



Cost-Benefit Analysis of Housing-Related Support Services for Homeless People – Cyrenians Case Study

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Cost-Benefit Analysis of Housing-Related Support Services for Homeless People – Cyrenians Case Study
Executive Summary

Project Brief

Northumbria University were commissioned by the Cyrenians to undertake research into the social and economic value of the housing-related support services it provides, as well factors linked to successful move-on and barriers to progression.

Methodology

The project involved interviews with 5 staff, interviews with 14 service users, quantitative analysis of 238 client outcomes records from 2011-2012 and a cost-benefit analysis of services.

Project Findings

- The client outcomes records reviewed showed that service users (69%) were typically male (69%), of working age (90%) and from the local area (84%). The primary client group was 'single homeless people with support needs' (82%). The most common forms of need related to: alcohol problems (46%), drug problems (32%), mental health problems (32%) and offending (25%).
- The qualitative data confirmed the findings of a previous study conducted for the Cyrenians (Harding, Irving and Whowell, 2011) which identified were two broad pathways into homelessness amongst service users. The first pathway was marked by a lifetime of exclusion, with service users experiencing a range of disadvantages in childhood which impacted upon their adult lives. In contrast, others had led apparently unproblematic lives until a traumatic event, often accompanied by addiction problems, began a pathway into homelessness.
- In 2011-12, over two-thirds of service users (69%) whose records were analysed a planned move away from services and a similar proportion became more independent upon leaving services.
- Successful outcomes were most likely to be achieved by services users with complex needs and less likely to be achieved by those who had problems with substance misuse and/or offending.
- There was evidence of services helping service users to: increase their engagement with appropriate services, tackle addiction problems and offending behaviour, improve their physical health, develop positive social networks, acquire key life-skills, increase their self-esteem and improve their future outlook.
- These changes will be impacting positively on a range of sectors – most notably, health and criminal justice – via reduced homelessness and evictions, reduced A&E admissions and reduced engagement in anti-social and offending behaviour. Service users are also more likely to make an economic contribution to society in the future.
- While the cost-benefit calculations built in a number of assumptions, it appears that addressing service users' needs through the Cyrenians' Supporting People funded services is on average over £18,000 per person per year cheaper than using non-Supporting People funded services.
- Successfully tackling issues of addiction and crime, in particular, is likely to result in significant, long-term savings to public expenditure.
- Service users were highly positive about their time with the Cyrenians. Often service users were unable to identify the single most valuable form of support received or to identify a service which had not been provided but which they would have found useful.
- Outcomes were achieved, in part, by a number of effective working practices – the adoption of a holistic approach to understanding and addressing needs, supporting service users at all stages of their journey to independence, a flexible approach to working with service users and the creation of 'places for Change' for service users.
- Key factors linked to successful move-on are: effectively meeting primary needs, service users being motivated to progress towards independence, engagement in meaningful activities and positive relationships with fellow service users and staff.

- Meeting primary needs made it more likely that a service user would achieve a successful outcome. Some needs were met in over 90% of cases where they were identified – support to maximise income, to establish contact with external agencies, to participate in work like activities, to participate in leisure activities and to secure assistive technologies. In contrast, there was less than a 50% success rate in meeting needs to manage substance misuse, to find paid work and to avoid causing harm to others.
- The wish to see children was often a powerful motivating factor for service users seeking to make changes to their lives.
- Relationships with other service users could be a source of support. However, they could also present major difficulties, particularly in the areas of addictions and when living in direct access accommodation.
- Relationships with other service users were more likely to be positive when engaging in constructive activities such as football and creative activity. Such activities helped to prevent boredom, to deal with addictions, to give structure to service users' days and to increase self-esteem.
- Service users appreciated relationships with staff that were informal and friendly, where they could be accompanied to appointments and provided with assistance with life-skills and budgeting.
- Barriers to progression are: the nature of direct access accommodation, financial exclusion and difficulties accessing move-on accommodation.
 - Service users spoke of the difficulties of remaining substance-free in light of the availability of drugs and alcohol, peer pressure and the stress of coping with the behaviour of other residents under the influence of drugs and alcohol.
 - The financial impossibility of working while living in residential projects was a major source of frustration for both staff and service users.
 - There was some frustration about the expectations of social landlords in relation to service users who had accrued previous rent arrears, or been involved in crime and/or anti-social behaviour.
 - Service users were largely critical of their experiences in the private rented sector (PRS), despite more move-on options becoming available in this sector. Staff also had concerns about move-on into the PRS, relating to rent affordability, property condition and lack of security of tenure.
- In all cases, the Cyrenians are responding in progressive and innovative ways to the barriers identified above – through, for example, the development of a 'housing First' model, good working relationships with Newcastle City Council's 'Pathways team', new models of working with the PRS and the provision of effective floating support services.

Areas for Development

Areas for further development are: methods of working with service users to overcome problems of addiction and financial exclusion, evidence of the value of a 'Housing First' approach to overcoming problems of homelessness and the development of more nuanced outcome measures for service users.

Cost-Benefit Analysis of Housing-Related Support Services for Homeless People – Cyrenians Case Study

1: Introduction

Project Brief

Northumbria University were commissioned by the Cyrenians to undertake research into the value of the housing-related support services that they provide to service users. Specifically, the research team were asked to:

- Identify the social and financial value of housing-related support services provided by the Cyrenians;
- Identify factors linked to (un)successful 'move-on';
- Identify barriers to progression; and,
- Identify possible service developments, where possible.

Methodology

In order to achieve this, both quantitative and qualitative data was collected. The research involved the following key stages:

- Interviews with 5 staff (strategic and operational).
- Interviews with 14 service users at various stages of progression (day centres, direct access accommodation, move-on accommodation with floating support and independent housing).
- Quantitative analysis of 238 client outcome records, using the 2011-12 St. Andrews Outcome Records for Short-term Services.
- A cost-benefit analysis of services.

The quantitative data collected provided a broad overview of the characteristics of service users, the services that they were provided with and the factors that had a bearing on successful and unsuccessful short-term outcomes. It was also used to apply the formulae used to calculate the 'Social Return on Investment' (SROI) of services provided by the Cyrenians. The qualitative data collected enabled the development of a more detailed understanding of the process of resettlement from the perspectives of both staff and service users.

2: About the Cyrenians, Service Users and Services Provided

This section provides an overview of the Cyrenians' approach to working with service users and the findings of the quantitative analysis regarding the characteristics of service users and the support they received.

The Cyrenians' Approach

The Cyrenians is one of the country's leading and most progressive homeless charities and is the largest homelessness service provider in Newcastle. Approximately 60% of their projects are funded by the Supporting People (SP) programme, but they also provide a number of non-residential services which aim to help service users reintegrate back into society following an episode of homelessness and make positive, sustainable changes in their lives.

The Cyrenians seek to achieve three related aims through their services: to meet urgent needs (rough sleeping, substance misuse and sexual exploitation, for example) at crisis points in people's lives; to create a sense of stability for service users; and to help service users progress towards independence.

In some cases, these aims can be treated as three separate stages on a linear pathway to independence, with different accommodation and support options available at each stage. A significant degree of flexibility is afforded to service users, however, who can omit some of these stages where appropriate; such as, moving straight from emergency to progression if they have low level needs. In addition, a 'Housing First' approach is being introduced, where service users may move directly from rooflessness to self-contained accommodation if it is felt that this would be more beneficial to service users than moving into direct access accommodation. This flexibility in the provision of services was praised by workers:

'Because somebody is homeless or we've seen them, they shouldn't have to go into [a] direct access hostel...if it is a bad luck story, if somebody has been chucked out by their partner and lost their job, they don't need to...in most cases, we're quite good at diverting them into Virginia [for example]....'

'You've got to have exceptions to the rule otherwise you're not providing an empathetic service really'.

Central to the Cyrenians' approach is the adoption of a holistic approach to the assessment and addressing of needs. Upon arrival at the Cyrenians, all service users receive a holistic assessment and an appropriate support plan is developed:

'For the risks and the support needs, you have to have a trigger, an action, a solution, an outcome, a focus and I think with that respect, it's nice to have a holistic approach'.

Service users reported that this was not the case with all homelessness organisations that they had accessed previously. In some cases, service users had resided in hostels for years without being offered support to move-on. Here, staff emphasised the positive impacts of 'Supporting People' on the sector, which they saw as being the catalyst for a focus on 'enabling' service users to move-on, rather than 'looking after' them and the adoption a holistic approach to supporting service users:

'I guess the sector prior to SP coming in were probably guilty of institutionalising people, you know, and not giving them the tools to be able to look after themselves'.

