

## Written evidence submitted by Phoenix Futures [IOC 192]

### Summary

Phoenix Futures, the national substance misuse charity and housing association, welcomes the opportunity to respond to the HCLG inquiry into the impact of Covid-19 on homelessness and the private rented sector. As a specialist housing and treatment provider, we have unique insight into the challenges currently faced by individuals living in our housing and homelessness services, as well as disadvantaged groups housed in private rented and other accommodation in the community and residential treatment services who are most vulnerable to the effects of the lockdown and therefore at risk of homelessness.

### Key points

- We have been privileged to be involved in cross-sector efforts to support rough sleepers recently housed through the government's £3.2m emergency fund. By working together to meet the current challenge, government and voluntary sector colleagues have demonstrated that an incredible amount can be achieved in a short period of time with cooperation, commitment and resources.
- **Additional funding will be required to extend accommodation provision and provide an exit strategy for those rough sleepers currently housed in hotels, a significant number of whom will require ongoing support for drug, alcohol and/or mental health problems.**
- While we welcome government initiatives to alleviate pressure on vulnerable populations, flow of new rough sleepers on to the streets is unlikely to abate and many more will be forced into precarious conditions because of measures taken to manage the current health crisis. Additionally, moves into independent accommodation from homeless hostels and supported housing have ceased in many areas, thereby reducing availability of beds for those now coming in off the streets.
- **We anticipate increased demand for services post-lockdown and government should work with local authorities and voluntary sector representatives to plan for and ensure adequate access to revenue and capital funding to meet this need.**
- Access to secure, long-term accommodation will remain a concern for all people experiencing homelessness.
- Homelessness is not just a housing problem. 41% of England's homeless population use drugs problematically and this figure is much higher amongst rough sleepers. Access to substance misuse support is currently severely curtailed, threatening the progress of those in recovery and increasing vulnerabilities of those in active use.
- Digital exclusion has proven to be a barrier to vulnerable people accessing support during the lockdown. **We would welcome any initiative aimed at improving digital inclusion for disadvantaged groups.**
- The lockdown will intensify challenges for disadvantaged groups, increasing numbers who are unable to meet housing costs. **Government should consider providing a hardship fund for people who have lost jobs or income during the health crisis to help them to meet their financial obligations and avoid homelessness.**

- The government has committed to end rough sleeping by 2024. In order to achieve this, it is imperative that provision of supported housing that meets the needs of the population is available and adequately funded. **Government should establish a national ringfenced budget to fund homeless provision, including specialist supported housing.**
- We would be fully supportive of any initiative to establish Homelessness Reduction Boards or similar structures to ensure that the ending of homelessness is prioritised across all local areas.

## 1.0 Introduction

### 1.1 Phoenix Futures' unique provider of specialist housing services

Phoenix Futures holds the unique position of being the only specialist substance misuse treatment provider that holds registered housing provider status. We have developed a range of housing and homelessness services to provide specialist supported accommodation for people at every stage in their recovery journey, from those actively using drugs and alcohol but contemplating making changes, to those who have achieved abstinence and require support to maintain their recovery.

We have developed a unique service offer for homeless people with drug and alcohol dependencies at our newest housing service in South London, where clients benefit from living in high-quality accommodation and participating in a daily psychosocial group programme as well as one-to-one support from a team of skilled and dedicated staff with high expectations of engagement. Service users can progress into one of our two abstinence-based supported housing schemes nearby, access residential rehabilitation services, or move on into independent accommodation.

Specialist supported housing specifically targeted at homeless people who are contemplating changes to drug and alcohol use is increasingly rare. Clients accessing the service have a high level of need: 77% are poly-substance users and 65% have a mental health diagnosis. After just over a year:

- 35% of clients have moved into independent accommodation;
- 2 clients have entered residential rehabilitation services;
- 15% have moved on into low-needs or abstinence-based supported housing schemes.

## 2.0 Government support to address the impact of coronavirus on the homeless and vulnerably housed

- 2.1 Phoenix welcomes measures introduced by government, particularly increases to Universal Credit, the raising of Local Housing Allowance rates, and suspension of housing possession actions, designed to reduce the economic and social impact of the current health crisis on those most vulnerable to its effect.
- 2.2 Further, we welcome the £3.2m of funding provided to local authorities to procure accommodation for rough sleepers. We have been privileged to be involved in this initiative through our contribution to HDAS-London, providing substance misuse advice to healthcare

and homelessness staff working with rough sleepers accommodated in the capital's hotels. By working together to provide a rapid response, government, local authorities, health services and the voluntary sector have demonstrated how much can be achieved in a short period of time with commitment, cooperation and resources.

- 2.3 However, while the initiative has helped to provide a short-term fix, additional funds will be required to extend the provision or secure alternative suitable accommodation and support for those currently sheltering in hotels. Local authorities and charities are working intensively to find and apply innovative solutions to housing people during the current crisis but our resources are finite.
- 2.4 Homelessness is a complex problem that demands a multi-faceted approach. Research suggests that the possibility of homelessness for some disadvantaged groups is so high as to almost constitute a 'norm'.<sup>1</sup> While provision of accommodation can provide relief from some of the psychological and physical effects of rough sleeping, it does not in itself constitute a solution. The majority of those currently housed in hotels will require ongoing access to psychosocial support in the short-to- medium-term as well as secure and genuinely affordable housing in the long-term.
- 2.5 The homeless population is not fixed. 5,529 new rough sleepers were encountered on London's streets by outreach teams in 2018-19, the last year for which we have a complete set of data.<sup>2</sup> Thousands of people remain at risk of homelessness and many more will be pushed in to precarious conditions by the current health crisis and social distancing measures.

