.

The consultation had 4 questions relating to the proposals. All of the proposals received majority agreement. This ranged from 84.1% in support of using the Positive Pathway model as the city's new approach to tackling and preventing homelessness; to 99.3% respectively supporting the assistance of people if they do become homeless so that their homelessness can be relieved, and supporting people to recover from their experience and stay out of homelessness.

### III. Recommendations

The following recommendations are being made in line with key areas of the Birmingham Homelessness Prevention Strategy consultation.

**Agreement with the proposal that the vision for the new Homelessness Prevention Strategy should be that 'Birmingham is a city where we all work together to eradicate homelessness'.**

In line with the findings of the consultation, it is recommended that the proposed vision is confirmed as the vision for the Homelessness Prevention Strategy.

**Agreement with the proposal that the strategy should focus on five key aims:**

**a. To ensure people are well informed about their housing options**

In line with the findings of the consultation, it is recommended that *'ensuring people are well informed about their housing options'* is confirmed as one of the aims of the strategy.

**b. To prevent people from becoming homeless**

In line with the findings of the consultation, it is recommended that *'preventing people from becoming homeless'* is confirmed as one of the aims of the strategy.

**c. To assist people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support**

In line with the findings of the consultation, it is recommended that *‘assisting people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support’* is confirmed as one of the aims of the strategy.

**d. To support people to recover from their experience and stay out of homelessness**

In line with the findings of the consultation, it is recommended that *‘supporting people to recover from their experience and stay out of homelessness’* is confirmed as one of the aims of the strategy.

**e. To enable people to secure homes that they can afford and maintain**

In line with the findings of the consultation, it is recommended that *‘enabling people to secure homes that they can afford and maintain’* is confirmed as one of the aims of the strategy.

**Agreement with the proposal to use a new approach called the Positive Pathway model to tackle homelessness and prevent it happening in the future.**

In line with the findings of the consultation, it is recommended that the Positive Pathway model is confirmed as the new approach to tackle homelessness and prevent it happening in the future.

**Agreement with the proposal that to be successful, a multi-agency approach is needed with key partners from across the Council, Social Care, Health, Criminal Justice, Social and Private Housing Sector, Voluntary and Third Sector, and Education all working together.**

In line with the findings of the consultation, it is recommended that a multi-agency approach is confirmed as key to successfully tackling homelessness, and is integral to delivery throughout the life of the strategy.

## **1. Introduction**

### **1.1 Proposed approach to preventing homelessness**

Birmingham strives to be a city where everyone works together to eradicate homelessness. This is our vision for the new Birmingham Homelessness Prevention Strategy.

Strategic partners from the Housing Birmingham Partnership, and across the City Council, Health, Housing, Voluntary and Third Sectors all recognise that homelessness is an important priority for our city; and have all committed to working together to tackle the issue and prevent it from happening in the future.

To achieve our vision, the new strategy sets out five key aims for Birmingham to focus on:

- Ensure people are well informed about their housing options;
- Prevent people from becoming homeless;
- Assist people as soon as possible if they do become homeless so their homelessness can be relieved by securing sufficient accommodation and support;
- Support people to recover from their experience and to stay out of homelessness;
- Enable people to secure homes that they can afford and maintain.

### **1.2 Consulting on the proposed approach**

Approval to consult on the new Strategy was granted by Birmingham City Council Cabinet Member for Housing and Homes and Corporate Director for Place on 16 August 2017.

The public consultation focused on the proposed vision, key aims and associated approaches to preventing homelessness in Birmingham.

The consultation was open from 24 August to 5 October 2017 and received a total of 276 responses. A further 38 responses were received after the consultation period had closed. These were logged but have not been included in the analysis of findings.

### **1.3 Purpose of this report**

The purpose of this report is to present the key findings of the Birmingham Homelessness Prevention Strategy consultation.

## 2. Methodology

The general public and interested parties were invited to participate in the consultation. The consultation aimed to include as many responses from the general public and affected groups as possible through direct consultation.

To reach as many people as possible, a range of consultation methods were available.

### 2.1 Consultation documents

The consultation summary document and questionnaire were developed in two versions: standard and Easier to Read.

The summary document outlined the proposed approach and highlighted key areas for consultation (appendix 1), and was designed to support the completion of the questionnaire (appendix 2).

The consultation documents were accessible in a variety of ways including:

- Online at Birmingham Be Heard - all documents were available to the general public via this platform. The web link to Be Heard was also circulated to a wide range of stakeholders with details of how they could have their say.
- Printed questionnaire – printed questionnaires were made available at stakeholder events and were also available on request via email or telephone. Free post return was available for all printed questionnaires.
- Electronic questionnaire – an electronic version of the questionnaire was available on Birmingham Be Heard or on request via email.

### 2.2 Stakeholder meetings

During the consultation period, members of the Strategy team attended a number of stakeholder meetings to consult on the new strategy. An outline presentation was delivered at each meeting detailing context to, and a summary of the proposed approach, and attendees were invited to discuss and share their views.

### 2.3 Publicity

There has been a raft of publicity and media coverage in relation to the consultation on the proposed approach. This included:

- Individual mail out to key stakeholders (over 450), including local and regional housing colleagues, housing associations and charities, health sector, education, advice and support agencies and the local business community
- News article on BCC website which was subsequently picked up by BCC Midlands today and the Express and Star newspaper

- Birmingham Voluntary Service Council, Child Poverty Forum and Birmingham Policy Community sites and newsletters/blogs
- Consultation details tweeted by BCC, Public Health Birmingham, Sifa Fireside and Child Poverty Forum
- Birmingham Bulletin – subscription email to Birmingham citizens
- Birmingham City Council internal communications:
  - Chief Executives’ Bulletin (all BCC staff)
  - Your Weekly News (all BCC staff)
  - Adult Social Care & Health Bulletin and Directorate Information Round Up
  - Schools Noticeboard.

## 2.4 Analysis

### 2.4.1 Quantitative

The closed and demographic questions included in the questionnaire were coded according to a predetermined coding structure.

The consultation responses received on Birmingham Be Heard were extracted, checked and coded according the structure.

Once coded, the extracted data was entered onto an Excel database for analysis.

### 2.4.2 Qualitative

The open text questions included in the questionnaire were manually coded. A thematic analysis of the coded responses was undertaken to enable key themes to be identified.

### 3. Key Findings

#### 3.1 Question 1

We propose that the vision for the new Homelessness Prevention Strategy should be that 'Birmingham is a city where we all work together to eradicate homelessness'. Do what extent do you agree or disagree with this vision?

Respondents were asked to what extent they agreed with the proposed vision for the new Homelessness Prevention Strategy. Table 1 shows the responses that were received.

Overall, 96.7% of respondents indicated that they agreed with the proposed vision, with 80.4% strongly agreeing and 16.3% agreeing that Birmingham should be a city where we all work together to eradicate homelessness.

**Table 1: Responses to Question 1**

Response	No.	%
Strongly agree	222	80.4
Agree	45	16.3
Don't know	3	1.1
Disagree	3	1.1
Strongly disagree	3	1.1
Total	276	100

Respondents were then asked to provide reasons for their answers. The summary analysis of responses is as follows:

#### Delivering the vision

Respondents recognised that homelessness was a multi-faceted issue and that were some groups who were particularly affected by homelessness such as care leavers, those with drug and /or alcohol addictions, those who had experienced domestic abuse, or those who were homeless as a result of welfare policy.

As a result, respondents felt strongly that a multiagency, multidisciplinary, collaborative response was critical to the successfully deliver the vision of the strategy together.

Many respondents congratulated the highly ambitious nature of the vision whilst some expressed caution, highlighting a need to maintain a level of pragmatism due to scale of the issue in the city, and the challenges in supporting, in particular, street homeless people into housing and recovery services.

Overall, respondents welcomed the strategic approach to tackling homelessness and preventing it in the future, recognising a challenging, but achievable way forward.

### The role of local Business and Communities

It was clear from the comments made by respondents that they wanted to do more to make a positive difference to homelessness in the city. Respondents called for greater clarity on how both communities and businesses could do this, highlighting the need to be better informed about how they could be involved.

Suggestions included information for the general public on how best to donate aside from giving money, food or drink; and information for retailers about how to direct enquiries, and to seek assistance for people they came into contact with.

Some respondents felt there was an opportunity to better utilise skills and capacity from charities to, for example, co-ordinate the collective efforts targeting street homelessness.

### Collective Challenge

Many respondents expressed concern about the visible increase in street homeless people in Birmingham, calling for a collective challenge both locally and nationally to the economic and structural causes of homelessness.

## 3.2 Question 2

**For Birmingham to eradicate homelessness, we propose that the strategy should focus on the following five aims. To what extent do you agree or disagree that these aims are the right ones?**

### **a) To ensure people are well informed about their housing options**

Respondents were asked to what extent they agreed that the strategy should aim to ensure people were well informed about their housing options. Table 2 shows the responses that were received.

Overall, 96.4% of respondents indicated that they agreed with this aim, with 71.4% strongly agreeing and 25.0% agreeing.

