Women with Multiple Needs: Breaking the Cycle
Summary Report 2014
WOMEN WITH MULTIPLE NEEDS: 
BREAKING THE CYCLE

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This report reflects only the views of the project partners and the Commission cannot be held responsible for any use which may be made of the information contained herein.
"I wouldn’t be in the flat if it wasn’t for Anawim and Midland Heart. I think I’d still be in that dirty bedsit. Midland Heart have been good as well. They used to phone me to check I was OK in the property and the housing officer knows about the dog. They have told me if I have any worries or anything not to hesitate to pick up the phone.”

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The project sought to explore the lack of clear housing pathways accompanied by integrated social support for women with multiple needs. To provide a robust evidence base to inform policy recommendations, it investigated what does, and does not work in both service delivery and partnership working. The Anawim/Midland Heart informal agreement in Birmingham was identified as a potential model of good practice and suitable as an evaluation case study. The evaluation framework, which includes a qualitative evidence base and a cost benefit analysis, was agreed with both organisations.

Anawim in Birmingham offers a wide range of support to women and their children who are referred to them by a number of services such as the Probation Trust. Each woman is allocated a case worker with whom they jointly formulate a case plan that addresses their identified needs in a holistic and individually tailored way.

Midland Heart is one of the top ten housing and care organisations in the UK, working to transform local communities and the lives of its customers through significant investment and regeneration. Through an informal agreement, Anawim’s case workers can refer women to Midland Heart for a tenancy if they feel they are ready to benefit from stable housing. Midland Heart endeavour to find a suitable property for referred women and the support from Anawim continues once they have moved into their new home, providing a much needed integrated approach to assist them towards living independently.

This report is timely in the context of budgetary constraints and the difficulty in securing funding for vulnerable groups. It is also particularly pertinent at a time when the policy agenda has turned to breaking the cycle of children in care, and reducing reoffending via the introduction of the resettlement agenda.

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1 http://www.streettohome.eu/
“I have had to work hard but if it wasn’t for this place and Midland Heart getting me this house I dread to think where I would actually be now. I really do dread to think because I know for one I wouldn’t be able to have my kids back because of the property I was in before. So all the work I would have done at Anawim would have been pointless as I still wouldn’t have had my kids back. Basically Anawim and Midland Heart have enabled me, I know I have done all the hard work as well, but these two things have enabled me to get the kids back.”

“I have a beautiful 2 bedroom house thanks to Anawim and Midland Heart. The house is really spacious for me and my son and I have a cat as well. I have a lovely back garden.”
Methodology
A series of interviews with key stakeholders were undertaken with six personnel based at Anawim and five from Midland Heart. Participants represented a range of roles from management, to staff engaged with delivering services to clients. In addition, nine interviews were carried out with women recipients of the joint initiative, all of whom were living in a Midland Heart property. To supplement the interviews with women, further interviews were undertaken with caseworkers at Anawim to explore the needs of those women considered too chaotic to interview or to provide informed consent. The Anawim support workers identified eight further case studies to assist with the qualitative element of the project.

Some women had been arrested and imprisoned on more than one occasion. Their journey through the CJS often did not address their multiple needs, resulting in a cycle of re-offending.

Women with Multiple Needs: The Criminal Justice System
The evaluation has identified that women with multiple needs require an integrated response from agencies working in partnership. These women have a range of problems that are often inter-linked. A key finding from the interviews with women from the Anawim Women’s Centre is that the majority had a background of abuse that included child sexual abuse and domestic violence. The majority also had experience of the criminal justice system (CJS). Some women had been arrested and imprisoned on more than one occasion. Their journey through the CJS often did not address their multiple needs, resulting in a cycle of re-offending. Women with multiple problems have particular needs at each stage of their journey through the criminal justice system. In the community, women require holistic support that will prevent them from re-offending. Upon arrest, there is a need for diversion to effective support. When in police custody, there needs to be screening for personality disorder and mental health issues.

At the point of remand, women need advocacy at court and in pre-sentence reports for community sentences. When they reach prison, support is required to ensure that effective plans for release are in place, which incorporates ‘through the gate’ support into safe and secure housing.