Characteristics of Service Users

The short term outcomes data provided in relation to 238 clients indicated the following information about the characteristics of service users:

- Over two-thirds were male (163 or 68.5%).
- 90% were of working age, with the mean age being 36. 4% were aged under 20 and 6% were aged over 60.
- Only 5% were working. 40% were in receipt of job seekers allowance and actively seeking work, 40% were long term sick or disabled, 7% were not seeking work and 5% were retired.
- Most service users were originally from the immediate local area. The SP administering authority was recorded in 221 cases. In 186 cases (84.2%), it was Newcastle City Council. In 23 cases (10.4%) it was other local authorities in Tyne and Wear and in 12 cases (5.4%), it was a local authority from outside the immediate metropolitan area.
- The primary client group was 'single homeless people with support needs' (82%). When looking at both primary and secondary needs, the most common forms of need related to: alcohol problems (46%), drug problems (32%), mental health problems (32%) and offending (25%). Other less common forms of needs were: complex needs, rough sleeping, learning disabilities and physical disabilities.

The qualitative data confirmed the findings of a previous study conducted for the Cyrenians (Harding, Irving and Whowell, 2011) which identified two broad pathways into homelessness amongst service users. The first – most frequently occurring – pathway was marked by a lifetime of exclusion, with respondents experiencing childhood poverty, spending time in local authority care, gaining few – if any qualifications – from school, suffering long periods of unemployment and financial difficulty in adulthood, experiencing problems of addictions, having limited social networks and being in regular contact with the criminal justice system. The experiences of some of the service users interviewed are reflected below:

'I've been in a few hostels...I've been homeless since I was thirteen...I went to Tyneside Foyer and then from Tyneside Foyer I went to the Salvation Army, from there I went to Byker bridge, from there I went to Pitt Street and then I went from there to [the Cyrenians]'

'I've never had contact with me parents since I was thirteen'

'[I have been homeless] on and off throughout my life...I was in care and all that...I got moved around a lot in my childhood....I've never had a place where I could really settle down...I didn't really receive any support when I left care'

In contrast, others had led an apparently unproblematic life until a traumatic event, often accompanied by addiction problems, began a pathway into homelessness:

'Basically, all my problems started after a bad break-up with my ex-partner. We were together five years and actually on our anniversary we split up...And instead of trying to sort that out, I turned to drink'

Services Provided

The short term outcomes data in relation to 238 service users showed the projects that they were connected to. The most frequently identified projects are shown in table 1 below.

Table 1: Distribution of service users across projects

Project	Number / percentage
Elliott House	85 (35.7%)
Francis House	35 (14.7%)
Resettlement Floating Support	29 (12.2%)
Virginia House	21 (8.8%)
Hawthorn Terrace	15 (6.3%)
Abbott House	15 (6.3%)
Roycroft House	12 (5.0%)

In 215 cases (90.3%), service users had a support plan and in almost all cases (236 of 238), the Cyrenians worked in partnership with at least one agency to address needs. Table 2 shows the frequency with which different agencies were engaged with.

Table 2: Frequency of Working in Partnership with Agencies

Agency	Frequency of working in partnership
Benefits	220 (92.4%)
Housing	199 (83.6%)
Health	174 (73.1%)
Drug / alcohol services	145 (60.9%)
Employment	141 (59.2%)
Police	110 (46.2%)
Education	93 (39.1%)
Social services	77 (32.4%)
Debt rehabilitation services	56 (23.5%)
Youth Offending Team	23 (9.7%)
Other	100 (42.0%)

The frequency with which different types of support needed by service users were assessed and the number of times this support achieved its goal are shown below in table 3. It is based on the short term outcomes questionnaire completed by a member of the Cyrenians' staff in relation to each service user. For example, the data on maximising income was taken from the aggregate of responses to two questions on the form:

*Did the client need support to maximise their income, including receipt of the correct welfare benefits?
Yes/No*

and

Has the client now maximised their income, including receipt of the correct benefits? Yes/No

The table is arranged from the most frequently to the least frequently provided forms of support. The second column reveals important differences regarding the frequency with which different forms of support achieved their goals. The 'success rate' was over 90% for support to maximise income, to establish contact with external activities, to participate in work like activities, to participate in leisure activities and to secure assistive technologies. In contrast, it was 50% or less for support to manage substance misuse, to find paid work and to avoid causing harm to others.

Table 3: How Often Services Were Needed and How Often They Achieved Their Goal

Type of support	No. requiring	No. of times support achieved goal
Support to maximise income	203 (85.3%)	183 (90.1%)
Support to maintain accommodation	173 (72.7%)	114 (65.9%)
Support to secure settled accommodation	167 (70.2%)	118 (71.1%)
Support to establish contact with external services	164 (68.9%)	158 (96.3%)
Support to establish contact with friends or family	159 (66.8%)	141 (88.7%)
Support to have greater choice and/or control and/or involvement	157 (66.0%)	130 (82.8%)
Support to better manage substance misuse	150 (63.0%)	74 (49.3%)
Support to better manage physical health	121 (50.8%)	93 (76.9%)
Support to manage mental health better	113 (47.5%)	70 (61.9%)
Help to reduce debt	88 (37.0%)	71 (80.7%)
Support to participate in training and/or education	87 (36.6%)	73 (83.9%)
Support to participate in work like activities	58 (24.4%)	53 (91.4%)
Support to minimise risk of harm from others	56 (23.5%)	34 (60.7%)
Support to better manage self harm	54 (22.7%)	33 (61.1%)
Support to participate in leisure, culture, faith and/or informal learning activities	52 (21.8%)	50 (96.2%)
Support to comply with statutory orders	49 (20.6%)	36 (73.5%)
Help to find paid work	36 (15.1%)	17 (47.2%)
Support to avoid causing harm to others	36 (15.1%)	18 (50.0%)
Support to secure assistive technology or aids/adaptations	8 (3.4%)	8 (100%)

3: Quantitative Assessment of Service User Outcomes

This section considers the successfulness of resettlement as measured by the short term outcomes data. A more detailed, qualitative evaluation will be provided in later sections.

The types of accommodation that the service users were expected to occupy on exiting the Cyrenians services are shown below.

Table 4: Likely Form of Accommodation on Leaving Cyrenians

Accommodation	Number / percentage
Living with friends / family	47 (19.7%)
Supported housing	43 (18.1%)
Private sector tenancy	38 (16.0%)
Local authority general	31 (13.0%)
Direct access hostel	12 (5.0%)

Clearly, these forms of accommodation represent a range of more and less satisfactory outcomes. However, no further analysis was undertaken of this list because there were two more concise outcome measures that were available. These were taken from two questions on the short term outcomes form completed by a staff member in relation to each service user:

Was this a planned move from the support service (accommodation based) or a planned end to the receipt of the service (floating support) in accordance with the client's support plan? Yes/No

and

Did this move or end to the support service result in greater independence for the client? Yes/No

In 236 cases the question about making a planned move was answered on the form. 158 service users (66.9%) were judged to have made a planned move away from services, while 78 (33.1%) were assessed as having made an unplanned move. The information about achieving greater independence was recorded in 235 cases, with 161 services users (68.5%) assessed positively against this criterion and 74 (31.5%) assessed negatively. As might be expected, the two measures were closely related, with 86.1% of those who made a planned move away from services achieving greater independence, compared to only 32.5% of those who did not make a planned move.

The existence of these two measures provided an opportunity to examine the types of service users, and the types of services, that were most likely to be linked to positive outcomes. In all cases, no group of less than 10 service users was considered because calculating percentages for such small groups would be meaningless.