**Table 2: Responses to Question 2a**

<b>Response</b>	<b>No.</b>	<b>%</b>
Strongly agree	197	71.4
Agree	69	25.0
Don't know	3	1.1
Disagree	5	1.8
Strongly disagree	2	0.7
Total	276	100

#### b) To prevent people from becoming homeless

Respondents were asked to what extent they agreed that the strategy should aim to prevent people from becoming homeless. Table 3 shows the responses that were received.

Overall, 97.5% of respondents indicated that they agreed with this aim, with 84.1% strongly agreeing and 13.4% agreeing.

**Table 3: Responses to Question 2b**

Response	No.	%
Strongly Agree	232	84.1
Agree	37	13.4
Don't know	2	0.7
Disagree	3	1.1
Strongly disagree	2	0.7
Total	276	100

#### c) To assist people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support

Respondents were asked to what extent they agreed that the strategy should aim to assist people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support. Table 4 shows the responses that were received.

Overall, 99.3% of respondents indicated that they agreed with this aim, with 90.2% strongly agreeing and 9.1% agreeing. Of all five aims, this was most strongly supported by respondents.

**Table 4: Responses to Question 2c**

Response	No.	%
Strongly agree	249	90.2
Agree	25	9.1
Don't know	1	0.4
Disagree	1	0.4
Strongly disagree	0	0.0
Total	276	100

#### d) To support people to recover from their experience and stay out of homelessness

Respondents were asked to what extent they agreed that the strategy should aim to support people to recover from their experience and stay out of homelessness. Table 5 shows the responses that were received.

Overall, 99.3% of respondents indicated that they agreed with this aim, with 87.7% strongly agreeing and 11.6% agreeing.

**Table 5: Responses to Question 2d**

Response	No.	%
Strongly agree	242	87.7
Agree	32	11.6
Don't know	2	0.7
Disagree	1	0.4
Strongly disagree	0	0.0
Total	276	100

#### **e) To enable people to secure homes that they can afford and maintain**

Respondents were asked to what extent they agreed that the strategy should aim to enable people to secure homes that they can afford and maintain. Table 6 shows the responses that were received.

Overall, 96.7% of respondents indicated that they agreed with this aim, with 82.6% strongly agreeing and 14.1% agreeing.

**Table 6: Responses to Question 2e**

Response	No.	%
Strongly agree	228	82.6
Agree	39	14.1
Don't know	5	1.8
Disagree	3	1.1
Strongly disagree	1	0.4
Total	276	100

Respondents were then asked to provide reasons for their answers. The summary analysis of responses is as follows:

#### **Awareness of available support**

Respondents felt that homelessness could be prevented if people were better informed about what options were available to them to support with factors such as poor health or personal debt.

#### **Timely and appropriate support**

Ensuring that support is offered in a more timely, efficient manner was vital to reducing the risks and harms that acute forms of homelessness could cause. The issue of appropriateness of response was also considered key when considering the different groups affected e.g. homeless families, or individuals with multiple and complex needs.

### Common understanding of aims

With a clear need for a multiagency response to ensure success, respondents also highlighted the need for the aims of the strategy to be appreciated and understood by all agencies involved to ensure the collective efforts of the city are maximised.

### Focus on recovery

The recovery element of the proposed strategy was well received, with respondents expressing a much needed focus for this. The importance of recovery and building resilience was noted. Respondents felt that this element was currently under-appreciated, highlighting concerns that on-going support needs went unmet even after accommodation was in place.

### Accommodation standards and supply

Respondents felt strongly about the standards of existing housing and raised concerns about the supply of new affordable housing in the city being available or delivered in sufficient quantity, quality and levels of affordability to meet homelessness related housing need.

This was reflected in a number of responses that drew attention to the amount of support provided to under 35 year olds accessing accommodation through housing benefit / Local Housing Allowance.

Support to intervene to prevent evictions in the Private Rented Sector was felt to be not widely publicised and respondents felt that more robust action could be undertaken to address quality and management standards in the Private Rented Sector.

### Resource allocation

Respondents felt strongly about the financial resourcing of the Strategy and concerns were raised as to how the proposed approaches would be funded. The scale of the challenge was recognised, and the upstream vision of the strategy and its aims were well supported but this did leave respondents questioning whether there would be sufficient resource to really be successful.

## **3.3 Question 3**

**We propose that a new approach called the Positive Pathway model is used to tackle homelessness and prevent it happening in the future. The model will focus on the following five areas:**

- a) Universal Prevention**
- b) Targeted Prevention**

c) Crisis Prevention and Relief

d) Homeless Recovery

e) Sustainable Housing

**To what extent do you agree or disagree that this is the right approach to preventing and tackling homelessness in Birmingham?**

Respondents were asked to what extent they agreed that the Positive Pathway model was the right approach to use to prevent and tackle homelessness in Birmingham. Table 7 shows the responses that were received.

Overall, 84.1% of respondents indicated that they agreed that using the proposed model was the right approach, with 54.0% strongly agreeing and 30.1% agreeing.

**Table 7: Responses to Question 3**

Response	No.	%
Strongly agree	149	54.0
Agree	83	30.1
Don't know	34	12.3
Disagree	6	2.2
Strongly disagree	4	1.4
Total	276	100

Respondents were then asked to provide reasons for their answers. The summary analysis of responses is as follows:

#### Clarity of information

Whilst there was significant support for the adoption of the Positive Pathway model as the approach the strategy will take to tackling and preventing homelessness, some respondents expressed an interest in understanding better how the Pathway would work in practice. This included understanding how the model would recognise and respond to the needs of particular groups e.g. adults aged 25+, or harder to reach clients with chaotic lifestyles.

Respondents highlighted the need to demonstrate how each of the actions undertaken within the domain areas would lead to a successful set of outcomes for the strategy. Furthermore, respondents called for the strategy to ensure all of the different partner agencies were aware and understood their role and responsibilities in relation to delivering against the outcomes – which were seen as fundamental to the success of the strategy overall.

### Prioritising the Pathway Domains

As described above, respondents were supportive of the Positive Pathway model and some went further to prioritise or focus on particular domains within the model; in particular Sustainable Housing.

Respondents cited the challenge ahead in terms of being successful in this area whilst there were continued concerns regarding quality and affordability of private rented sector housing and the supply of new affordable housing in the city.

Respondents also called for a more robust programme of engagement with tenants to help sustain tenancies, and to explore new types of housing provision suitable for sharing and priced within local housing allowance rates.

### 3.4 Question 4

**We propose that to be successful, a multi-agency approach is needed with key partners from across the Council, Social Care, Health, Criminal Justice, Social and Private Housing Sector, Voluntary and Third Sector, and Education all working together.**

**To what extent do you agree or disagree that a multi-agency approach is needed to tackle and prevent homelessness in Birmingham?**

Respondents were asked to what extent they agreed that a multiagency approach is needed to tackle and prevent homelessness in Birmingham. Table 8 shows the responses that were received.

Overall, 96.8% of respondents indicated that they agreed that a multiagency approach is required, with 81.2% strongly agreeing and 15.6% agreeing.

**Table 8: Responses to Question 4**

Response	No.	%
Strongly agree	224	81.2
Agree	43	15.6
Don't know	6	2.2
Disagree	2	0.7
Strongly disagree	1	0.4
Total	276	100

Respondents were then asked to provide reasons for their answers. The summary analysis of responses is as follows:

Many respondents suggested that (1) the Department for Work and Pensions needed to be part of the multi-agency partnership due to issues not only associated with welfare reform,

but specifically in relation to developing routes out of homelessness through employment or practical support into employment.

Respondents felt strongly that the multiagency approach needed to incorporate the involvement of the Third Sector, in particular to provide assistance to people facing hardship linked to homelessness. It appeared that respondents felt this role was currently underdeveloped, but offered real opportunities for positive change.

Respondents highlighted the importance of ensuring that current service users, people with lived experience of homelessness, as well as the general public were central to success and opportunities should be developed to include them in the multiagency approach.

### 3.5 Question 5

**Please tell us about anything else you think we should consider in our approach to tackling and preventing homelessness in Birmingham.**

#### Street Homelessness

Throughout the comments received for this question, there was a strong and recurring theme about street homelessness; with many respondents recognising the correlation between street homelessness and health, in particular mental health and substance misuse.

Respondents called for the issues of begging and street homelessness to be separated and highlighted the importance of ensuring that community sector responses to homelessness, such as food distribution schemes were monitored at in a co-ordinated way, so that they didn't risk perpetuating street lifestyles including rough sleeping.

There was some concern, and a sense of urgency, for street homeless people with winter approaching, with respondents expressing the need for, or more provision of, emergency accommodation night shelter spaces.

#### Communication

Communication was a strong theme running throughout the responses received. This ranged from the need to educate people on the most appropriate ways to support homeless people through e.g. alternative giving, to ensuring there was clear and effective communication channels between the Council and its partner agencies to strengthen information sharing.

The importance of communication with partner agencies was also key to remove potential barriers to strong, collaborative working. This was particularly important for respondents from the Third Sector, as well as by Health and Care professionals.