Availability of health, drug and support services in the various stages of the criminal justice system is often ‘hit and miss’ and, in some cases, can be destructive for some women. It can be effective if, for example, they are in prison long enough to achieve a degree of stability. If this is not continued in a seamless way however, women can return to the cycle of destructive behaviour, such as engaging in substance misuse or sex work.
Figure 1 above reflects, to some extent, a woman’s journey through the CJS. This starts at the point of arrest where they are either released and returned to the community or held on remand in prison. One in seven women are imprisoned on remand, spending on average four to six weeks incarcerated. More than half of women remanded in custody do not receive a custodial sentence. People experiencing homelessness are more likely to be remanded in custody as the ability of criminal justice agencies to monitor them is compromised by their lack of a fixed address. This is a cyclical process and currently, women’s centres like Anawim are well positioned to break this cycle. However, lack of funding combined with a lack of safe, affordable housing and changes in government policy put their ability to intervene at severe risk.

At each of these stages, women have health needs (continuation of treatment for long-term conditions like diabetes), detoxification from problematic drug and alcohol use, as well as mental health needs and support for domestic and sexual abuse.

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4 Howard League, 2013, No fixed abode: The implications for homeless people in the criminal justice system Summary. Online: https://d19ylpo4ao0c7m.cloudfront.net/fileadmin/howard_league/user/pdf/Publications/no_fixed_abode_web.pdf. [Accessed 10/01/14]
Women with Multiple Needs: Moving Forward
The foundations required to enable women with multiple needs to make progress are at best difficult to access and at worst unavailable. These difficulties are exacerbated without safe and secure housing. Drawing on and adapting Maslow’s Hierarchy of Needs has enabled us to illustrate how provision of safe and secure accommodation facilitates the process of engagement with services and support as Figure 2 illustrates. A safe and secure environment of accessible, appropriate and affordable accommodation is crucial before a woman can start to deal with social needs both practical, such as dealing with financial difficulties, and health needs, including addiction, mental health, self-harm and Post Traumatic Stress Disorder (PTSD).

Figure 2: Hierarchy of Needs
A safe and secure environment of accessible, appropriate, safe and affordable accommodation is crucial before a woman can start to deal with social needs both practical, such as dealing with financial difficulties, and health needs, including addiction, mental health, self-harm and Post Traumatic Stress Disorder (PTSD).

For women with some stability, the Anawim and Midland Heart informal agreement demonstrates that progress can be achieved and a real difference made to women’s lives.

Currently, there is a lack of appropriately resourced and designed housing solutions for those women who are the most chaotic. Without safe and secure housing the women’s ability to engage with services and address their needs is compromised. As a result, they are more likely to continue their cycle of problematic and destructive behaviours.

**Issues with Current Service Delivery**

Interviews conducted with women revealed a range of needs, not all of which could be met. Current provision for women with multiple needs in the West Midlands region appears patchy and piecemeal. Drug services, community mental health teams, hostels, rehabilitation, day centre support services, health & GU clinics, GPs, chemists, children’s centres, counselling services and approved premises for women are all available, but delivered in a disconnected manner. However, women on community orders can be offered a fairly comprehensive package at centres such as Anawim.

To enable a woman to have her multiple needs met it is necessary to establish ‘one stop shop/hub’ approaches with everything under one roof, delivered in an open access way with flexible appointment times in a non-judgemental and enabling environment.

Women who have received social support from Anawim, addressed their problems and achieved a more stable lifestyle can be put forward for housing with Midland Heart while continuing with the support provided by Anawim.

The group who currently do not have their needs met are the women with multiple problems and chaotic lifestyles.

Interviews conducted with women revealed a range of needs, not all of which could be met. Current provision for women with multiple needs in the West Midlands region appears patchy and piecemeal.
Key Findings and Wider Evidence

The key finding of the evaluation is that the informal agreement between Anawim and Midland Heart is both highly successful and cost effective. Interviews conducted with women who have received tenancies through the initiative, suggest that safe and secure accommodation has assisted in their progress towards stability. All of the women interviewed were keen to stress that the on-going support from Anawim had helped them to turn their lives around and provided the stability that they needed to maintain their tenancies. This is further evidenced by the findings of the cost benefit analysis, which concludes that the monetary savings (in terms of costs and benefits) greatly outweigh the costs for all women supported by the Midland Heart and Anawim informal agreement.