There were only small differences between the outcomes of men and women, with 66.5% of men and 68.0% of women making a planned move away from services, and 71.3% of men and 62.7% of women achieving greater independence when they left services. However, there were marked differences in terms of economic status, with retired people being most likely to achieve successful outcomes and those who were not seeking work being least likely, as illustrated below in table 5:

Table 5: Extent of Successful Outcomes and Economic Status

Economic status	Percentage making planned move away	Percentage achieving greater independence
Retired (n=11)	81.8%	90.9%
Long term sick or disabled (n=95)	70.5%	67.4%
Job seeker (n=95)	60.0%	68.1%
Not seeking work (n=17)	47.1%	41.2%

When considering the likelihood of service users from specific user groups achieving positive outcomes, it should be borne in mind that many were members of more than one group - one service user could be classified as belonging to as many as four client groups on the short term outcomes form. The data indicated a very high level of successful outcomes for service users with complex needs. There were low rates for rough sleepers and people who had experienced domestic violence, although the number of people involved in both cases was small. Of more importance is perhaps the relatively low level of successful outcomes for people with alcohol and/or drugs problems and those likely to offend (outcomes were not known for one person in the 'offender' category, which explains how 50% of an odd number was reached):

Table 6: Extent of Successful Outcomes and Service User Groups

Service user groups	Percentage making planned move away	Percentage achieving greater independence
Complex needs (n=35)	94.3%	88.6%
Physical disability (n=12)	83.3%	83.3%
Mental health problems (n=75)	71.6%	66.2%
Learning disability (n=13)	69.2%	53.8%
Drug problem (n=77)	58.4%	53.2%
Alcohol (n=111)	56.8%	54.1%
Offenders (n=59)	50.0%	50.0%
Persons at risk of domestic violence (n=11)	45.5%	63.6%
Rough sleeper (n=15)	40.0%	53.3%

Consideration was also given to the impact of meeting assessed needs on outcomes. In all cases, service users who had an assessed need met were more likely to achieve a planned move. In some cases, the number of service users who did not have needs met (e.g. for maximised income or participation in education or training) were so small that comparisons were not appropriate. However, there were a number of assessed support needs which, if not met, appeared to have a severe impact on a service user's likelihood of making a planned move:

Table 7: Impact of meeting needs on likelihood of making a planned move away from services

Need	Likelihood of service user making a planned move if need met	Likelihood of service user making a planned move if need not met
Able to manage physical health	81.5%	37.0%
Able to manage mental health	88.6%	47.6%
Able to manage substance misuse	87.7%	40.0%
Able to comply with statutory order	67.6%	7.7%
Able to manage risk of self harm	81.8%	38.1%
Able to manage risk of causing harm to others	76.5%	22.2%
Able to minimise risk of harm from others	82.4%	33.3%
Have more choice and/or control over life	87.6%	38.5%

There was a similar pattern with regard to greater independence. Again, in all cases, meeting a need increased the likelihood of achieving greater independence and the difference was most striking in the case of the same forms of assessed need:

Table 8: Impact of meeting needs on likelihood of service users achieving greater independence following move-on

Need	Likelihood of service user achieving greater independence if need met	Likelihood of service user achieving greater independence if need not
Able to manage physical health	75.0%	25.9%
Able to manage mental health	80.0%	33.3%
Able to manage substance misuse	87.7%	32.0%
Able to comply with statutory order	55.9%	15.4%
Able to manage risk of self harm	66.7%	19.0%
Able to manage risk of causing harm to others	58.8%	22.2%
Able to minimise risk of harm from others	64.7%	14.3%
Have more choice and/or control over life	85.3%	19.2%

4: Cost-Benefit Analysis of Cyrenians Services

The findings that approximately two thirds of service users, whose short-term outcomes data was provided, made a planned move away from the services and achieved greater independence in 2011-12 gives some indication of the effectiveness of Cyrenians services and which services are most likely to be successful. However, an increasingly important political issue is the long-term impacts of services and outcomes on levels of public expenditure.

Social and Economic Benefits of Supporting People Funded Services

In 2008, the Department for Communities and Local Government (DCLG) indicated that responding to homelessness is both socially and economically driven, with the key aim of SP being defined as to *'provide strategically planned housing-related services which are typically parts of packages of support and potentially other services (which may be provided by the public, private or third sector)'* (DCLG, 2008).

Indeed, over the past decade, there have been various estimates suggesting that there are substantial costs savings associated with addressing the needs of homeless people. In 2003, the New Policy Institute (2003) estimated an annual cost of responding to the needs of a single homeless person as £24,500. This included: costs associated with failed tenancy, temporary accommodation, outreach and advice services, health and criminal justice services, and resettlement. In 2008, the New Economics Foundation estimated that the annual cost to the state for each homeless person was £26, 000, which was made up of costs associated with benefit payments, hostel accommodation and the care of children. In 2009, the MEAN Manifesto estimated that costs associated with support for a man who had been sleeping rough in London equated to £24, 350. This headline figure was broken down to demonstrate the nature of costs and also the range of agencies involved in responding to homeless: hospital costs, £150; drug treatment, £3000; mediation, £400; day centre services, £1,800; and, accommodation and support, £19,000. In 2010, a comprehensive cost-benefit analysis of SP funded services in the North East was undertaken by Bee and Woods, which indicated that the financial and social benefits are wide-ranging; impacting positively upon the lives of service users, as well as a wide range of policy areas including social care, education, health and criminal justice. The SP programme funds services to a range of vulnerable groups, single homeless people and homeless families. Nationally, in 2008/9, over £300M of SP expenditure invested in services for single homeless people and homeless families were believed to have resulted in net savings of approximately £140M via reduced costs in criminal justice; reduced homelessness and evictions; reduced healthcare costs; and reduced costs associated with substance misuse. The social benefits for the client groups included improved health, educational outcomes and quality of life; increased engagement with appropriate services; reduced anti-social behaviour; and, acquisition of key life skills (Bee and Woods, 2010). Finally, in 2010, Crisis estimated the annual cost of homelessness per person is between £9,000 and £41,000 per year.

Measuring the Impact of Services: The Social Return on Investment Model (SROI)

Producing estimates of the impacts of SP such as those identified above, is however, difficult and challenging due to the number of variables involved and the availability of reliable economic data. In order to estimate the value of the savings arising specifically from services provided by the Cyrenians, the figures used will be those produced by the SP project group in 2009, which were based on a SROI cost model. For compatibility with this model, the following groups of service users will be considered:

- Service users with a physical disability
- Service users with mental health issues
- Service users with learning disabilities
- Service users with drug problems

- Service users with alcohol problems
- Service users who are offending
- Service users at risk of domestic violence

SROI is an outcomes-based measurement model which extends traditional cost-benefit analysis to ascertain the monetary value of project activities in broader terms. SROIs can be split into two distinct types:

- **Evaluative SROIs** – which are conducted retrospectively and are based on actual outcomes that have taken place over a given evaluation period. These are most useful where projects are already up and running and good outcomes data is available.
- **Forecasted SROIs** – which predict how much social value will be created if activities meet their intended or most likely objectives.

As this project is examining existing services and using data based on actual outcomes, it is most ideally suited to an evaluative SROI analysis.

Comparative Costs of Cyrenians' SP funded Services

Table 9 is based on the DCLG model for the service user groups identified above. It lists the costs per annum associated with the delivering SP services to a person in each group. The table also details the costs which would have been incurred (using financial proxies) if SP services were not in place. Where these services could be delivered either in the community or a residential setting (where clearly the financial costs associated would vary substantially), the figure used is that associated with the majority of service users, e.g. if the majority would receive residential support, the residential costs have been used. This allows a comparison to be made between the costs of SP and non-SP funded services per type of need.

The calculations were conducted by Capgemini UK plc and were an evaluative model, based on national data provided by the Department of Communities and Local Government, the Home Office and the Department of Work and Pensions. Estimates of cost of alternative services arose from discussions with groups of Supporting People lead officers (DCLG, 2008: 9-10).

The groups of service users used (physical disability; mental health issues; domestic violence), all displayed an increase in costs of £2,392; £6,823, and £7,223 respectively. If we multiply these figures by the number of Cyrenians service users who were identified in the short-term outcomes data as having those types of needs, this equates to an increase in financial costs of £619,882. However, the remaining categories evaluated (learning disabilities: drug problems; alcohol; offenders), all evidence financial savings as a result of SP; of £40,123; £31,228; £33,791; and £11,983 per person per annum, respectively. When these figures are multiplied by the number of service users who were identified as having learning disabilities, drug problems, alcohol issues or problems of offending as one of their primary needs, the overall figures equates to a staggering saving of £7,383,953. When we detract the additional costs of SP funded services for people with physical disabilities, mental health issues and problems of domestic violence – of £619,882 – we are left with an overall saving of £6,764,071. Table 9 shows the savings for the 358 'needs' in the seven categories discussed in this paragraph. This figure is greater than the number of service users (238) because many had more than one need – a point returned to below.

Table 9: Impact of SP

Service user groups	Cost per annum SP supported	Cost per annum no SP in place	Saving as a result of SP per unit	No of service users supported through SP	Cost differential
Physical disability	£28,569	£26,177 None residential	£-2392	12	£-28704
Mental health issues	£23,458	£16,635 None residential	£-6,823	75	£-511725
Learning disabilities	£39,010	£79,133 Residential	£+40,123	13	£521599
Drug Problems	£19,049	£50,277 (residential)	£+31,228	77	£2404556
Alcohol	£14,140	£47,931 residential	£+33,791	111	£3750801
Offenders	£42,909	£54,891	£+11,983	59	£706997
Domestic Violence	£24,668	£17,445	£-7,223	11	£-79453
Total	191,808	292489	133563	358	£6,764,071

Table 9 shows a saving of £6,764,071 for meeting 358 needs, this represents to an average saving of £18,894.05 per need.