### Personalisation

Many respondents felt that, given the range of agencies involved, continuity of support from the point of crisis through the journey of recovery was fragmented and would benefit from more personalised support. Suggestions included broadening the range of support available such as using a more holistic approach linking for example, art, sport, and / or access to employment programmes.

Navigating the current system and accessibility of services were highlighted as barriers for people in need of services now. Some respondents highlighted the access requirements of some crisis and recovery services which required access to the internet, the use of computers and e-mail for accessing benefits and settled housing. To overcome such barriers suggestions included a greater level of partnership work with agencies such as Job Centre Plus to promote and support access to work and employment skills in a way that was both acceptable and accessible for the individual in need.

### Health

Respondents called for better targeting of provision and support for people with poor health associated with, for example, drug and alcohol misuse and mental ill health. Comments in this theme cut across all domains.

### Safe and Suitable Accommodation

Suitability, sustainability and standard of accommodation was a recurring and important theme that was highlighted by respondents. Respondents raised concerns about the suitability of some accommodation in the Private Rented Sector, in particular hostels and Bed and Breakfasts, when it came to the safety and safeguarding of vulnerable people.

This was also the case with non-commissioned provision found in the Specified Supported Accommodation Sector; where respondents were concerned that unsuitable or unsafe accommodation may in fact exacerbate other challenges that vulnerable people face such as drug and alcohol misuse.

Respondents also felt strongly about longer term issues such as the continued need to develop more social housing, and the declining supply of new affordable housing were raised. Specific actions relating to the Private Rented Sector were encouraged, including the upscaling of housing models such as housing co-operatives that could be sustained at Local Housing Allowance rates.

Other suggestions included investment in the monitoring and quality standards of Exempt Accommodation; and taking a more positive approach with registering clients living in temporary accommodation with services such as health (GPs) and education (schools). The

opportunity to strengthen the links between the Council's actions on empty homes and the Homelessness Prevention Strategy was also highlighted.

### Funding

Respondents felt strongly about the sufficiency of funding available for sustaining and improving homeless service provision, as well as the overall delivery of the proposed approach set out in the Homelessness Prevention Strategy.

Respondents called for more investment in specialist support services that could intervene early to support people and enable a more preventative approach to homelessness. At the same time, respondents recognised that resources needed to be available to support the immediate needs of those people already in a homeless crisis.

### Welfare reform and hardship

Respondents recognised the impact that the following things had on homelessness in Birmingham including limited access to the Private Rented Sector with Local Housing Allowance support, welfare reform and the introduction of the Government's Universal Credit regulations that included payments in arrears, work conditionality and sanctioning.

Respondents called for a specific prevention response to homelessness that is caused by welfare reforms; with support that would run alongside the Government roll out of the Universal Credit Programme.

In addition, the need for alternative solutions to evictions that were solely on the grounds of rent arrears was highlighted, alongside improving access to more financially inclusive services. An example of the latter put forward included access to ATM machines that do not charge for withdrawals.

## **3.6 Who responded?**

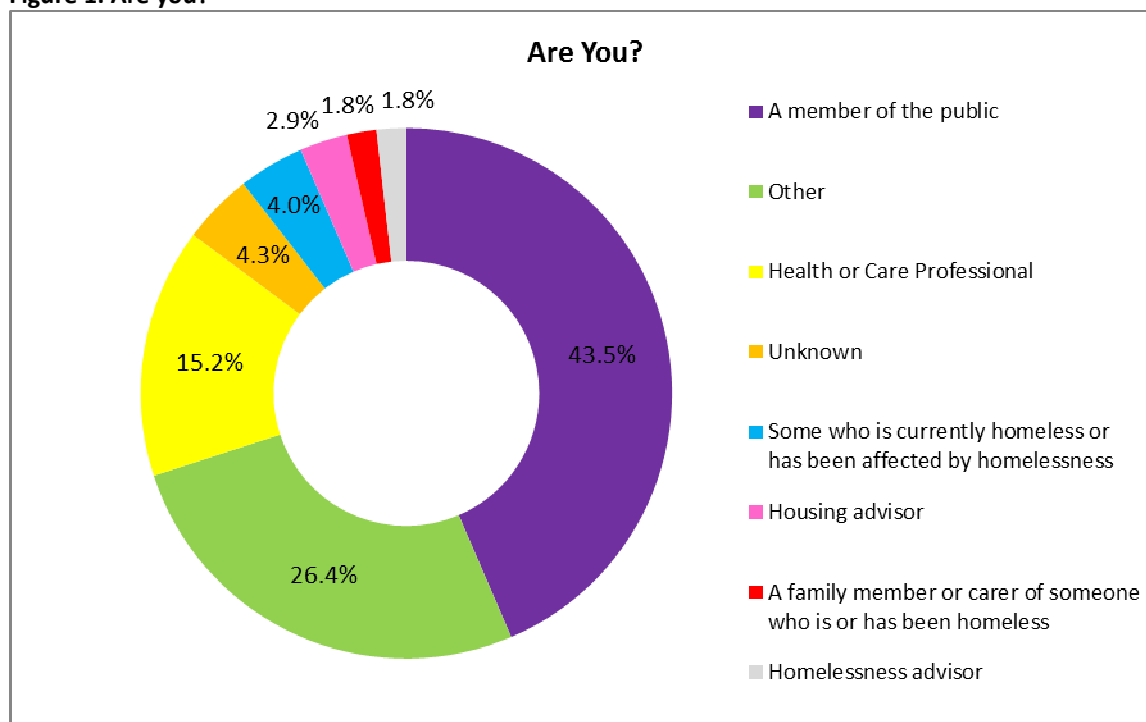
### **3.6.1 Are you?**

Respondents were asked to identify which respondent type best described their interest in the consultation.

The majority of respondents were members of the general public (43.5%) (Fig. 1).

A quarter (26.4%) of respondents selected 'Other', which in addition to options already available such as Health or Care Professionals and members of the general public, included Councillors and representatives from Charities, Supported Accommodation providers, Domestic Violence Refuges, Faith Communities and Business Improvement Districts.

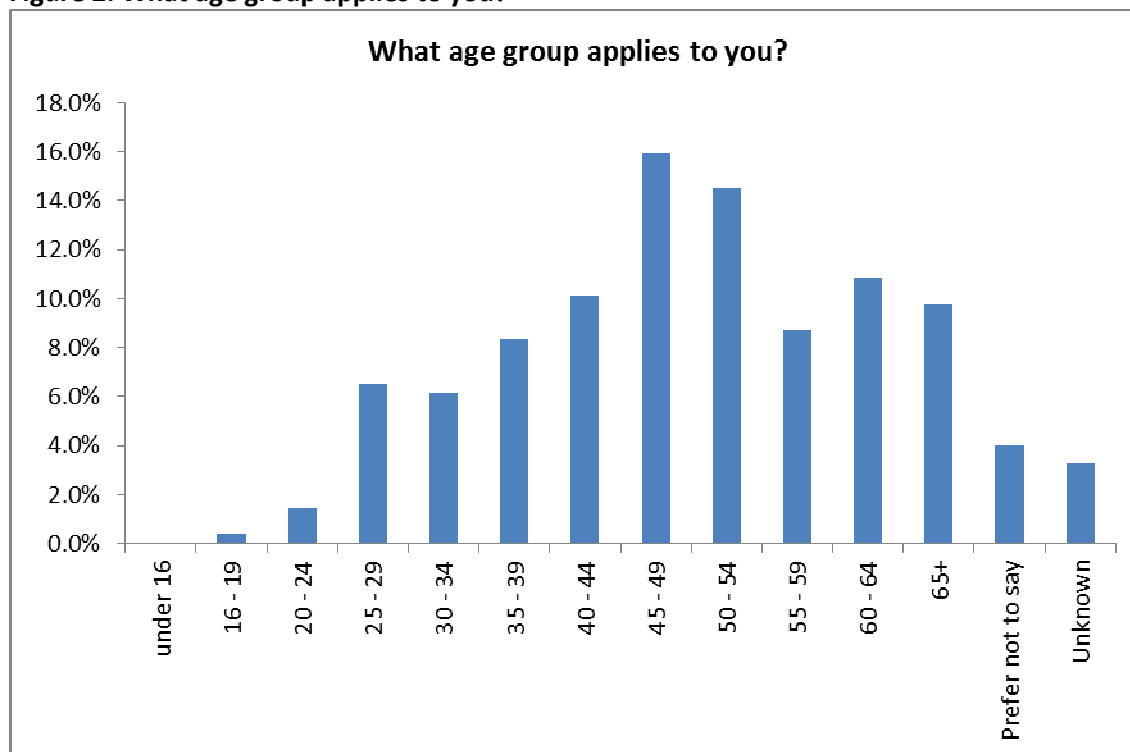
**Figure 1: Are you?**



### 3.6.2 What age group applies to you?

The majority of respondents indicated that they were 45-49 years of age (15.9%), followed by 50-54 years (14.5%) and 60-64 years (10.9%) (Fig. 2).

