

Resident Impact Assessment

Title of policy, procedure, function, service activity or financial decision: Homelessness and Rough Sleeping Strategy 2019-2023

Service Area: Housing Needs and Strategy

1. What are the intended outcomes of this policy, function etc?

The aim of the Homelessness and Rough Sleeping Strategy is to find innovative and practical ways to resolve and prevent homelessness, including rough sleeping, through the provision of accessible services to members of the borough's community who need assistance.

We have identified three key priorities for this strategy based on our current work, subject to consultation with our partners.

1. Preventing homelessness through effective partnership working.
2. Focusing prevention and support for those most at risk of homelessness. The support will extend to the health and wellbeing of individuals, in addition to a place to live.
3. Work towards eliminating rough sleeping.

2. Resident Profile

Who is going to be impacted by this change i.e. residents/service users/tenants? Please complete data for your service users. If your data does not fit into the categories in this table, please copy and paste your own table in the space below. Please refer to **section 3.3** of the guidance for more information.

The data for homeless applicants in the most recent financial year for which we have data, 2017/18, has been used as the indicative service user profile.

| | | Borough profile | Service User profile |
|---------------------------|------------------------------|------------------------|-----------------------------|
| | | Total: 206,285 | Total: 467 |
| Gender | Female | 51% | 60% |
| | Male | 49% | 40% |
| Age | Under 16 | 32,825 (16%) | 0% |
| | 16-24 | 29,418 (14%) | 17% |
| | 25-44 | 87,177 (42%) | 57% |
| | 45-64 | 38,669 (19%) | 23% |
| | 65+ | 18,036 (9%) | 4% |
| Disability | Disabled | 16% | 39% |
| | Non-disabled | 84% | 61% |
| Sexual orientation | LGBT | No data | 12% |
| | Heterosexual/straight | No data | 88% |
| Race | BME | 32% | 57% |
| | White | 68% | 43% |
| Religion or belief | Christian | 40% | 7% |
| | Muslim | 10% | 4% |
| | Other | 4.5% | 1% |
| | No religion | 30% | 4% |
| | Religion not stated | 17% | 84% |

3. Equality impacts

With reference to the [guidance](#), please describe what are the equality and socio-economic impacts for residents and what are the opportunities to challenge prejudice or promote understanding?

The proposed strategy will benefit those who are vulnerable to homelessness and/or those who are currently homeless. This will be achieved by providing clear, strategic direction and specific actions to prevent and relieve homelessness.

Analysis has shown that a number of protected groups are over represented in homeless applications in comparison to the borough profile:

- A higher proportion of females are making homeless applications especially those in lone parent households.
- A higher proportion of younger people (25-44) are making homeless applications.
- A higher proportion of people with disabilities are making homeless applications.
- A higher proportion of Black and Minority Ethnic groups are making homeless applications.
- A higher proportion of lesbian, gay and bisexual people are making homelessness applications.

Gender

The borough has an almost even split by gender. However, households that made homeless applications in 2017/18 were disproportionately headed by a female (60%). Over half of all households accepted as homeless were lone parent households, and almost 90% of lone parent households were headed by a female.

The strategy will have an overall positive effect on women, who are overrepresented among homeless households, through tackling and preventing homelessness and meeting housing need. An evidence base of approaches and failed preventions will be established to better understand the issues.

In relation to domestic abuse we will become an accredited landlord for domestic abuse, which will include evaluating how the current services we provide meet the housing needs of domestic abuse victims.

Disabilities

In the 2011 Census, 16% of Islington residents said they were disabled or had a long-term limiting illness. However, 39% of homeless applicants had a disability in 2017/18, which is broken down as follows:

| Disability | Percentage |
|-------------------------|------------|
| Blind/visually impaired | 2% |
| Hearing | 0% |
| Learning difficulty | 3% |
| Mental health | 22% |
| Mobility | 5% |
| Other | 6% |

The strategy will have an overall positive effect on people with disabilities, who are overrepresented among homeless households, through tackling and preventing homelessness and meeting housing need.

Islington Council has been awarded funding to provide additional mental health input and support to hard to engage rough sleepers.

We will explore available data on the connection between health, including mental health, and homelessness, including rough sleeping, including the factors that increase the risk of homelessness.

Ethnicity

Over two thirds of respondents to the 2011 Census in Islington described themselves as White. The remainder of the population, 32%, was made up of Black and Minority Ethnic groups. However, 62% of homeless applicants were of non-white background in 2017/18. The full breakdown of applicants is as follows:

| Ethnic Group | 2011 Census | 2017/18 homeless applicants |
|--------------|-------------|-----------------------------|
| White | 68% | 43% |
| Black | 13% | 33% |
| Asian | 9% | 8% |
| Other | 3% | 10% |
| Mixed | 6% | 7% |

The strategy will have an overall positive effect on Black and Minority Ethnic groups, who are over represented among homeless households, through tackling and preventing homelessness and meeting housing need. In particular, the proportion of Black applicants is disproportionate to the general population in the borough, 33% compared to 13% respectively. An evidence base of approaches and failed preventions will be established to better understand the issues.