There are a number of caveats associated with this data:

- It assumes that SP-related costs incurred by the Cyrenians are identical to the ones used to calculate SP costs at a national level.
- Similarly, it assumes that the costs of non-SP funded services in the immediate area are identical to those used to reach the figures above.
- Costs are calculated per annum but not all service users will receive and/or need services for this length of time.
- Higher costs associated with residential care have been attributed to learning disabilities, drug problems and alcohol issues if SP were not in place. This figure was used as this was where the greatest number of service users would be signposted to if SP provision was not in place – using SP 2009 data. We know however, that not all service users for this group would have received residential support.
- The financial costs used were those calculated by SP in 2009, and as such are both proxy figures and also three years old.
- There are some forms of need that are not considered in the table.
- In some cases, service users had been listed in several categories due to the complex nature of their needs; this distorts the picture as the cost is associated with ‘needs’ rather than individuals. If we consider, for example, someone who has a physical disability and is also recorded as having issues with alcohol, the above figures would count that person, and the cost associated with delivering services separately, but clearly they would only receive one benefit allowance, for example.

This last caveat is a particularly important one. While the majority of service users featured in the short-term outcomes data fell into the generic ‘single homeless person with support needs’ category, most had more than one specific need identified:

- 25 (10.5%) had no specific support needs identified.
- 78 (32.8%) had one specific support need identified.
- 62 (26.1%) had two specific support needs identified.
- 68 (28.6%) had three specific support needs identified.
- 4 (5.0%) had four specific support needs identified.

A total of 422 ($78*1 + 62*2+68*3+4*4$) specific needs were therefore identified; a mean of 1.77 needs per person.

To illustrate this further, the four most frequently occurring specific needs are used. 111 clients had a need associated with alcohol and the next most common needs were associated with drugs, mental health and offending. Of the 111 who had alcohol related needs:

- 42 did not have any of the other three needs.
- 15 also had a need associated with drugs.
- 10 also had needs associated with drugs and mental health.
- 11 also had needs associated with drugs and offending.
- 11 also had a need associated with mental health.
- 10 also had a need associated with offending.
- 11 had needs associated with mental health and offending.
- 1 had needs associated with drugs, mental health and offending

All of this means that the figure in table 9 of £6,764,071, saved by providing services through the Cyrenians, needs some modification due to the overlapping savings for service users with multiple needs. However, even when taking account of the double counting that may occur – and which is impossible to quantify – the average saving per service user per year of the Cyrenians providing Supporting People financed services rather than other services being provided appears to be at least £18,000.

Future Savings from Effective Services

It may appear that financial costs increase when addressing the difficulties faced by homeless people in the short term as many of their social and economic needs have historically either been unmet or only partially met. However, there is evidence that meeting the longer term needs of homeless people can provide very substantial savings in the longer term; particularly in relation to criminal justice. An individual being ‘cured’ of an addiction or committing no further crimes can provide savings far beyond those made in the first year that were discussed in the previous section. The National Treatment Agency (NTA, 2012) estimates that the cost of crime is £26,074 per year for a dependent drug user who is not in treatment and that effective treatment prevents 26 offences per person per year. The NTA also acknowledge the impact of housing need on drug-related crime:

‘... Reducing drug-related crime is one of the main objectives of the government’s drug strategy. This recognises that the provision of good quality drug treatment, combined with stable housing and employment, can be very effective in preventing high volume acquisitive offending’ (NTA, 2012).

When considering a broader range of offences, reoffending is estimated to cost £13.5 billion annually, but the risk of reoffending is reduced by 20 per cent where there is stable accommodation (Crisis, 2011). In addition, the cost of custody needs to be considered for those who are involved in serious and / or volume criminal activity due to their substance misuse. The 2011 Annual Service report of the National Offender Management Service (NOMS) noted that the cost of imprisonment was £37,163 and again, commented on the role that appropriate housing can play in preventing this cost from occurring:

‘Getting offenders in accommodation is the foundation for successful rehabilitation, resettlement and risk management. It can provide the anchor for a previous chaotic life and act as a springboard for other crucial steps, such as getting and keeping a job, accessing health care or drug treatment. NOMS aims to increase the number of offenders who have settled accommodation, either while being supervised in the community or to go to at the end of a custodial sentence’.

While all estimates include a substantial margin of error, there is little doubt that there are huge long term savings to the public purse as a result of the efforts of organisations such as the Cyrenians. It would be unrealistic to assume that none of the service users who made a planned move away from services in 2011-12 will become homeless in the future. Also, the absence of data on ‘success rates’ for alternative forms of provision makes it impossible to establish whether the probable savings to public expenditure as a result of needs being by non-SP funded services. However, it seems reasonable to conclude from the quantitative data that, although exact figures are impossible to establish, the Cyrenians providing SP funded services is substantially cheaper than the non-SP funded alternatives and that the successful outcomes in the case of most service users are likely to provide long term savings to public spending.

5: Qualitative Data About Services and Factors linked to (Un)Successful Move-On

The quantitative data discussed above provides an overview of the effectiveness of services and of the probable savings arising from these services. The qualitative data, however, provides an opportunity to examine, in more detail and from the perspectives of both staff and service users, the benefits that could result from the Cyrenians' services, the factors that are linked to successful resettlement and the barriers to resettlement that service users face.

The Social Benefits of Cyrenians Services

In order to fully understand the impacts of services provided, it is useful to understand the levels of exclusion experienced by service users immediately prior to accessing support. The housing situations of service users ranged from private renting to sofa-surfing, living in hostels and rough sleeping, and there was a strong association between housing and other types of need and behaviours. In particular, there were close links between having nowhere to stay and addictions:

'I found the only way I could get to sleep was to get as drunk as possible, so you could pass out because the bench wasn't that comfortable believe me.'

At the time I was drinking because when you're on the streets the drink was basically something it keeps you warm basically, that's what it was at the time.

'Drinks, drugs...when you drink, you don't feel the cold, but your body still is cold. You still take drugs, 'cos you think that they warm you up, but they don't warm you up, it's just telling your mind that...It just numbs the feeling....living on the streets, I drank a hell of a lot more'.

The health needs of service users were also exacerbated by experiences of sleeping rough. This was often related to addictions or linked to other elements of the participants' situations:

'Asthma, bronchitis, depression and, like, sleeping-wise I don't think no-one gets any sleep...'

'On the streets....At that time I didn't, I didn't care about me health or drugs or alcohol, to be honest I didn't care about me health at all....Until I found Cyrenians and they've helped us out with a lot of things really'.

Some participants also reported becoming involved in 'survival' crime or even going to prison as an alternative to rough sleeping:

'Food-wise and drink-wise, I'm not proud of it, but I was going into sandwich shops and being sly and just taking stuff. I wasn't happy about it, but I had to survive somehow'.

'Shoplifting, begging, things like that, you know...just to get by'.

'Well, I had a word with my solicitor and he was saying, 'It looks as though you're going to get off with another suspended sentence because you've got mental health problems and you're under the influence and all that', and I said, 'Well, that's not going to work for me because I'm still homeless'. So I had a word with him, and we agreed that the best course of action was probably to be put in prison. So he had a word with the judge, the judge asked me if that was all right and I was given a five-month sentence in Doncaster prison'.

Homelessness also had major impacts on self-esteem:

'I just lost all respect for myself'.

'I had trips to A and E, I've used to self harm, I used to self harm quite a lot I hadn't no support over it. I was there quite often, being honest, I was there quite often. About ten times a year....'

The above experiences provide a baseline against which to understand the social impacts of support from the Cyrenians on the service users lives. The most frequently identified benefit was linked to the management of addictions:

'And I've done well; I've been off the drink for a canny few weeks. I do have a drink now and then but not like...I used to drink nearly every day for a while'.

'I've been sober for a month now, which helps a lot. I'm living life better than I have done for a long time'.

'Three weeks ago...I attended my first AA meeting. I've been to at least one meeting a week since, and it is really helping me at the moment. It's basically down to the people that I've met through the Cyrenians'.

There were also examples of support increasing the desistance of service users from offending, improved physical health and increased levels of self-esteem:

'I got arrested twelve times in one year....I failed twenty-three out of twenty-four sessions...I was just getting community service and stuff like that. But like since I come here...I haven't been in trouble for nearly five year now'.