**Figure 2: What age group applies to you?**

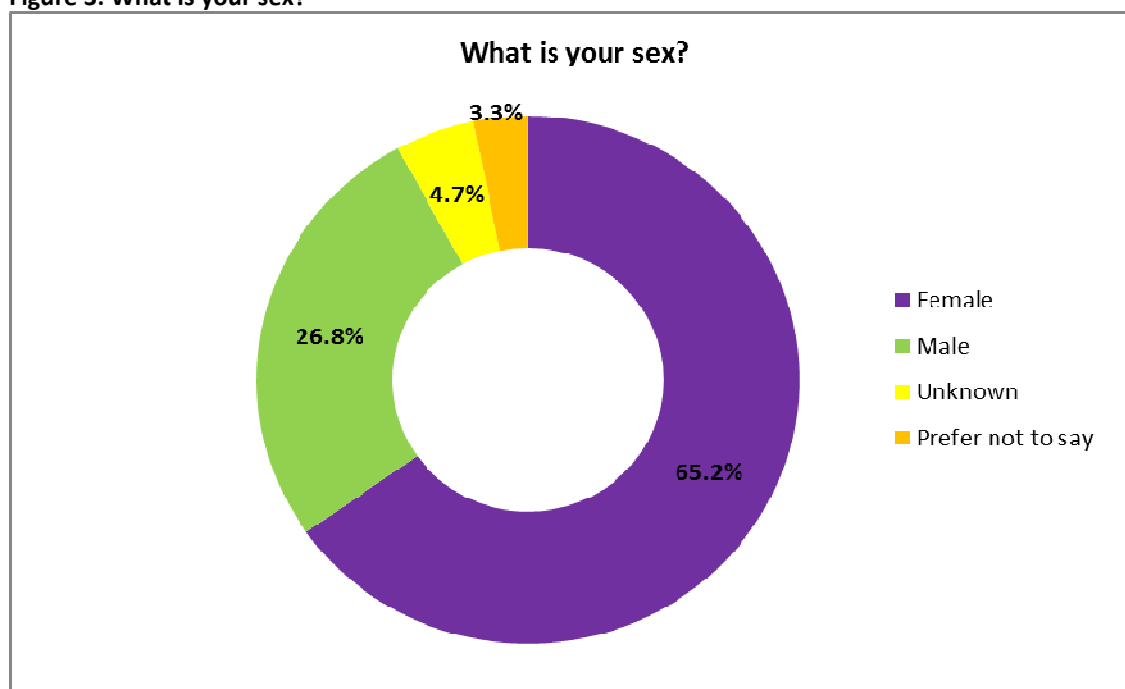


There were 4.0% of respondents who preferred not to indicate their age; and a further 3.3% who chose not to respond.

### 3.6.3 What is your sex?

Almost two thirds of respondents were female (65.2%). Just over a quarter of respondents were male (26.8%) (Fig. 3).

**Figure 3: What is your sex?**



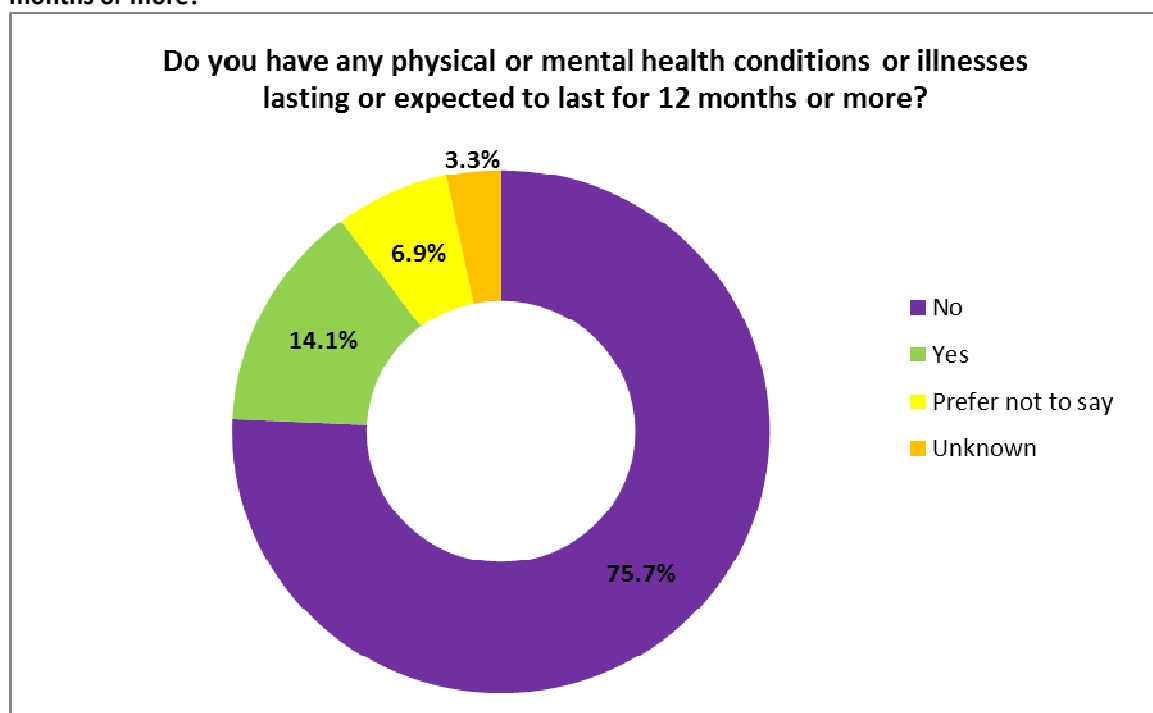
4.7% respondents chose not to respond to this question; and a further 3.3% preferred not to say.

### 3.6.4 Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?

14.1% of respondents who indicated that they did have a physical or mental health condition or illness lasting or expected to last for 12 months or more (Fig. 4).

There were 6.9% respondents who indicated that they would prefer not to respond to this question; and a further 3.3% who chose not to respond.

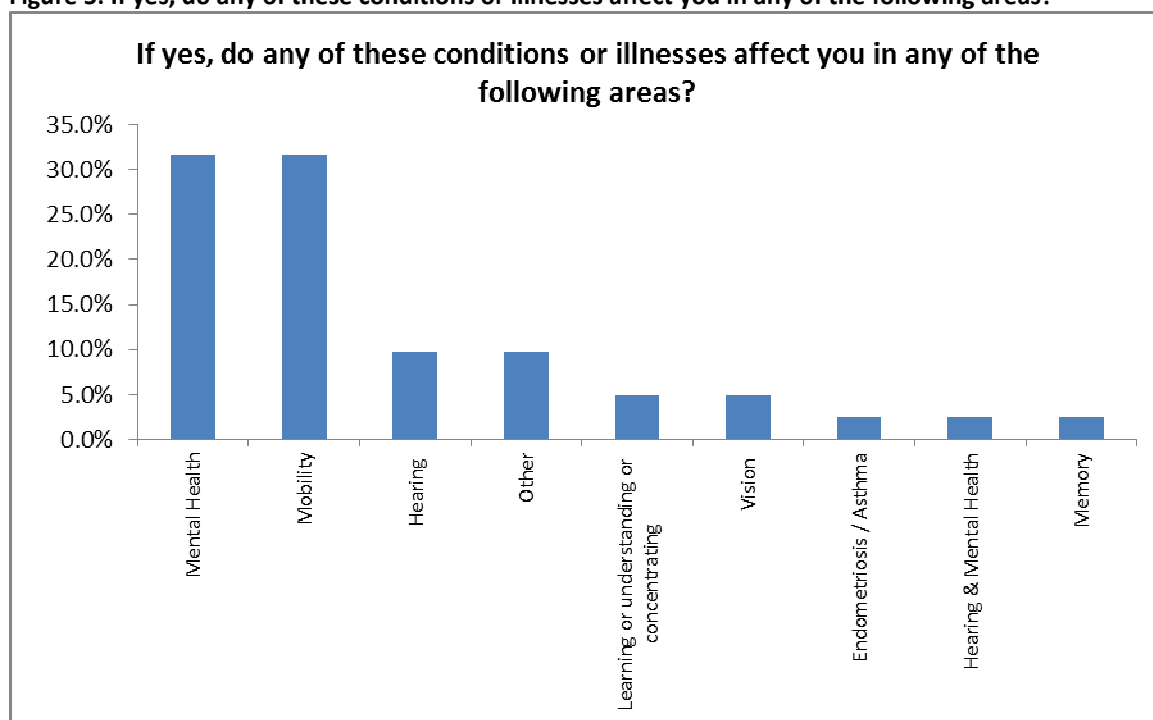
**Figure 4: Do you have any physical or mental health conditions or illnesses lasting or expecting to last for 12 months or more?**



### 3.6.5 If yes, do any of these conditions or illnesses affect you in any of the following areas?

Of the 14.1% of respondents who reported a condition or illness as described above, mental health and mobility conditions were most frequently reported (37.1% respectively) (Fig. 5).