### **3.0 Current and immediate concerns for this group**

#### **3.1 Accommodation**

- 3.1.1 In the short-term, commitment from government that it will continue to fund accommodation and support so that homeless people can practice social distancing and safely self-isolate during the pandemic is essential.
- 3.1.2 The government has recently issued guidance to social housing providers recommending that all but essential moves are delayed while emergency measures are in effect.<sup>3</sup> A reduction of moves into social lettings will directly impact availability of bedspaces in homeless hostels and supported housing services for rough sleepers seeking to move on from hotels and other temporary accommodation. Government should consider releasing additional capital and revenue funding to local authorities to enable them to increase provision for homeless people in their local area to mitigate the effects of the measures.

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<sup>1</sup> Glen Bramley & Suzanne Fitzpatrick (2018) Homelessness in the UK: who is most at risk?, Housing Studies, 33:1, 96-116, DOI: [10.1080/02673037.2017.1344957](https://doi.org/10.1080/02673037.2017.1344957)

<sup>2</sup> Ibid.

<sup>3</sup> <https://www.gov.uk/guidance/coronavirus-covid-19-guidance-for-social-landlords-on-essential-moves>

- 3.1.3 Access to a long-term secure housing solution will remain a concern for all people who do not currently have this.

## **3.2 Drug and alcohol services**

- 3.2.1 As discussed, homelessness is not just a housing problem. Recent estimates suggest around 41% of the homeless population in England have a drug problem,<sup>4</sup> while 80% of London's rough sleepers have been assessed to have drug, alcohol and/or mental health related needs.<sup>5</sup> Drug and alcohol dependency can act as both a cause and a consequence of homelessness and mental ill health. Many of the people supported by our community treatment services have experienced multiple disadvantage, are at risk of homelessness and are reliant on access to multi-agency support. The difficulties they face will be compounded by current emergency measures, with access to services severely curtailed, and we anticipate increased demand for a range of services in the long-term as a result.
- 3.2.2 People who are in active recovery from addiction are frequently reliant on the support of mutual aid groups, as well as diversionary activities, such as volunteering, to maintain abstinence. This period will be particularly difficult for those who lack the social networks that many of us take for granted and who are unable to participate in the structures that have kept them safe and aided their recovery.

## **3.3 Digital inclusion**

- 3.3.1 Voluntary sector providers have developed a solution-focused approach to ensure that essential services, such as provision of needle exchanges and substitute prescribing, continue to be available, and have developed or offered increased access to digital support for anybody following government guidance to stay at home or self-isolate. However, not everybody that we work with has access to the internet or smart devices. It has become ever more apparent during the current crisis that digital exclusion exacerbates inequality. We would welcome any initiative aimed at improving digital inclusion for disadvantaged groups, and consider this to be an urgent current need.

## **4.0 Action needed post-lockdown**

### **4.1 Homeless prevention**

- 4.1.1 As a housing provider, Phoenix, alongside other housing associations, have committed not to evict anybody who has accrued arrears as a result of loss of income during the current crisis. There is no onus on private landlords to provide this assurance to tenants and we anticipate a steep increase in evictions as a result of rent arrears after the suspension of housing possession actions ends. The government should consider providing a hardship fund for

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<sup>4</sup> Homeless Link Health Needs Audit <https://www.homeless.org.uk/facts/homelessness-in-numbers/health-needs-audit-explore-data>

<sup>5</sup> Chain Annual Report: Greater London April 2018 – March 2019 available at <https://data.london.gov.uk/dataset/chain-reports>

people who have lost jobs or income as a result of the lockdown to help meet their financial obligations and avoid homelessness.

- 4.1.2 We know that the use of Section 21 notices has become the leading direct cause of homelessness in recent years.<sup>6</sup> We urge the government to press ahead with the measures to end no-fault evictions contained in the Renters' Reform Bill.

## 4.2 Supported Housing

- 4.2.1 The government has stated its commitment to end rough sleeping by 2024. In order to do this, it is imperative that supported housing provision designed to meet local needs is made available across the country and is adequately funded. The government should establish a national ringfenced budget to fund this provision
- 4.2.2 We held a focus group with service users living in our South London scheme last year to ask them how they thought the government should end homelessness. A unanimous recommendation was the creation of local forums with representatives from all the services that have a role to play in tackling the problem:

'Representatives from... [council, NHS, police, drug and alcohol services, probation, charities, faith groups, service users, employment and training providers] should be forced to sit in a room together once a month and talk to each other about how to tackle the problem.' (Service User, Phoenix South London Progress House)

'If we know they're working together...they can hold each other to account.' (Service User, Phoenix South London Progress House)

Government should introduce Homelessness Reduction Boards or similar multi-agency structures to ensure that reducing homelessness is, and remains, a priority in all areas and that all groups, including those with substance misuse needs, are represented.

- 4.2.3 Local connection continues to act as a bar to assistance for those experiencing homelessness. There are a number of groups, including those with a history of drug and/or alcohol addiction, who can't return to their local area but are (unlawfully) excluded from health and housing provision because they lack local connection. This must end.
- 4.2.4 In their response to the current health crisis, government, local authorities and voluntary sector agencies have demonstrated that through cooperation and pooling of resources we can achieve our ambitions, however lofty. We call on government to build on this response, putting in place the structures, policy initiatives and funding that will enable us to end homelessness.

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<sup>6</sup> <https://www.nao.org.uk/wp-content/uploads/2017/09/Homelessness-Summary.pdf>