'I'm as fit as I've ever been. I'm a healthy twelve and a half stone, whereas before my problems started I was 19 stone. I was having a lot of problems then with breathing and stuff like that. Health-wise I'm doing all right now, which is good'.

'the Cyrenians...They supported us, erm, they taught us if I was feeling suicidal come to members of staff 'cos there was day staff and there was night staff as well, so much more, came in quite handy...I've stopped 'cos they've supported us to not to do it, they got us a counsellor which I got finished with and I've got another counsellor at the doctor's. Now I'm, I'm trying to help myself not to self harm when I'm feeling really down, I've got to speak to someone, so I've been told'.

'The end of my homelessness was coming here'.

Factors Linked to Successful Move-On

Of course, as evidenced by the quantitative data, the services provided by the Cyrenians did not always result in greater independence or a planned move away from services. Successful outcomes were particularly difficult to achieve for service users with addictions:

'When you look...you can't help but see a hierarchy, you know, housing, drugs. When it comes to it they've got to go out and score some gear...everything else becomes secondary'.

'I'm thinking of a couple in general, alcohol, won't address their alcohol issues so they're put in here, if they were evicted they'd be on the street'.

The assumption within SP policy that all service users should move to independent accommodation within two years of accessing support was felt by staff to be inappropriate in some cases:

'Average stay at Elliott House is 235 days...some people have been here for almost two years or just over two years. I think that just highlights how hard it is to re-house certain people'.

'The move on possibilities for at least 20% of our clients in here are between nil and four at best'.

'We've also got somebody that engages with every service available and values support and keeps every single appointment but doesn't make any progress and hasn't done for a number of years. He's said quite openly, 'If you try and move us into there, I'll not last. I'll last a day, two days and I'll be back under rough sleeping'.

This raises the question of what the qualitative data could reveal about how characteristics of service users and services provided are linked to outcomes. A number of factors were identified as important in this regard; these are discussed in turn below.

Motivation

The effectiveness of services is heavily dependent upon the willingness of service users to move towards resettlement. One worker discussed the frustrations of seeking to provide services to people with little motivation to engage:

'I remember trying to get somebody...out from rough sleeping and we thought get him accommodation and make sure he had his benefits in place, but he couldn't have cared less...he wanted us to make sure his dog was fine and he had access to library books...you cannot help but impose your own judgment and view on what is right and what is important and what is necessary'.

In cases where service users had made a move away from services but later returned, several attributed this to not being ready to move on – linked to ongoing needs and a lack of key life skills – which was often compounded by them refusing to accept support in the transition to independent living:

'I rushed into it, I didn't think about it, it was like me first time moving into me first place from coming out of jail...I didn't take floating support...I was booking dates for [her] to come and see us and I wasn't turning up or I wasn't answering the door to her because I still high from the night before'.

'when you move into here and you've got friends and then each one moves on and you are left, you're like 'ah well I wanna move, I wanna be away' and that's basically what it was, I took the first flat that became available'.

'I took the first flat that became available without thinking, even though I was still using cocaine at the time and that's where all me money was going basically, so...It was the drugs, it was getting more heavier and heavier'.

However, the majority of service users reported that they were looking forward to living independently, with the opportunity to build relationships with their children being a key motivating factor for change;

'The way I live my life now is all in preparation for me being with my son again'.

'My priority as I say number one is getting my own place so that I can concentrate on going back to court and getting permission to see my children. At the minute being in a place you stand no chance, obviously you're allowed no kids nothing like that....'

Relationships with Fellow Service Users

A key factor linked to progression from supported accommodation to independent living was the development of positive social networks. Service users in resettlement projects felt that one of the key advantages of accessing Cyrenians services was the opportunity that it provided to build positive relationships with peers. Service users who were living in move-on accommodation talked at length and with great enthusiasm about the friendships that they had developed with fellow service users – appreciating the support of others who had had similar experiences to them. They reported that having 'friends' made them feel happier and gave them a more positive outlook on life:

'I technically class myself as not really having a family, but since I've been in the Cyrenians that is my family, I've got a lot of friends and stuff like that, that's my family that I care about now'.

'It's just easy to get along with people who have actually been in the same situation and it has made my coming to terms with my problems a little bit easier'.

'I feel much happier...I know a couple of people that live here and I can talk to them and they give me more support'.

However, there were also many difficulties associated with relationships with other service users, particularly in direct access accommodation. Service users spoke of the difficulties of remaining substance-free in light of the availability of drugs and alcohol, peer pressure and the stress of coping with the sometime aggressive behaviour of other residents under the influence of drugs and alcohol. A number of service users who had been in recovery reported returning to drugs due to the stresses of living in direct access accommodation;

'These places create their own problems...I'm a recovering addict first and foremost...trying to keep yourself in recovery in this place has got to be the ultimate task for anybody'.

'It was making things worse because, like I say, it was pretty much like prison: drugs and alcohol readily available'.

'It's bringing people back into addiction and it's putting our lives in danger, without a doubt. Somebody that hasn't been using for a couple of years comes here, finds the pressure of the place too much and ends up using'.

'I have used a good few times since I've been here. That's the first time in two years I've used gear and things like that. Just my way of coping in this place, you know'.

The pressures were also felt by residents who had no history of addiction problems:

'I don't feel hostels, nowadays, provide for anybody that hasn't got social issues or drug issues. If you haven't got one of them two, well, you're down the pecking order in these places and, to me, people without them issues should be actually nearer the front of the pecking order because then you're creating your own problems'.

'I don't want to be surrounded by, like, twenty four seven, as it were, with alcoholics and drug users and high dependent people...I'm not like that and I don't even want to go anywhere near that'.

Staff also acknowledged the difficulties that residents faced in direct access accommodation:

'Hostels have had a real bad reputation, you know. It's a catchment area for drug dealers, you know, so it perpetuates drug use in a lot of places. There's a lot of peer pressure'.

'Direct access hostels have generally been the biggest of the hostels, getting the most people in...Upwards of 40 people in each one....logically it's a recipe for disaster'.

'They'll come from rehab and they've had a lot of resources put into them already...they'll go back into somewhere like a direct access and they succumb to peer pressure and it's absolutely just a complete waste of money'.

In trying to maintain 'order' and 'balance' within direct access accommodation, staff reported that problems relating to size, are often compounded by the limited control that they have over the acceptance of new clients and the limited value of evictions, which would ultimately result in repeating cycle of homelessness for service users.

Overall, smaller accommodation units which service users could move on to from direct access accommodation appear to be more likely to foster positive relationships amongst service users and between service users and staff:

'It's been good. I mean it's quiet and it's not like Old Virginia, it's quiet. We all get on with each other...it's hard to get on with the people, especially Elliot House you've probably been there...they go on at people because they're all into heavy drinkers or drugs or whatever and it's hard to communicate with them'.

'Roycroft was good because there was only maximum ten or twelve people in so obviously staff had more time for you. And very much the same with Hawthorns, unfortunately Elliott was something like a fifty bed hostel so time is very limited'.

However, the smaller units were not completely free of problems; problems are sometimes brought about by a lack of 24 hour staffing:

'...there's no 24 hour staff like here it's like in the morning you get staff obviously just for health and safety reasons and after that they're free then and do anything they want, and they're all like drinking and start fighting and...I done it all myself, don't get me wrong, but I passed all that now'.

Social Activities

There was correlation between positive relationships with peers and engagement in social activities such as playing sports and creative activity. In addition to enjoying these activities, residents were able to identify three further advantages of them. The first was that they prevent residents from becoming bored and provide a welcome distraction from negative thought patterns:

'Organising football...it gets us occupied and gets your mind off of other things'.

'Sometimes we have a quiz or bingo ...we're trying to get a bit more games involved at the minute, you know so we've got something to keep us occupied instead of being bored and sitting in the bedroom...you get depressed sitting in the bedroom'.

Secondly, the manner in which service users discussed the activities made clear the role that they played in giving structure to their days and the impact on this on feelings of self-esteem:

'Basically I'm out looking for jobs -- I have set days and stuff when I go out looking for jobs...then we've got football training about three times a week...and then obviously there's odd-jobs to do...I enjoy it; I'm never stuck with nothing to do...It's good for my self-esteem, and it's good if I know there's something out there that I need to do, if I'm just sat bored.... just by doing everything I can do right now, it has sort of made me feel better about myself'.

Accordingly, engagement in social activities was seen to help protect against relapse into addiction:

'We're doing a recovery football team through the Cyrenians and through - we're called North East Athletic, and it's a team set up by people in recovery for people in recovery. The football is really helping me out'.

'I'm playing football now and we play a big Fifa game downstairs after 5 / 6 o'clock, there's five or six of us together which is good, and I didn't have nothing like that over there except drink, I was always surrounded by drink you know...It's been good'.