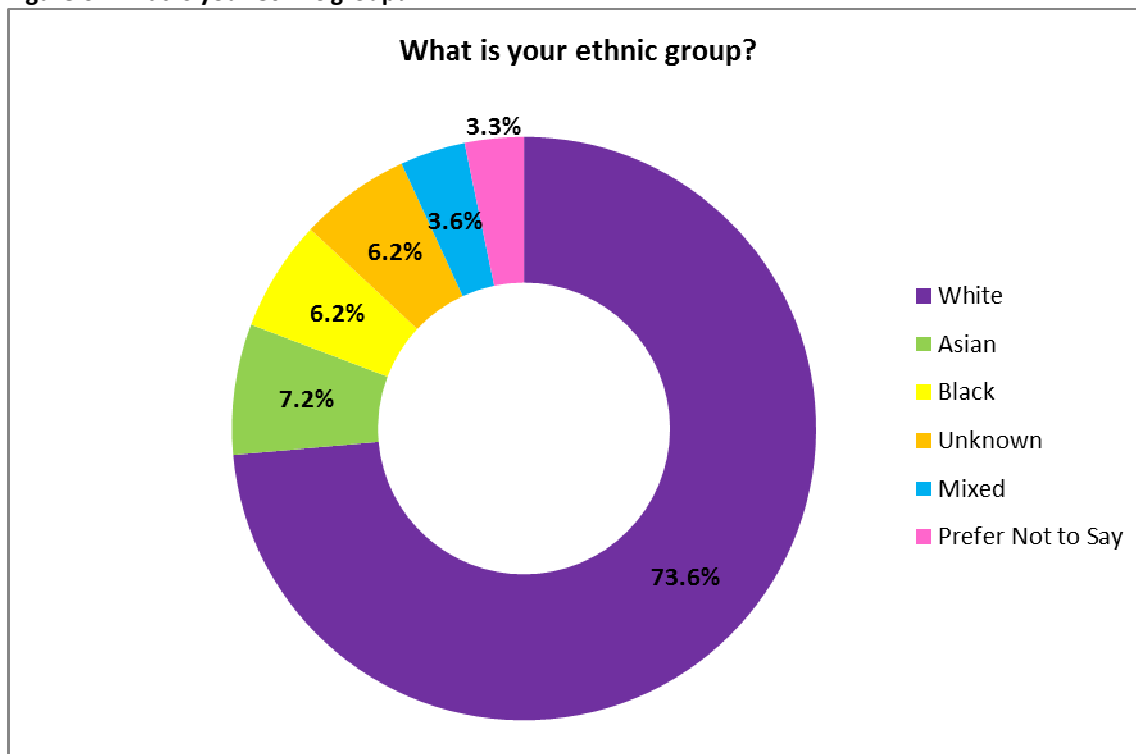
**Figure 5: If yes, do any of these conditions or illnesses affect you in any of the following areas?**



### 3.6.6 What is your ethnic group?

Almost three quarters of respondents selected White (73.6%) as their ethnic group. Respondents from Asian and Black ethnic groups made up 7.2% and 6.2% respectively of the total (Fig. 6).

**Figure 6: What is your ethnic group?**



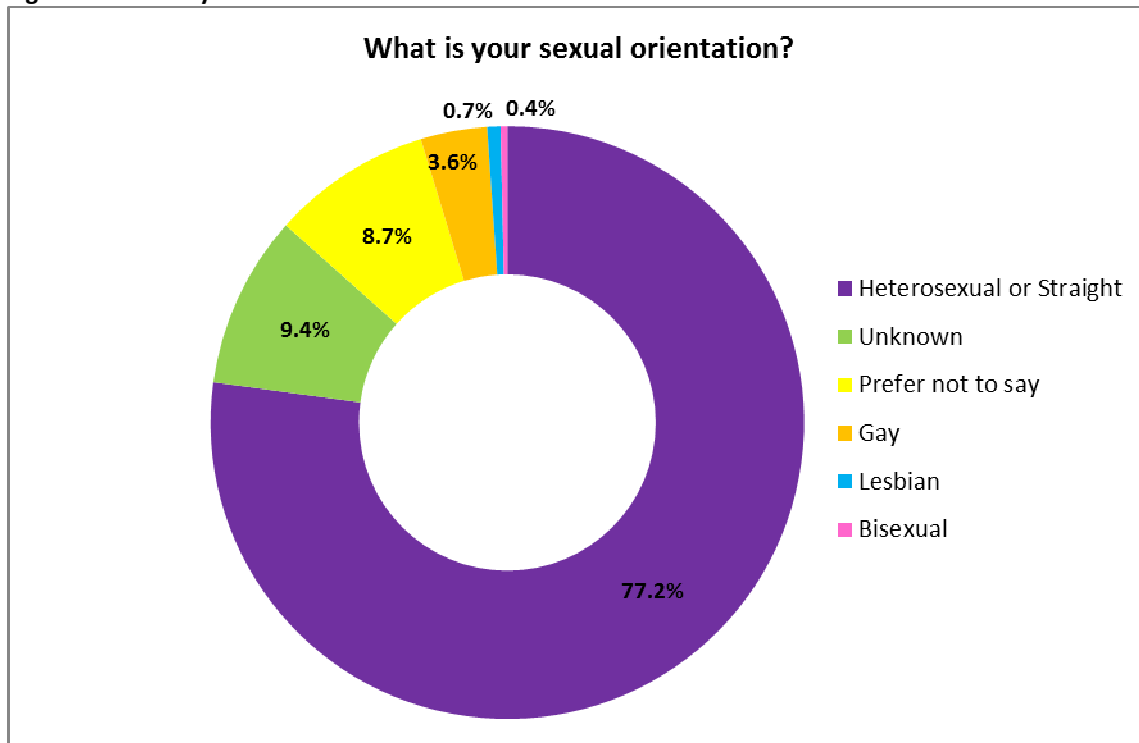
There were 6.2% of respondents who chose not to answer this question, and a further 3.3% who indicated that they preferred not to say.

### 3.6.7 What is your sexual orientation?

The majority of respondents indicated that they were heterosexual or straight (77.2%) followed by 3.6% of respondents who indicated that they were gay (Fig. 7).

Almost 1 in 10 respondents chose not to respond to this question (9.4%); with a further 8.7% indicating that they preferred not to say.

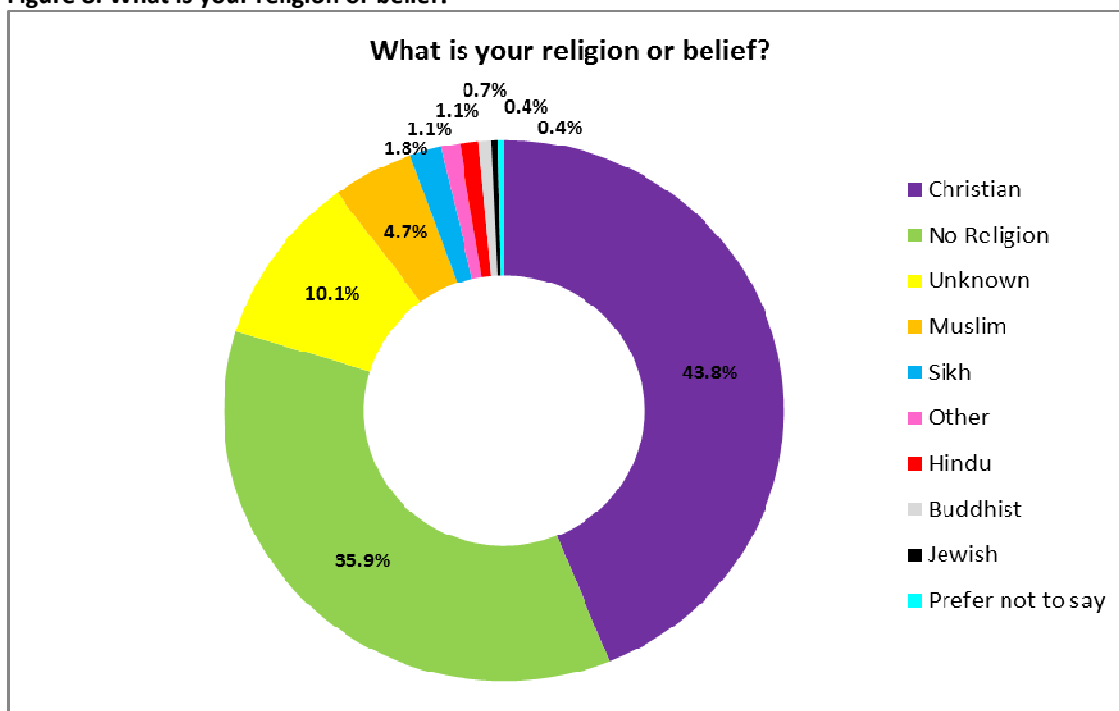
**Figure 7: What is your sexual orientation?**



### 3.6.8 What is your religion or belief?

The majority of respondents indicated their religion or belief was Christian (43.8%). This was followed by respondents who indicated no religion or belief (35.9%) and respondents who were Muslim (4.7%) (Fig. 8).