There is also evidence to suggest that Women’s Centres have a key role to play in reducing reoffending:

Women’s Centres are effective in reducing offending: ‘Women are much less likely to reoffend when they engage with Anawim. The impact that Anawim has on reducing reoffending rates is statistically significant’.\(^5\) Compared with all female offenders on probation in Birmingham and Staffordshire & West Midlands, women who attended Anawim between 2011 and 2012 had a much reduced rate of reoffending.

Women’s centres result in low recidivism rates, therefore it is crucial to keep funding for women’s centres. Anawim Women’s Centre recorded only 3% reoffending and 7% in breaches of a community sentence in 2012.\(^6\)

Women in Prison: We know that prisons do not work, especially with this group of women who invariably receive very short sentences. Community sentences provided by women’s centres linked to housing providers would increase the opportunity for women to engage with their multiple needs. The project interviews highlighted high levels of loneliness and isolation for many of the women. They need assistance to create new communities, new friends, interests, meaning and purpose if they are to be enabled to maintain the stability gained. This is the stage where the hard work can start with counselling and deep psychological interventions to address the past trauma. Support also needs to be offered at

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evenings and weekends to assist in preventing women from un-doing gains made.

Women's centers have a key role to play if the ‘Road to Reduction? Response to the women’s custodial estate review’ recommendations are implemented. The key recommendations in the review are to:

- Reduce the capacity of the women’s prison estate
- Make all women’s prisons to be Resettlement Prisons
- Trial a Strategic Hub approach within the women’s prison estate
- Set up a small Open Unit outside HMP Styal
- Introduce a case management system for women with complex needs or Restricted Status
- Improve access to interventions

‘Women in prison’ is optimistic about the long-term benefits of the review but express concern regarding the impact on women during the transition period and ‘whether the good theory of the review on paper will become good practice on the ground in the prisons’. They have also voiced concerns that the changes in the women’s estate are happening under the Transforming Rehabilitation agenda: A Strategy for Reform (2013). The provision of through the gate services under this agenda may not be women specific and thus will not effectively link in with women’s services across the whole country.

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8 A copy of the strategy can be obtained from: http://www.justice.gov.uk/transforming-rehabilitation
PART 2: COST BENEFIT ANALYSIS

A key part of the evaluation is the development of a social cost-benefit analysis model (CBA), which can be used to highlight the impact of the social support provided by Anawim and housing provision by Midland Heart. This CBA quantifies in monetary terms as many of the costs and benefits of this intervention as are feasible, and provides an assessment of value for money.

The model was developed by Midland Heart’s in-house Policy and Public Affairs team. The team have extensive experience in undertaking impact assessments and the techniques of social cost benefit analysis, having built bespoke models previously for other interventions and published a sector wide guidance document on impact measurement.

A detailed methodology which provides explanatory guidance on how the different types of costs and benefits were calculated, is available in the full report held on the project website: www.streettohome.eu. An interactive spreadsheet model was also created alongside this report, which allows users to input data about specific women to create an indication of the costs and benefits of similar projects and case studies.

1. Cost Benefit Analysis Findings
   i) Overall Cost and Benefits
   The cost benefit analysis model is based on the 13 women for whom Anawim held sufficient data. The total costs and benefits illustrate that the monetary savings greatly outweigh the costs for these 13 women supported by the Midland Heart and Anawim informal agreement.

   a) Costs
   Using the figures provided by Anawim, we can estimate the following approximate total costs of the programme as per the table below:

<table>
<thead>
<tr>
<th>Type of cost</th>
<th>Average per woman</th>
<th>Total for 13 women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anawim support</td>
<td>£1,500</td>
<td>£19,500</td>
</tr>
<tr>
<td>Housing costs</td>
<td>£5,148</td>
<td>£66,924</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£86,424</strong></td>
<td></td>
</tr>
</tbody>
</table>
The breakdown of costs is variable, and can be altered to create case studies in the interactive model. Here, we have kept to an average cost for simplicity.