Staff, recognising the value of this for service users, reported making concerted efforts to structure service user days around organised activities. As one service user commented:

'that's one of the things about them, they encourage you to get involved in activities, not just stagnate in your room. They are good at that I must admit'.

Positive Relationships between Staff and Service Users

There was strong consensus amongst service users about the value of the relationships that they had developed with staff – particularly with key workers. Staff and service users reported three key elements to this relationship. Some staff discussed the importance of their role in teaching life-skills to service users:

'...the mistakes we made in the first place was to assume, because they'd been here and we'd done everything for them and they were thirty-five, forty, however old, that they had these skills. So we put people in accommodation, said, 'There you go', we set them up and they wouldn't know how to switch a toaster on, they wouldn't know how to boil an egg'.

'Life skills...the simple stuff – the basic stuff that we take for granted, being able to cook, being able to realise that if we have £80 coming in £10 of it's got to go on electric for a week, £15 on gas, rest for food and just sitting down and working through something like a budgeting plan for people. Something that's never got done in the past, assumed, just hoped, you know, you just assumed foolishly that somebody could cope with real life and some people can't you know, they really can't'.

Staff spoke of the 'rubber ball effect' where historically, service users had had their primary needs met, but they lacked the skills needed to sustain a tenancy and within weeks or months, they had returned to services. One service user who was living in Hawthorn Terrace talked about the importance of having key life-skills in their transition from semi-independent to independent living:

'I would say in 2 years time I should be able to become totally independent because at the moment I have now, I can now manage debt. So my television licence is always paid up. I've always got money on the gas. I've always got money on the electric. I'm always clean shaven. I always make sure my laundry is done. I've got the essentials, you know, I can iron, I can cook for myself'.

In particular, there was agreement among service users about the value of financial support, whether it was in the form of assistance to claim benefits or to manage a budget:

'The Cyrenians is the best hostel I have actually been at, I'm being honest as well, 'cos they've supported and helped through me life really. They helped us with benefits, they helped us with managing money, courses, so I could do some courses...make sure I paid me rent on time...'

'They helped me to budget a lot better and also I had a few problems which they helped me, and took me actually to the CAB about, which was very helpful'.

However, for residents, it seemed to be other elements of their relationship with staff that they most valued. The befriending nature of staff was felt to be very important:

'My support worker is fantastic...you can have a laugh and you can joke about things...when you actually do need help that's serious, he's there for you and he does his best for you. Then management-wise they're all fantastic to be honest'.

'It was hard at first...but...after a while, I found it quite easy 'cos it's, the members of staff were all helpful... they've all been very friendly...'

Indeed, staff spoke of the reluctance of service users to engage with staff upon arrival at a project and the impotence of the key worker role in breaking down those barriers and building trust with service users.

'Strength – approach of workers....they've got a relationship there and it works and I think that's what's key, you know...without that individual relationship and the breaking down of that barrier, [the service is] going to be ineffective'.

Despite being supportive of the assessment and support plan process for new clients, staff expressed concerns about the extensiveness of the assessment process and the timeframe in which support plans must be completed with new service users, suggesting that the urgency with which these processes must be completed can hinder the development of trusting relationships:

'It's not the nicest experience...it should be something that's built up over a couple of days...organic'.

'the friendly approach might take longer for some people but it would be better for them. We've got [people] in here with very entrenched mental health problems who don't want to engage straight away'.

'It's probably too unwieldy for the client group that we have. I think it could have been 20% shorter quite easily. You could spend your time doing twenty, thirty, forty, fifty support needs when it's the first five primary ones that are worth targeting first and foremost'.

They argued that support plans must be done for the *'right reason at the right time'* and there should be more flexibility afforded to this.

Another area of the staff-service user relationship that was recognised as important – and one which was also identified in previous research conducted for the Cyrenians – was the accompaniment of service users to appointments. Outreach support was described as the *'lynch-pin'* between the identification of needs and engagement with appropriate services. Staff discussed the importance of giving staff sufficient freedom to make sure that not only are appropriate referrals and appointments made, but that service users are accompanied to appointments. Indeed, both staff and service users spoke of service users' anxieties around accessing services due to previous negative experiences with external agencies, of service users being barred from services because of missed appointments linked to chaotic lifestyles:

'So, from in here we try to give staff more freedom to make sure that we do a referral, put the right appointments in place but also accompany people to advocate on their behalf. Some people don't want to go because of bad experiences, they've been barred from services and they won't be allowed back in unless somebody goes with them and they don't know what services are'.

Accordingly, the advocacy role played by key workers was vital for many service users.

'And any appointments I had, [staff member] used to go with me for support...just moral support more than anything'.

Barriers to Move-On

In addition to factors linked to successful move-on, the qualitative research revealed a number of barriers to move-on for service users.

Financial Exclusion

Service users are particularly prone to financial exclusion, linked to rules around benefits, the difficulties of securing employment and the inability of service users to work while living in supported accommodation.

Benefit Rules

In an effort to gain employment in the future, a number of service users were engaged in voluntary work. One service user was particularly enjoying volunteering at TCUK but later had his benefits penalised as it was felt by the benefits agency that he was not spending enough time looking for paid work:

'I was volunteering five days a week, getting up at half past five in the morning until four o'clock. I was overstretching me voluntary time limit...so the job centre rings up to tell us off...that I wasn't looking for work...it's upgrading me skills rather than sitting in the house, you know, and they just didn't see it that way...they hosed us off for nine weeks'.

Employment and Supported Accommodation

One of the most frustrating elements of being in a residential project for some service users was being unable to work because they would be required to pay full rent; this would not be affordable to service users if they were in employment:

'I've knocked a few jobs back since I've been here because the rent's too high, you know, it's not possible to work'.

'But it's sort of catch-22 with a place like this: you find a job, you lose your place here, because you can't afford the rent that they actually charge properly'.

'I would go to work back tomorrow if I could but living in like a place like this it just - it's not affordable because as you know yourself hostels are quite expensive if you're working'.

One member of staff also expressed concern about this. While the Cyrenians have a limited amount of move-on accommodation for service users who are in employment, they suggested the need for new ways of working to overcome this:

'You get the perverse situation where people can't afford to work and live in hostels...but we are trying to get them into work...it's absolutely ridiculous. So we'll need to find a way where we can do that either organisationally through some sort of welfare type payment or another source of income where we can offset that amount to make it a level playing field....but the real answer would be affordable accommodation with floating support....so it's a transition rather than a jump and not a barrier'.

Other staff felt, however, that while they knew this was an issue, they did not feel that service users should not be encouraged to remain in supported accommodation while working.

Difficulties securing employment

Service users reported difficulties finding employment due to the lack of a fixed abode, their sometimes chaotic lifestyles or needs, their offending history, lack of ID or a bank account and most notably, the limited employment opportunities available in the current economic climate.

There was one very specific form of practical support that the Cyrenians were able to offer in tackling financial exclusion:

'There are practical things we can do to aid somebody so, for example, we've got an agreement with Barclays Bank where proof of ID can come from us and a bank account can be opened. Sometimes opening a bank account, people have huge difficulties with because, in terms of their financial history, but certainly just having basic proof of ID, in most cases, it's non-existent. Trying to find somebody's birth certificate, try to find all these different things'.

The restrictions imposed by criminal records, however, were a key barrier that no amount of services could overcome:

In terms of employment with unemployment history or requiring CRB checks...In some cases, you need to do CRB working on building sites, which is crazy and it's stops being about rehabilitation of the offender and more about risk management from the organisation'.

Accessing Move-On Accommodation

The interviews raised a wide range of issues about respondents moving on from the Cyrenians' residential services to independent accommodation, including problems linked to accessing move-on accommodation in the private and social rented sectors and the forms of support that were most needed to ensure a successful transition.

Accessing Social Housing

Staff and service users spoke at length about the difficulties that the client group face accessing social housing, largely due to the eligibility criteria of some housing providers. Limited move-on accommodation is resulting in many service users remaining in expensive supported accommodation for significantly longer periods than necessary and projects being unable to accept new clients. Exclusions are particularly affecting people with an offending history, people who are not considered to have a local area connection, people considered 'too high' risk, people with addictions and those with a history of previous evictions. One service user recalled:

'I went to Newcastle Council, which was not very useful like, they say I wasn't their priorities to the area, considering I was born and bred over here. I went to Gateshead and they just gave us a list of different places and I was phoning about and they were the only place that had vacancies'.