**Figure 8: What is your religion or belief?**



Again one in ten respondents chose not to respond to this question (10.1%); with only 0.4% indicating that they would prefer not to say.

### 3.7 Stakeholder feedback

Alongside the consultation that took place between 24 August and 5 October 2017, a series of consultation meetings were organised by and for different groups of stakeholders. The following groups were engaged:

- Birmingham Social Housing Partnership Housing Needs Sub-Group
- Birmingham Early Help and Safeguarding Partnership
- Birmingham Homelessness Forum
- Birmingham Adult Safeguarding Board
- West & Central Community Safety Partnership
- Birmingham Mind Experts by Experience
- Birmingham City Council Economy Directorate Management Team
- Birmingham Social Housing Executive Board
- Birmingham Health & Wellbeing Board

The following themes emerged in the feedback from stakeholders:

#### Vulnerable people and accommodation

Vulnerable people with care and support needs being housed in unsuitable accommodation was a key theme in the feedback from stakeholders. Specific issues included a lack of consistency in regulatory oversight of both standards of accommodation and the level of quality of support and care offered to vulnerable residents. The regulation into such accommodation is overseen by various national, regional and local bodies and, as a result, accommodation varied in terms of the level of oversight and monitoring of compliance with standards.

Housing with care was subject to Care Quality Commission (CQC) standards and regulatory oversight, whereas supported living was either subject to either regional oversight by Homes England (previously Homes and Communities Agency) or local authority revenue and benefits functions that involved the granting of “Specified Support Exempt Accommodation” status.

Respondents raised concerns about the variability in quality of housing type and level of support people received as a result of multiple regulators for accommodation classed as supported housing. It was noted that this sector had expanded in the city and encompassed public, private, and third sector accommodation providers, with the greatest growth in private provision registered with Homes England.

Respondents felt that providers who were specifically commissioned by the Local Authority through programmes such as Supporting People followed a more consistent set of standards for both accommodation and support. The forthcoming Government reforms in 2019 on the financing of Supporting Housing was suggested as an opportunity to address some of these concerns on gaps in regulation.

#### Importance of the of voice citizens with lived experiences of homelessness

Ensuring people with lived experience were at the centre of the Pathway development was seen as key to the success of the strategy overall. Respondents highlighted the need to continue the collaborative approach used to date and look for an opportunity to link into the range of existing service user groups established across the city by a number of different homelessness service providers.

Some respondents expressed the need for people with lived experience to receive a greater level of support to engage in the process, and suggested they should for example have more influence over agenda setting, or critically examine specific issues such as accommodation, navigation of the benefits and / or applying for housing.

#### Personalised Pathway Services

Respondents were keen to see more tailored and personalised services offered throughout the strategy model expressing the view that the current city response was difficult to navigate and lacked personal empathy.

#### Communication strategy

There was strong support for the multiagency, collaborative approach to tackling and preventing homelessness together. Respondents were clear that effective communication strategies were required to ensure that all partners were aware of, understood and committed to delivering upon their respective role and responsibilities throughout the life of the strategy.

#### Governance

Homelessness cuts across a range of strategic priorities in the city and across a number of partner organisations. In order to achieve the significant and sustained step change for success, respondents felt that a strong governance structure was crucial to driving the implementation of the strategy.

As well as drive implementation, respondents felt that the governance structure must be able to effectively influence other strategic plans to ensure that the collective efforts of the city are maximised in full.

## 5. Recommendations

The following recommendations are being made in line with key areas of the Birmingham Homelessness Prevention Strategy consultation.

### **5.1 Agreement with the proposal that the vision for the new Homelessness Prevention Strategy should be that ‘Birmingham is a city where we all work together to eradicate homelessness’.**

Overall, 96.7% of respondents indicated that they agreed with the proposed vision, with 80.4% strongly agreeing and 16.3% agreeing that Birmingham should be a city where we all work together to eradicate homelessness.

In line with these findings, it is recommended that the proposed vision is confirmed as the vision for the Homelessness Prevention Strategy .

### **5.2 Agreement with the proposal that the strategy should focus on five key aims:**

#### **a. To ensure people are well informed about their housing options**

Overall, 96.4% of respondents indicated that they agreed that the strategy should focus on this aim; with 71.4% strongly agreeing and 25.0% agreeing.

In line with these findings, it is recommended that *‘ensuring people are well informed about their housing options’* is confirmed as one of the aims of the strategy.

#### **b. To prevent people from becoming homeless**

Overall, 97.5% of respondents indicated that they agreed that the strategy should focus on this aim; with 84.1% strongly agreeing and 13.4% agreeing.

In line with these findings, it is recommended that *‘preventing people from becoming homeless’* is confirmed as one of the aims of the strategy.

#### **c. To assist people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support**

Overall, 99.3% of respondents indicated that they agreed that the strategy should focus on this aim; with 90.2% strongly agreeing and 9.1% agreeing.

In line with these findings, it is recommended that *‘assisting people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support’* is confirmed as one of the aims of the strategy.

#### **d. To support people to recover from their experience and stay out of homelessness**

Overall, 99.3% of respondents indicated that they agreed that the strategy should focus on this aim; with 87.7% strongly agreeing and 11.6% agreeing.

In line with these findings, it is recommended that *'supporting people to recover from their experience and stay out of homelessness'* is confirmed as one of the aims of the strategy.

**e. To enable people to secure homes that they can afford and maintain**

Overall, 96.7% of respondents indicated that they agreed that the strategy should focus on this aim, with 82.6% strongly agreeing and 14.1% agreeing.

In line with these findings, it is recommended that *'enabling people to secure homes that they can afford and maintain'* is confirmed as one of the aims of the strategy.

**5.3 Agreement with the proposal to use a new approach called the Positive Pathway model to tackle homelessness and prevent it happening in the future.**

Overall, 84.1% of respondents indicated that they agreed that using the proposed model was the right approach, with 54.0% strongly agreeing and 30.1% agreeing.

In line with these findings, it is recommended that the Positive Pathway model is confirmed as the new approach to tackle homelessness and prevent it happening in the future.

**5.4 Agreement with the proposal that to be successful, a multi-agency approach is needed with key partners from across the Council, Social Care, Health, Criminal Justice, Social and Private Housing Sector, Voluntary and Third Sector, and Education all working together.**

Overall, 96.8% of respondents indicated that they agreed that a multiagency approach is required, with 81.2% strongly agreeing and 15.6% agreeing.

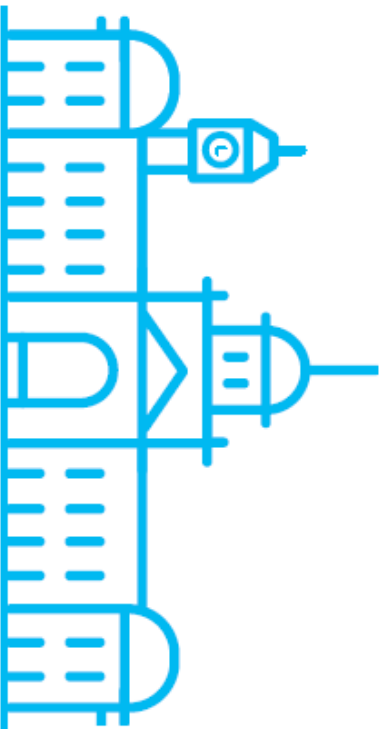
In line with these findings, it is recommended that a multi-agency approach is confirmed as key to successfully tackling homelessness, and is integral to delivery throughout the life of the strategy.

# Birmingham Homelessness Prevention Strategy 2017+



24 August - 5 October 2017

## Consultation Summary



## Birmingham Homelessness Prevention Strategy 2017+ 24 August – 5 October 2017

### What are we trying to achieve?

Birmingham strives to be a city where we work together to eradicate homelessness. This is our vision for the new Homelessness Prevention Strategy for Birmingham.

Strategic partners from the Housing Birmingham Partnership, and across the City Council, Health, Housing, Voluntary and Third Sectors all recognise that homelessness is an important priority for our city. We have all committed to working together to tackle the issue and prevent it from happening in the future.

Our strategic vision is informed by a number of key drivers including:

- A current and comprehensive review of homelessness in Birmingham;
- The introduction of the Homelessness Reduction Act 2017 due in April 2018;
- The recommendations from inquiries into Rough Sleeping and Prevention and Homeless Health made by the Birmingham Housing and Homes Overview and Scrutiny Committee.

To reduce homelessness we must do more to make sure that people get the early help they need to prevent incidents of homelessness from happening, and also make sure appropriate support is available for those who have experienced homelessness, so that they are able to improve their chance of a positive future.

To achieve this we have identified five key aims:

- Ensure people are well informed about their housing options;
- Prevent people from becoming homeless;
- Assist people as soon as possible if they do become homeless so their homelessness can be relieved by securing sufficient accommodation and support;
- Support people to recover from their experience and to stay out of homelessness;
- Enable people to secure homes that they can afford and maintain.

We will ask Birmingham citizens, including those who have directly experienced homelessness, strategic partners and key agencies to tell us their views on our proposals.