b) Benefits
The benefits are calculated in line with the identified outcomes of Midland Heart and Anawim working together to help women with complex needs. The outcomes shown below were determined by analysing data and conducting interviews with Anawim staff and clients of the programme, to create a ‘Theory of Change’ model which is detailed in the full report:

Benefits

- Reduction in Offending
- Managing Substance Misuse
- Improved Mental Health
- Regaining Custody of children/Improved Parenting Skills
- Improved Education/Training/Employment
- Improved Social Networks and Relationships
- Improved Self-Esteem/Confidence
- Improved Physical Health
- Improved Financial Management

These outcomes each have one or more related benefits which can be described in monetary terms. A more detailed explanation is provided in the full report’s methodology for the different types of benefits and how we have assessed that the partnership is responsible for the change in a particular outcome. For example, if a person has reduced their offending behaviour, we must take into account that this might have happened anyway, or that they may also be involved in another rehabilitation project provided by a different organisation.

c) Results
In analysing the costs and benefits of the Anawim and Midland Heart informal agreement, it is clear that very little of the identified outcomes require achievement before the benefits are equal to the costs of the project. The creation of ‘Break even scenarios’ is a useful way to illustrate the value of the Midland Heart and Anawim partnership. For example:

- If only two children are prevented from entering the social care system for one year, the monetary benefits are almost double the cost of the housing and support intervention for all 13 women.

  The data collected shows that among the sample of 13 women, a total of 24 children left social care and were either re-united with their mother due to her having a suitable property or, if with their mother already, benefited from a reduced chance of entering the social care system because of her receiving additional support such as attendance at parenting classes.

- If just two women are prevented from having a year-long prison sentence, the savings are equivalent to the housing and support costs for all 13 women.

  Of the 13 women, 11 reduced their offending behaviour, while two continued to not have any offending issues.
2. Case Study

A more detailed way of illustrating the costs and benefits of the project is to analyse a real case study of a woman assisted by the work of Midland Heart and Anawim. Ella’s story below shows the real impact of the project on a woman’s life. This is followed by an analysis of the costs and benefits of her housing and support programme.

Ella* is 43 years old and has two children. She has always suffered from depression and has had a nervous breakdown. She was referred to Anawim from hospital due to her suicidal tendencies and problems with alcohol.

Ella suffered mental and physical abuse as a child that resulted in her going into care. There, her experiences led to drinking and depression. She did not experience domestic violence in her relationship, but her partner gave her no emotional support. She has also been in trouble with the law due to her drinking.

She was living in poor quality, privately rented accommodation. The landlord was not maintaining the property and was constantly threatening her with eviction as she fell behind with her rent. The poor standard of her living conditions made Ella feel very depressed. The Anawim support worker helped Ella to get a Midland Heart flat. Ella believes that she wouldn’t have been able to access accommodation like her current property without Anawim’s support. Since being in her flat she has stopped drinking.

*Ella’s name has been changed to protect her identity
The costs of Ella’s support from Anawim are broken down into various elements, as shown in a screen shot from the interactive model below.