Islington Council has identified hard to reach BME groups in Islington, whose risk of homelessness may be exacerbated by not seeking early prevention. To militate against this risk, we hold monthly outreach housing advice surgeries at community centres and places of worship. The programme of surgeries will be reviewed as part of the action plan.

Islington Council supports families, adults with care needs and young people leaving care, who have no recourse to public funds (NRPF). In 2017/18, 66 households were supported by the NRPF team (42 families and 24 single adults). We will produce advice and guidance to people with NRPF, and disseminate to BME groups via the voluntary sector.

Age

In the 2011 Census, 42% of Islington residents were aged between 25 and 44. However, 57% of applicants in 2017/18 were aged between 25 and 44. Homelessness disproportionately affects younger people. This is primarily because they are less likely to be in settled housing than older people, for example living with friends or relatives or in the private rented sector, as opposed to having secure lifetime tenancies in social housing or owning their own home.

The strategy will have an overall positive effect on younger people, who are over represented among homeless households, through tackling and preventing homelessness and meeting housing need.

We will enhance our existing mediation service to reduce homelessness caused by family and friend exclusions, and private sector tenancy terminations. We will continue to provide support by finding employment opportunities, through the council's iWork and partner organisations. We will implement recommendations from the behavioural change research to help people to downsize in order to release existing social housing which can be let to overcrowded families.

Sexual orientation

In 2017 the Office for National Statistics estimated that 3.3% of the total population of Islington identified themselves as lesbian, gay or bisexual. However, 12% of applicants in 2017/18 identified themselves as lesbian, gay or bisexual.

The strategy will have an overall positive effect on LGBT groups, who are over represented among homeless households, through tackling and preventing homelessness and meeting housing need.

The strategy makes a commitment to enhance our existing mediation service to reduce homelessness caused by family and friend exclusion, which will prove beneficial to young people who identify as LGBT+ who, as evidence suggests, are likely to face familiar rejection, abuse or violence. Islington Council commissions a service with Stonewall totalling 17 bed spaces in supported accommodation for young people who identify as LGBT+.

Religion or belief

Although data is recorded at the application stage, we do not have data for the vast majority of applicants, this is not a consideration in the discharge of housing need, and it is not recorded in Government statistics.

As the strategy will not be targeted as being exclusively for people of any particular religion, belief or faith, it is likely to have a neutral impact. However, our range of partners include various religious / faith groups who make a positive contribution to mitigate the impacts of homelessness and housing need. Our Temporary Accommodation Location Policy states that the council will take account of relevant need factors when assessing the suitability of location of temporary accommodation, including the cultural and religious requirements of the household.

4. Safeguarding and Human Rights impacts

a) Safeguarding risks and Human Rights breaches

Please describe any safeguarding risks for children or vulnerable adults AND any potential human rights breaches that may occur as a result of the proposal? Please refer to **section 4.8** of the [guidance](#) for more information.

There are no safeguarding risks or potential human rights breaches that may occur as a result of this strategy.

If potential safeguarding and human rights risks are identified then please contact equalities@islington.gov.uk to discuss further:

5. Action

How will you respond to the impacts that you have identified in sections 3 and 4, or address any gaps in data or information?

For more information on identifying actions that will limit the negative impact of the policy for protected groups see the [guidance](#).

| Action | Responsible person or team | Deadline |
|---|---|---------------|
| Enhance our existing mediation service to reduce homelessness caused by family and friend exclusions, and private sector tenancy terminations. | Housing Needs | Annual review |
| Continue to provide support by finding employment opportunities, through the council's iWork and partner organisations. | Housing Needs iWork | Annual review |
| Produce advice and guidance to people with No Recourse to Public Funds, and disseminate to BME groups via the voluntary sector. | No Recourse to Public Funds | Spring 2019 |
| Provide additional mental health input and support to hard to engage rough sleepers. | Housing Needs | Annual Review |
| Review programme of housing advice outreach surgeries. | Housing Needs | Quarterly |
| Become an accredited landlord for Domestic Abuse, which will include evaluating how the current services we provide meet the housing needs of domestic abuse victims | Housing Strategy, Improvement and Partnerships Homes and Communities | Spring 2019 |
| Implement recommendations from the behavioural change research to help people to downsize in order to release existing social housing which can be let to overcrowded families. | Housing Needs | Spring 2019 |

| | | |
|---|---------------|---------------|
| Establish an evidence base of approaches and failed preventions to better understand the issues, such as ethnicity and gender. | Public Health | Annual Review |
| Explore available data on the connection between health, including mental health, and homelessness, including rough sleeping, including the factors that increase the risk of homelessness. | Public Health | Winter 2019 |

Please send the completed RIA to equalites@islington.gov.uk and also make it publicly available online along with the relevant policy or service change.

This Resident Impact Assessment has been completed in accordance with the guidance and using appropriate evidence.

Staff member completing this form:

Alex Evans

Signed:

Date: 08/08/2018

Head of Service or higher:

Signed:



Date: 08/08/2018