This section supports Question 1 of the  
Homelessness Prevention Strategy Consultation Questionnaire

## What is the scope of our Homelessness Prevention Strategy?

Homelessness is defined by the Government as:

"A household is legally homeless if, either, they do not have accommodation that they are entitled to occupy, which is accessible and physically available to them or they have accommodation but it is not reasonable for them to continue to occupy this accommodation."

People who are assessed as meeting this definition are referred to as 'statutory homeless' or 'priority housing need'.

People who are assessed and do not meet the Government definition are referred to as 'non-statutory homeless'.

Street Homelessness is defined by the Government as:

"People sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments). People in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or 'bushes')."

To ensure that we can effectively tackle homelessness at every stage of a person or family's journey the scope of this strategy recognises:

- Those who are considering their housing options
- Those who are at risk of homelessness
- Those who are deemed statutory homeless
- Those who are deemed non - statutory homeless
- Those who are street homeless
- Children who experience homelessness
- Those who are moving on from homelessness
- The wider population (for the purposes of prevention more broadly).

Birmingham Homelessness Prevention Strategy 2017+ 3

## Why do we need a Homelessness Prevention Strategy?

The Homelessness Act 2002 places a legal requirement on Local Authorities to develop and implement a Homelessness Strategy every five years.

### Our Health and Wellbeing Challenge

Homelessness is a significant public health issue that affects the health and wellbeing of our local population.

Whilst we have made good progress in tackling homelessness in the city, we have focused on making sure people have a place to stay. There are now more than 20,000 households in Birmingham each year who are homeless, at risk of becoming homeless or moving out of homelessness. We must do more to support people to address the reasons why they are at risk of homelessness or why they became homeless in the first place to prevent cycles of homelessness negatively affecting both individuals and families.

Experiencing poverty and living on a low income are key barriers for people to access, afford and maintain safe and appropriate places to live. Family income in Birmingham is below the national average and we have a high number of people who are unemployed. Birmingham also has a very high number of families who are homeless and/or have a temporary place to stay.

More than three quarters of people who are accepted as statutory homeless in the city have children. Experiencing adversity in childhood, including homelessness, can have a long-term negative effect on a child's health, development, and emotional wellbeing and we therefore need to better understand how trauma such as abuse or neglect in childhood or living in a dysfunctional home can increase the risk of becoming homeless. We also need to do more to recognise how traumatic the experience of homelessness itself can be to all age groups.

People who sleep on the street are the most visible type of homelessness in our city. Street homeless people have needs that are multiple and complex. When we combine these with the reasons that brought them to sleep on the street in the first place, it makes it very hard for one single agency to provide the right support. We know from our review of homelessness that we need to find more effective ways to engage with the street homeless community.

### Our Housing Challenge

The Birmingham Housing Strategy - Birmingham: A Great Place to Live - sets out the challenge we face to make sure that there are enough good quality and affordable housing options for everyone in the city. We need to make sure that people who have experienced homelessness are able to continue to live in their new home for as long as they choose.

This means making sure that there are enough suitable homes for people moving on from homelessness to live in. It also means effectively supporting people to gain the knowledge and resilience they need to live independently, either whilst at risk of becoming homeless or after experiencing homelessness.

4 Birmingham Homelessness Prevention Strategy 2017+

Birmingham has a growing population that is putting increasing pressure on the availability of our current housing options. While the statutory homeless system may seem to offer a clear pathway into permanent housing, it does contrast with the difficulties that people experience in finding a suitable and affordable place to live. The strategy will look to explore local solutions to this complex issue.

Locally we are seeing an increase in people becoming statutory homeless because a short term tenancy with a private landlord has ended, Domestic abuse and being unable to stay at the family home are also reasons why people become homeless in Birmingham.

The size of families in Birmingham is larger than average and not enough larger homes are available to house those in need. This is especially difficult for larger families who have been impacted by the limit that the government has put on the amount of benefits people can claim.

At the same time, it is becoming more difficult for young people aged under 35 to get a home that they can afford to live in independently. Young people that have a low income or are unemployed are particularly affected and often are living with their family for longer. This is putting further pressure on the need for larger homes - and represents a new and growing need in the city.

**This section supports Questions 1 and 2 of the Homelessness Prevention Strategy Consultation Questionnaire**

## What do we want to do to address homelessness in Birmingham?

We need to change the way we respond to homelessness in Birmingham so that we shift the balance from reactive crisis prevention response to proactively addressing homelessness in all of its forms throughout a person or family's journey.

The Positive Pathway is a whole system approach where all partners work together to tackle homelessness.

This model is already working well with young people at risk of or experiencing homelessness in Birmingham, and by adopting this approach, wider the city will have a consistent approach to tackling homelessness.

Our approach sets out five key areas that can be used flexibly to ensure that no matter what stage people enter the pathway, they will be supported as early and as effectively as possible. The five key areas are:

### 1. Universal Prevention

This means delivering a wide range of timely, accurate information and advice about housing options and financial issues and it will be available to everyone to help prevent issues with housing occurring in the first place. It will also ensure people understand the links between housing choice and their financial and employment circumstances.

This approach is delivered through a variety of ways including online, through schools and universal services and through community networks that reach young people, families and professionals.

It is intended to empower people to successfully live independently without support from specialist services and ensure they know where to go to seek help if required.

Strategically, this approach links closely to the work of the Health and Wellbeing Strategy, Birmingham Financial Inclusion Strategy and the Child Poverty Commission to support reductions in inequality in the city.

### 2. Targeted Prevention

Anyone can become homeless. However, it is possible to identify people who are most likely to become homeless.

Groups at risk of homelessness include: young people leaving the care of the local authority; those leaving prison; people suffering from domestic violence; those with a mental health problem or suicidal ideation; those with a substance misuse problem; those experiencing bereavement or from troubled families; people on low incomes and those who are in debt.

This approach introduces early intervention through trauma informed practice. This means understanding trauma and how it may lead to homelessness either now or in the future.

It links to the city's Early Help Strategy and is based upon identifying individuals and families who may be at risk of becoming homeless and offering them effective support as early as possible. In many cases, this type of support can prevent homelessness from happening.

It means strengthening our joined up approach to ensure the right structures, partners, and services are in place.

### 3. Crisis Prevention and Relief

The strategy shifts the balance to delivering a more proactive, prevention approach, however we must make sure that there is still an effective response for those people who become homeless in an emergency or crisis situation.

This part of the pathway approach outlines an integrated, co-ordinated response to commissioned accommodation and support, where Housing Options and Homelessness Services come together with other services including Health, Employment and/or Children's Services to make sure the impact of the crisis is limited. This means everyone knowing how to effectively respond to someone who is identified as either at risk of becoming homeless or is homeless.

Effective support in this area may help reduce the need for someone to make a homeless application to the Local Authority, or to avoid the need for rehousing into social housing.

### 4. Homeless Recovery

People who have experienced homelessness are more likely to have additional needs around their mental, physical and emotional health. They may also need extra support to make sure they can maintain their new home and move on into a positive and healthy future. This is particularly true for children, young people and more vulnerable adults. Providing this support is critical to limiting the impact of homelessness as well as preventing homelessness recurring.

Experiencing homelessness can have a serious and long lasting impact, particularly in childhood. Understanding that being homeless can be traumatic, this approach involves working with people to reduce the risk of experiencing trauma again.

This means taking into account a person's emotional and psychological needs alongside continued support to stabilise accommodation. It also means focusing on improving the overall wellbeing of all adults and children in the household.

### 5. Sustainable Housing

The lack of suitable homes makes homelessness in Birmingham an ongoing challenge, and the need to secure more sustainable housing options is a key part of addressing a critical structural influence on the city's homelessness.

To maintain the momentum of supporting people into independence when they are ready, we must have access to a truly affordable supply of housing options for people to move in to. Without it, our situation regards levels and types of homelessness will not change.

People that are ready to live independently may find that they are trapped in supported housing, and it may stop others from moving on and getting the help they need to move towards independent living. This part of the pathway will explore local solutions to expanding the supply of safe, good quality, affordable housing options, and will look across the options for people living alone, with family, or in other forms of shared homes.

This approach focuses on longer term strategic actions such as improving the supply of suitable, affordable housing to make a difference to homelessness, and improving the standards and quality of homes in the private rented sector

This section supports Questions 1, 2 and 3 of the  
**Homelessness Prevention Strategy Consultation Questionnaire**

### What next?

We are inviting views from all stakeholders interested in tackling homelessness in Birmingham and have developed a questionnaire that lists the things we think will help to achieve our vision for the Homelessness Prevention Strategy.

Please complete the questionnaire and return your views using the FREE portal address below

Alternatively, you can share your thoughts by contacting:

Website: [www.birminghambeheard.org.uk](http://www.birminghambeheard.org.uk)

Twitter: [@healthybrum](https://twitter.com/healthybrum)

Email: [homelessnessconsultation@birmingham.gov.uk](mailto:homelessnessconsultation@birmingham.gov.uk)

Telephone: 0121 303 5154

Write to: Homelessness Prevention Strategy Consultation

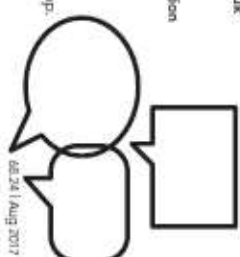
Fireport Plus RSY5-HKBC-XBLA

PO Box 16465

Birmingham

B2 2DG

Please note that you do not need to use a stamp.