Staff largely accepted the principle that, for service users who had previously accrued rent arrears or been involved in crime and/or anti-social behaviour to be considered for re-housing by social landlords, they needed to provide evidence of change. However, there was some frustration expressed that some social landlords are not willing to consider applications or that the level of commitment expected on the part of service users was unrealistic:

'Council accommodation - for 70% of the people in here they're going to be refused or they're not going to be anywhere near the top of the list'.

'In terms of moving on with their life, we have somebody who's been abstinent for a year, he had quite a considerable criminal record, a lot of offences related to alcohol, he had mental health issues as well...he was still barred from housing because of his alcohol related activity...the guy said well I want to see two years....it's absolutely ridiculous'.

'Financial inclusion...it's a definite barrier though. At the end of the journey is where it can be most frustrating for the individual because they've come this far and they've got something stupid from two or three years ago holding them back'.

'The historical issues seem to be the biggest barrier to move on so it might be historical offending, getting caught for offences you did a couple of years ago, it might be historical debts, it might be the impact of your CRB but there's got to be something...'

There were suggestions that – at least with Your Homes Newcastle – these difficulties could sometimes be overcome, particularly with some advocacy:

'As a Place of Change, our main priority is move on; independent living. We work very closely with Your Homes Newcastle. We've got a representative...somebody who represents us to Your Homes. Three or four weeks after coming to us, we'll put in an application into the system, so they can be vetted and be ready to bid. The vetting process can take a long time. Some of them will not be approved because of their past history. Once they've been approved and we feel they are ready for independent living, we start bidding...you've got to bid for so many weeks before you become priority, so that's what we do'.

'If somebody isn't on Pathways they wouldn't be able to get into housing because of the level of rent arrears....in some ways, I can't argue with that... but the expectation now isn't that it all gets paid off, it's that there's a concerted effort to pay it off, there's regular payments against it'.

'Your Homes, they will not take you on until you've paid off the arrears...or until you at least make enough effort to clear whatever you owe. So what we tend to do here is make arrangements with the lads to clear, and make some plan in place to pay whatever they owe, or at least make some contribution towards it. And we also can sometimes make plans for appeal process, because sometimes they just look at it on face value what's on the form and that's it. If they come back with us for a reason why somebody's been knocked back, we can have a chat with, a meeting with [Member of the Pathways team]. [Member of the Pathways team] will advise us whether there are grounds of appeal. And half of the time we've appealed, and we've been successful'.

Overall, however, staff felt that housing providers should reconsider how they perceive risk so that services look beyond an event or action in a client's history and instead, look at the circumstances, motivations and conditions around that action, the time elapsed since and how these factors relate to the client currently. Clients' actions should be understood as a basis for preventing future difficulties rather than a means of exclusion.

Accessing Private Rented Sector Accommodation

There were a number of service users who had experience of the private rented sector and there were instances where the accommodation or the landlord was given qualified praise:

'Had a private rented flat...then I lost my job and the private landlord did not accept anybody who was on benefits. My landlord was okay...as long as the rent was being paid'.

'It's better than the streets'.

However, the majority opinion among service users was that the private rented sector had been, or was, an unsatisfactory option for a number of reasons, particularly the lack of security of tenure:

'Well, from my past experience, I'd sooner go back to local authority housing. I think it's more secure. If anything does go wrong I think there's more leeway than you would have with a private landlord'.

'there's a few damages in the flat what she won't repair...we still haven't even had a tenancy agreement'.

'I found my own place and then the landlord because I was late with my rent, threw me out so I became homeless for the second time, this time it lasted for three months'.

The experience of shared accommodation in the private sector had been, or was, particularly unsatisfactory and, in one case, was linked to being a victim of violent crime:

'I was living upstairs and because I say I was trying to get off the drink and that and living above the bar and people who live upstairs are like alcoholics and that There was about five bedrooms upstairs but all like alcoholics, you know, every penny they get they go downstairs and spend in this pub and that's what I was doing as well'.

'to be honest, it's more like a dog kennel...its private....it's not run by the council or anything, which is why the conditions are in what they're in. It's horrible...it is run as a hostel, I mean, you each have your own room, your own keys and no one else has access to your room so, once I'm in there I'm in there, I'm by myself and I can do what I want. But I don't spend any day time there because it's too noisy so I go out. It's a roof over my head and that's all it is'.

'A lot of trouble up there, the last place I was staying, up at the Tyne Hotel, like there was eleven people starting with my nephew and it involved baseball bats, knives, machetes, you name it...they took us from behind and we were getting hit across the back of the head...broke my ribs, fractured collarbone, broken nose'.

Several service users had also had negative experiences in the private rented sector due to the poor condition of the properties and the ongoing neglect of the properties by landlords:

[Without the Cyrenians], I would have just walked out and probably gone back on the streets or something for a while because I just couldn't bear being there anymore because my landlord was pestering us demanding money all the time...there was nothing there, no cooker, there was no washer...there was nowhere to cook so it costed me a fortune to get takeaways every day'

'I'm in a hostel in Byker but it's...to be honest, it's more like a dog kennel...its private....it's not run by the council or anything, which is why the conditions are in what they're in. It's horrible'.

Initial or ongoing costs were also identified as a barrier to accessing and sustaining the private rented sector by some respondents, even when receiving support to try to access the sector:

'The only housing they've said I can actually get are all private. Once I've got the bonds and all that, the actual places doing the deposit scheme but it's actually stopped for a couple of months and doesn't start until July so I was waiting until July until they get the funds back again and start up again'.

'But luckily it wasn't that long; I pushed myself I said I'll get somewhere. I was going to that housing place they call it, to me they were a waste of time you know they kept demanding money and I said 'well if I had the money I wouldn't come and ask you for help I would just go and book a bed and breakfast for a night, you know' – deposits'.

'I certainly won't be looking at private rented again, mainly because it's just too expensive to live. If you're working it's very, very high rent so I'll be looking more into Housing Association or even Council'.

The experiences of service users were largely reflected in concerns that staff had about the use of the private rented sector for move on accommodation. One discussed a preference for social rented housing on the grounds that it provided *'long-term tenure, safety, security...you've got a track record of a provider'*. Another discussed the need for rents to be affordable:

'A lot of rents are above the housing benefit rate which means that it would fall upon that individual to top up any rent which would be pretty difficult for them to do, especially if they're maintaining a habit as well, you know, which we fully expect that to be the case for some individuals so there's a few barriers'.

However, one staff member felt that the private rented sector offered an opportunity to secure some service users move on accommodation quickly:

'Very rarely, far too rarely, [service users move] into the private rented sector...I think we need to be a lot smarter in terms of when somebody comes to Virginia House, for example, there's a window of opportunity in some ways where some people won't require that much intervention....they'll be ready to move and live by themselves fairly early on in that journey'.

Staff pointed out that the Cyrenians were trialling a number of approaches to making the private rented sector a feasible and safe move-on option for service users; including, working with the local authority to identify 'good' private landlords, developing positive relationships with a number of landlords who could offer suitable accommodation, entering into agreements with landlords about the management of the property and supporting service users to access grants for deposits and furniture:

'We do have a project that sources private landlords and that's driven very much around good quality, affordable accommodation. Where we can, we'll use the private rented project because

they're up to a specified standard...but if we look at the private rented sector as a real option, we can't necessarily restrict ourselves to the credited city council scheme'.

'The more success we've had is through private rented and we've been using the Vickers relief fund, St Martin's-in-the-field down in London, to get grants over £250. Now, when we first started doing, finding flats we got like a hard-core of four of five landlords now we're working very closely with. [Staff member of the Pathways team], we're working really well alongside her for the last four years to identify the right landlords, the one who will take the opportunities with our clients'.

Staff also suggested that work needs to be done about changing the attitudes of service users towards the sector:

'the aspiration of individuals is to have a council flat or house. We need to include the private rented sector as an aspiration because otherwise we will start seeing a silt up of beds if some people stay there far longer than they need to....The pathways route is essential, it's hugely important that we retain that and the access to social housing'.

Housing First

Housing First is another new approach being trialled by the Cyrenians, following international work and research which suggests that for some homeless people, being placed in suitable self-contained accommodation, along with intensive services to meet their other needs, is a more effective method of working than moving them through the different stages discussed in earlier sections of this report. In addition to sparing service users from some of the problems faced by service users living in hostels, staff felt that this approach could have a significant impact on service users' self-esteem and self worth, thereby increasing their motivation to make sustainable changes:

'Our model is hopefully, is missing out all the middle men, putting somebody straight into a house and we have personal budgets to hopefully make that more into a home as quickly as possible...giving them ownership and giving them worth and, you know, raise all their self-esteem...put that support in and get them accessing services and getting people coming to them in their own house, you know, and giving them a sense of belonging'.