<table>
<thead>
<tr>
<th>Interventions</th>
<th>Time Spent</th>
<th>Unit cost/ per hour</th>
<th>Total cost</th>
<th>Number</th>
<th>Alternative Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appt - External Agency</td>
<td>1 hour</td>
<td>£16.40</td>
<td>£16.40</td>
<td>1</td>
<td>£16.40</td>
</tr>
<tr>
<td>Appt – B’ham Settlement</td>
<td>1 hour</td>
<td>£26.12</td>
<td>£26.12</td>
<td>2</td>
<td>£52.24</td>
</tr>
<tr>
<td>Assessment</td>
<td>1 hour</td>
<td>£26.12</td>
<td>£26.12</td>
<td>1</td>
<td>£26.12</td>
</tr>
<tr>
<td>Attended</td>
<td>3 hours</td>
<td>Flat rate</td>
<td>£16.40</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>Attend course</td>
<td>2 hour</td>
<td>£16.40</td>
<td>£32.80</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>Attend Unpaid Work</td>
<td>3 hours</td>
<td>Flat rate</td>
<td>£16.40</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>B’ham Mind</td>
<td>1 hour</td>
<td>£16.40</td>
<td>£16.40</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>Contact with External Professional</td>
<td>.25 hour</td>
<td>£26.12</td>
<td>£6.53</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>Counselling</td>
<td>1 hour</td>
<td>£26.12</td>
<td>£26.12</td>
<td>7</td>
<td>£182.84</td>
</tr>
<tr>
<td>Multi-agency appt.</td>
<td>1 hour</td>
<td>£26.12</td>
<td>£26.12</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>E-mail</td>
<td>.25 hour</td>
<td>£26.12</td>
<td>£6.53</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>First Star</td>
<td>1 hour</td>
<td>£26.12</td>
<td>£26.12</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>Home visit</td>
<td>2 hours</td>
<td>£26.12</td>
<td>£52.24</td>
<td>5</td>
<td>£261.20</td>
</tr>
<tr>
<td>Letter</td>
<td>.5 hour</td>
<td>£26.12</td>
<td>£13.06</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>Management advice</td>
<td>.5 hour</td>
<td>£26.12</td>
<td>£13.06</td>
<td>0</td>
<td>£0.00</td>
</tr>
<tr>
<td>One to one appt.</td>
<td>1 hour</td>
<td>£26.12</td>
<td>£26.12</td>
<td>3</td>
<td>£78.36</td>
</tr>
<tr>
<td>Telephone with client</td>
<td>.25 hour</td>
<td>£26.12</td>
<td>£6.53</td>
<td>5</td>
<td>£32.65</td>
</tr>
<tr>
<td>Text</td>
<td>.25 hour</td>
<td>£26.12</td>
<td>£6.53</td>
<td>5</td>
<td>£32.65</td>
</tr>
</tbody>
</table>

The cost of Ella’s support from Anawim was therefore approximately £709, while the cost of her housing was approximately £5148 for one year. Accordingly, the total cost of the project for Ella was around £5857.
**b) Benefits**

Ella achieved high outcomes across all areas identified in the Theory of Change. Each outcome and the assumptions that the benefit calculations are based on are detailed below. Further information about how the monetary benefits for Ella have been estimated is detailed in the full report, where a discussion of causality attribution percentages is also featured.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assumptions</th>
<th>Monetary Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduction in Offending</td>
<td>Ella reduced her offending behaviour and therefore did not have a further arrest or community order. Causality attributed: 15%</td>
<td>£621</td>
</tr>
<tr>
<td>Managing Substance Misuse</td>
<td>Ella dramatically reduced her substance misuse, and therefore did not require a four week detoxification programme and had a well-being gain in managing her substance issues. Causality attributed: 15%</td>
<td>£4,541</td>
</tr>
<tr>
<td>Improved Mental Health</td>
<td>Ella’s mental health improved and she no longer required an outpatient mental health visit, while relief from depression and anxiety lead to a well-being gain. Causality attributed: 15%</td>
<td>£6,540</td>
</tr>
<tr>
<td>Regaining Custody of children / Improved Parenting Skills</td>
<td>Ella has one child in care (who is currently being returned to her) and another child who was not in care. Causality attributed: 50%</td>
<td>£19,276</td>
</tr>
<tr>
<td>Improved Education/ Training/Employment</td>
<td>While Ella achieved increased employability skills through her support, there are no easily attributable savings in this area for her particular case.</td>
<td>£0</td>
</tr>
<tr>
<td>Improved Social Networks and Relationships</td>
<td>Ella improved her social networks and family ties, leading to a well-being gain. Causality attributed: 15%</td>
<td>£450</td>
</tr>
<tr>
<td>Improved self-esteem / confidence</td>
<td>Ella increased her self-esteem and confidence, resulting in a well-being gain. Causality attributed: 15%</td>
<td>£450</td>
</tr>
<tr>
<td>Improved physical health</td>
<td>Ella improved her physical health, avoiding one GP and A&amp;E visit, and gained increased well-being with relief from health problems. Causality attributed: 15%</td>
<td>£380</td>
</tr>
<tr>
<td>Improved financial management</td>
<td>Ella improved her financial management, leading to a well-being gain. Causality attributed: 15%</td>
<td>£450</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td></td>
<td><strong>£32,708</strong></td>
</tr>
<tr>
<td>Cashable Savings</td>
<td></td>
<td><strong>£0</strong></td>
</tr>
<tr>
<td>Opportunity Cost Savings</td>
<td></td>
<td><strong>£19,148</strong></td>
</tr>
<tr>
<td>Social Impact – Well Being Savings</td>
<td></td>
<td><strong>£13,560</strong></td>
</tr>
<tr>
<td><strong>Total Benefits</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
c) Results
While the project resulted in greater savings for some women, through moving them into employment or by having up to six children returned to their mother from local authority care, Ella’s story clearly shows that benefits accrue for all those involved.