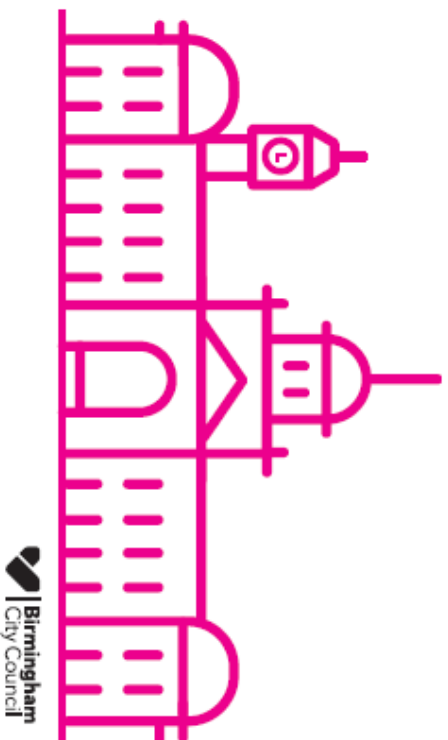


## Appendix 2: Consultation Questionnaire



**24 August - 5 October 2017**

### Questionnaire



### Birmingham Homelessness Prevention Strategy 2017+ 24 August – 5 October 2017

#### Questions we are asking about Birmingham's Homelessness Prevention Strategy 2017+

We are asking people of Birmingham, including those with lived experience of being homeless, key partner agencies and current providers of homelessness prevention services, to let us know your views on our new approach to tackling and preventing homelessness.

The Homelessness Prevention Strategy 2017+ Consultation Summary Document provides supporting information to help outline our ideas.

1. We propose that the vision for the new Homelessness Prevention Strategy should be that: 'Birmingham is a city where we all work together to eradicate homelessness'.

(Commentary – See section 'What are we trying to achieve?' in the Summary Document)

To what extent do you agree or disagree with this vision?  
(Please tick one box only)

- ☐ Strongly agree  
☐ Agree  
☐ Don't know  
☐ Disagree  
☐ Strongly disagree

Please tell us the reason for your answer:

2. For Birmingham to eradicate homelessness, we propose that the strategy should focus on the following five aims:

(Commentary – See section ‘What are we trying to achieve?’ in the Summary Document)

To what extent do you agree or disagree that these aims are the right ones?

a. To ensure people are well informed about their housing options  
(Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

b. To prevent people from becoming homeless (Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

c. To assist people as soon as possible if they do become homeless so that their homelessness can be relieved by securing sufficient accommodation and support (Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

d. To support people to recover from their experience and stay out of homelessness (Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

a. To enable people to secure homes that they can afford and maintain  
(Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

Please tell us the reason for your answer:

3. We propose that a new approach called the Positive Pathway model is used to tackle homelessness and prevent it happening in the future. The model will focus on the following five areas:

1. Universal Prevention
2. Targeted Prevention
3. Crisis Prevention and Relief
4. Homeless Recovery
5. Sustainable Housing

(Commentary – See section 'What do we want to do to address homelessness in Birmingham' in the Summary Document)

To what extent do you agree or disagree that this is the right approach to preventing and tackling homelessness in Birmingham?  
(Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

Please tell us the reason for your answer:

4. We propose that to be successful, a multi-agency approach is needed with key partners from across the Council, Social Care, Health, Criminal Justice, Social and Private Housing Sector, Voluntary and Third Sector, and Education all working together.

(Commentary – See section 'What do we want to do to address homelessness in Birmingham' in the Summary Document)

To what extent do you agree or disagree that a multi-agency approach is needed to tackle and prevent homelessness in Birmingham?  
(Please tick one box only)

- ☐ Strongly agree
- ☐ Agree
- ☐ Don't know
- ☐ Disagree
- ☐ Strongly disagree

Please tell us the reason for your answer:

5. Please tell us about anything else you think we should consider in our approach to tackling and preventing homelessness in Birmingham:

6. There will be an opportunity to inform the development of the Positive Pathway model later in the year. If you would like to be part of this development, please enter your contact details:

## About You

To help us plan our strategy, we would like you to tell us some things about you. You do not have to tell us if you do not want to, but if you do, it will help us to plan what we should do.

### Data Protection Act 1998

The personal information on this form will be kept safe and is protected by law. You can see more information about data protection on our website at: [www.birmingham.gov.uk/privacy](http://www.birmingham.gov.uk/privacy)

### Are you?

Please tick one box that best describes your interest in the consultation:

- ☐ A member of the general public
  - ☐ Someone who is currently homeless or has been affected by homelessness
  - ☐ Health or Care professional
  - ☐ Housing advisor
  - ☐ Homelessness advisor
  - ☐ A family member or carer of someone who is or has been homeless
  - ☐ Other (please state below)
- 

Which age group applies to you? (Please tick one box only)

- |                                   |                                  |  |
|-----------------------------------|----------------------------------|--|
| <input type="checkbox"/> Under 16 | <input type="checkbox"/> 40 – 44 | <input type="checkbox"/> 70 – 74           |
| <input type="checkbox"/> 16 – 19  | <input type="checkbox"/> 45 – 49 | <input type="checkbox"/> 75 – 79           |
| <input type="checkbox"/> 20 – 24  | <input type="checkbox"/> 50 – 54 | <input type="checkbox"/> 80 – 84           |
| <input type="checkbox"/> 25 – 29  | <input type="checkbox"/> 55 – 59 | <input type="checkbox"/> 85+               |
| <input type="checkbox"/> 30 – 34  | <input type="checkbox"/> 60 – 64 | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> 35 – 39  | <input type="checkbox"/> 65 – 69 |  |

What is your sex? (Please tick one box only)

- ☐ Male
- ☐ Female
- ☐ Prefer not to say

Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more? (Please tick one box only)

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

If yes, do any of these conditions or illnesses affect you in any of the following areas? (Please tick all that apply)

- ☐ Vision (e.g. blindness or partial sight)
  - ☐ Hearing (e.g. deafness or partial hearing)
  - ☐ Mobility (e.g. walking short distances or climbing stairs)
  - ☐ Dexterity (e.g. lifting and carrying objects, using a keyboard)
  - ☐ Learning or understanding or concentrating
  - ☐ Memory
  - ☐ Mental Health
  - ☐ Stamina or breathing or fatigue
  - ☐ Socially or behaviourally (e.g. associated with Autism, attention deficit disorder or Asperger's Syndrome)
  - ☐ Other (please state below)
-

What is your ethnic group? (Please tick one box only)

White

- ☐ English/Welsh/Scottish/Northern Irish/British  
☐ Irish  
☐ Gypsy or Irish Traveller  
☐ Polish  
☐ Baltic States  
☐ Jewish  
☐ Other white European (including mixed European)  
☐ Any other White background (please state below)

Mixed/multiple ethnic groups

- ☐ White and Black Caribbean/African  
☐ White and Asian  
☐ Any other Mixed background (please state below)

Asian/Asian British

- ☐ Afghani  
☐ Bangladeshi  
☐ British Asian  
☐ Chinese  
☐ Filipino  
☐ Indian Sikh  
☐ Indian Other  
☐ Kashmiri  
☐ Pakistani  
☐ Sri Lankan  
☐ Vietnamese  
☐ Any other Asian background (please state below)

Black African/Caribbean/Black British

- ☐ African  
☐ Black British  
☐ Caribbean  
☐ Somali  
☐ Any other Black/African/Caribbean background (please state below)

Other ethnic group

- ☐ Arab  
☐ Iranian  
☐ Kurdish  
☐ Yemeni  
☐ Any other ethnic group (please state below)

☐ Prefer not to say

What is your sexual orientation? (Please tick one box only)

- ☐ Bisexual  
☐ Gay  
☐ Lesbian  
☐ Heterosexual or Straight  
☐ Other (please state below)

☐ Prefer not to say

What is your religion or belief? (please tick one box only)

- ☐ No religion
- ☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
- ☐ Buddhist
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ Any other religion (please state below)
- ☐ Prefer not to say

Thank you for taking part in our consultation. Your views are important to us.

Please return this questionnaire to the FREE postal address below – you do not need to use a stamp. If you have any further comments or views on the new Homelessness Prevention Strategy, please contact:

Website: [www.birminghambehaved.org.uk](http://www.birminghambehaved.org.uk)

Twitter: @healthybrum

Email: [homelessnessconsultation@birmingham.gov.uk](mailto:homelessnessconsultation@birmingham.gov.uk)

Telephone: 0121 303 5154

Write to: Homelessness Prevention Strategy Consultation

Freepost Plus RSYS-HKBC-XBLA

PO Box 16465

Birmingham

B2 2DG

Please note that you do not need to use a stamp.