The attraction of this approach for service users was obvious: *'who doesn't want their own home and for some people it's going to be their only opportunity, you know'.* However, the ability to access appropriate self-contained accommodation on the behalf of service users was already proving to be a key difficulty: *'Sourcing accommodation straightaway is causing a problem. It's the key to this working'.* In particular, finding the best type of accommodation in an area where there would be a supportive community had proved particularly difficult. Local authority accommodation was most likely to be offered in disadvantaged areas or high rise housing, where it might be particularly difficult for service users to tackle addiction problems. Despite a more desirable area being the best location for service users, one worker acknowledged the difficulties that this might create in terms of the reaction of neighbours:

'... nobody wants our kind of group living next to them. Nobody wants our kind of group outside of our sector working with them, you know. It's a difficult client group to work with'.

So, a substantial part of the work on the Housing First model involved reassuring landlords that there would be sufficient support provided for the service user:

'We're going to reassure them that we are going to be there to support them and also we will be acting as a go between. Hopefully instead of where normally a tenant will automatically go to a

landlord with problems, hopefully we can intervene and say we'll act as a go between so if the landlord has a problem (inaudible) we'll go and say 'Right this isn't on. We need you to do something about this' - whatever - and likewise for the clients'.

Providing tenancy training to the service user was also seen as another way to reassure landlords that their interests would be properly considered.

Forms of Support Needed for Successful Move-On

Most service users on moving onto independent accommodation do not require the type of intensive support that is involved in the Housing First approach. However, providing floating support to service users who had moved into independent accommodation – whether into accommodation managed by the Cyrenians such as Hawthorn Terrace or elsewhere – was widely seen as a vital service.

A case management process was in place to ensure that support was transferred seamlessly from a residential setting to independent accommodation:

'There's a lot of anxieties but this is where the resettlement workers or the float support workers are key and we operate a case management process where the hand-over's right and there's an introduction from the float support worker which happens six or seven weeks before so they're not getting met with a stranger at the point that they do leave'.

Service users who were yet to move-on reported a number of anxieties around move-on and welcomed the idea of receiving floating support following move on. Where service users had their own tenancy, they were highly appreciative of the support received by floating support workers. The value of floating support was perhaps expressed most strongly by care leavers and offenders who typically had a long history of the 'revolving door' syndrome. Here, service users reported receiving no or little support in their transition from institutions to independent living in the past. Care leavers, in particular, suggested that if they had been supported through that transition in the first instance, they may not have become homeless:

'You got out wherever you'd been, YOI, Young Offenders Institutions, or care homes and you were just left to your own devices. You were put in a place and then right this is it, you know. I had no life skills, even just people skills, you know. You were just put in a flat and that's it, you know...And managing all the different water rates, you know, gas, electricity...I didn't have a clue....I was there for two weeks, you know, and I was still very chaotic at the time so I've ended up back in prison'

'I think if years ago, I had had the help where I was given my own place and then some support on top of that, I don't think I'd be here today....maybe I would have had ten years of being in employment and another look on life'.

The key anxieties identified by staff and services users related to having the basic life-skills needed to sustain a tenancy – particularly in relation to managing a budget and having the ability to cope if they encountered a problem.

'most difficulty - taking responsibility for paying bills. Taking responsibility for themselves in that accommodation, you know. It can be quite difficult. Budgeting. They've never really had a budget. A lot of people run up arrears even in supported accommodation because they'll not even pay a service charge which is maybe minimal so it's change – it's making it a culture that they have to understand that, you know, nothing's free in this world and they're going to have to pay their way. 'If you want electric, you're going to have to pay for your electric. If you want to stay in this accommodation you have to make sure that you maintain your benefits cos that's what's running the

household', you know, so I think it'll be them household tasks and household bills that'll be quite difficult.

'I think it's more that if I hit a problem can I really deal with it myself? It's the support side that I'd be more worried about, but saying that it was more my fault the last time because I went from Newcastle to [another area], whereas if I was still in the Newcastle area I would have got what they class as 'outreach support' from Cyrenians'.

'Just like someone to come out a couple of times a week, you know, just to see if I'm alright, taking medication properly, see how I'm coping with money. I'm not too clever with money'.

'I'd be a little bit apprehensive at first, I've never had me own flat but I think once I get in, get it the way I want it, I'd be quite happy, yeah....Maybes a little bit like paying rent and that but I think the Cyrenians are going to help me there. They help you budget and everything, yeah'.

Assistance with meeting material needs, specifically for furniture, was an area where both staff and service users agreed that support could make a major difference:

'We make sure that people are set up, they're not moving into an empty shell...half the problem was that people didn't have furniture, they didn't have their gas set up...that is all part of the package... 'the establishment package''.

'The major problem was I had to, well I didn't have to, but I found it easier to move into a furnished flat because it found it difficult to get furniture for a flat'.

'She's very helpful, yeah....they help us out for like putting in for community care grants and whenever, just to do the flat out'.

Another theme that linked the discussion of residential projects to the one about independent accommodation was the need to establish or maintain positive peer relationships, which were seen by workers as being critical to achieving success in independent living:

'The other side of it was around isolation...that's why we found shared properties...people didn't want to live by themselves and, at the time, there wasn't really floating support to ensure tenancy sustainment'.

'We talk about it and we make a lot of effort to ensure that people have positive social networks by the time they leave as well as the accommodation'.

'We've structured our hostels where they're not just accommodation, there's community activities. Virginia House, for example, has a radio station, a gym, a recording studio and a café, reception area. Elliot House has various activities as well. Francis House, they have a women's group. So, [when they move on], they've got links back in'.

A final area where staff and service users agreed that support in independent accommodation was essential was avoiding relapse into addiction. One service user discussed their fear in relation to this area:

it's just the worry; I've just got to stay away from the drugs...'

One service user identified both the continuing support of staff, and the avoidance of peers who were misusing substances, as being crucial to ensure that they did not relapse into addiction after moving into independent accommodation:

'Well, it would be a lot easier for me just to stay close to around here where I can come down and visit and stuff y'kna, and I don't know no-one around here so it's a lot easier for us to not to get back into the drugs'.

6: Conclusion

The evidence collected for this report has used national data to suggest, albeit with caution, a substantial saving per person from the provision of Supporting People funded services by the Cyrenians rather than alternative services, with the long term savings that could be derived from successfully meeting needs such as addictions and offending behaviour are likely to be significant.

The Cyrenians have an impressive 'success rate' in terms of immediate outcomes, with approximately two thirds of service users achieving a planned move away from services and a similar proportion achieving greater independence. Quantitative data provided some similarly impressive figures in terms of meeting several needs, for example to maximise income.

The qualitative part of the research suggested that service users were particularly appreciative of the informal relationships that they had with staff and with the provision of purposeful activities associated with sport and the arts. Some spoke very warmly of the positive impact that contact with the Cyrenians had had on their lives. It was evident that the Cyrenians were a flexible provider of services, able to develop new approaches, with Housing First the most recent example.

Most of the areas of concern identified in the report are common to many organisations that provide services to homeless people. The qualitative data suggested that direct access accommodation provides particular challenges to service users and staff (challenges that may, of course, be avoided when using a Housing First approach). It was in this form of accommodation that there appeared to be particularly acute difficulties with substance misuse and negative relationships with peers. Needs associated with addiction seemed particularly difficult to address, as were the often associated needs relating to mental health, crime and causing harm to others. There were also difficulties with financial exclusion both during and after the use of the Cyrenians' services. Leaving residential services could be particularly problematic due to a reluctance to access the private rented sector, arising largely from past negative experiences and the difficulties that many service users' histories created for accessing the social rented sector – although the Cyrenians are working positively with the local authority's 'Pathways' team to successfully address some of these difficulties.

Some of the barriers that the Cyrenians' service users face need to be explored further if the most effective ways of working to overcome them are to be identified. For example, few would question the difficulty of tackling the closely linked problems of homelessness, crime and addiction, but there is a need for a more detailed understanding of the links if the cycle of homelessness is to be broken for these service users. The Cyrenians providing identification to banks on behalf of service users is one excellent example of a measure to tackle financial exclusion, but more measures of this nature need to be identified and trialled. The value of the Housing First approach will also need to be assessed once a number of service users have experienced this approach. In addition, it would be useful to consider the definitions that service users have of successful outcomes, to provide a more nuanced approach than the simple measures that are provided by the short term outcomes data.

However, despite some areas of continuing difficulty, and others where further investigation is required, the overall message of the research was clear, that there are significant social and financial benefits to the provision of holistic, flexible and innovative housing-related support services to homeless people.

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