For Ella alone, the total value created is £32,708 in comparison to the cost of the intervention which was £5,857.

It is important to stress that it is not possible to state categorically how much of this value can be directly attributed to the involvement of the partnership. This is because we are unable to measure the amount of social value that would have occurred without the partnership, or the amount that other activities taking place in parallel account for. Therefore, we have used conservative estimates (the figure referred to in the table as causality attributed) about how much benefit we believe results from the partnership in order to mitigate the risk of over claiming.

Notwithstanding these issues, this would suggest that with Ella for every £1 invested, £5.58 of social value was created.
a) Current Service Delivery
The evaluation has indicated that the following is required to ensure the continuing success of the informal agreement between Anawim and Midland Heart:

- To provide a joint training event for staff from Anawim and Midland Heart. This would present an opportunity to make professional links and increase understanding of the constraints that workers face in their respective organisations.
- That Midland Heart produce a ‘monthly bulletin,’ listing the current status of all applications.
- As the client group have specific needs, practical implications, such as the allocation of housing officers, should be considered. Specific training for housing officers relating to the distinct needs of the client group should also be considered.
- To be aware of the impact that government policy might have in sustaining the informal agreement.

b) Wider Policy Agenda
The implications and recommendations for wider policy agendas are:

Integrated service delivery:
Anawim demonstrates that what works well for this group of women is different service providers coming to the centre. Communication is effective as workers are located in one place and can easily share information. Services work better because women feel safe and have established a trusting relationship with the Centre’s workers.
Recommendation: The public sector should take responsibility to ensure that women’s centres are properly resourced.

Ensuring partnerships are working:
The evaluation has shown that Anawim frequently takes responsibility for building and maintaining partnerships.
Recommendation: Multi-agency partnerships should be enabled and encouraged.

The importance of data:
It is important that the data requirements to effectively evaluate impact are considered at the earliest possible opportunity, ideally in the planning stage of any intervention.
Recommendation: Agencies and partnerships should ensure that mechanisms are in place to collect comprehensive and robust data so that effective evaluation of interventions can be undertaken.

Children in care:
The Re-Unite project (part of the partnership between Anawim and Midland Heart) has been successful in taking children out of care and reuniting them with their mothers. Threats to this success include the under-occupancy charge introduced by the central government (2013), commonly known as the ‘bedroom tax’, and the local authority allocations policy.
Recommendation: Local authority housing and other social housing providers need to review their current allocation policy in respect of women seeking to be reunited with their children.
Recommendation: Local authority should review the use of discretionary housing benefit to mediate against the effects of the under-occupancy charge for women seeking to be reunited with their children.
Managing transition:
Even if Local authorities change their allocation policies, many of the women require additional support before, during and after moving, in order to manage transition. The women interviewed stressed the importance of knowing that support will still be available when they have moved into a property with their children.
Recommendation: Continuing support needs to be funded adequately and requires children and family workers to mediate, protect and offer training in areas such as parenting skills.

Establishing a multiple needs unit:
Despite the success of the Anawim and Midland Heart informal agreement, there remains a need for a safe and secure environment for women who have multiple needs and chaotic lifestyles, and who are not yet ready for a standard tenancy. Such a unit should include both accommodation and access to a holistic programme incorporating all key services as well as 24-hour support by trained staff.
Recommendation: That consideration be given to providing and funding and providing a multiple needs unit for women.

The women interviewed stressed the importance of knowing that support will still be available when they have moved into a property with their children.