



Work, Learning & Employment

Housing Services



Recovery from Addiction

Impact Report 2017

WOMEN AND HOMELESSNESS

Legal & Advice

Housing Support

Mental Health & Wellbeing

Preventing Homelessness

Combating Homelessness • Creating Opportunities • Promoting Change

www.bht.org.uk

Women and Homelessness

“ Oh my god, what’s going to happen to me? Where am I going to go? I walk down the street and it’s very sad. I look in people’s windows and I think ‘Why can’t I have that? Safety and security.’

Nancy, a homeless woman in Brighton

Homelessness is a **growing social problem** in the UK.



Homeless link: <http://bit.ly/1L4P7CH>

Forward

The number of people found rough sleeping falls short of the true figure because it excludes the unknown number of hidden homeless women.

Women manage their homelessness in ways that are different to men. Many homeless women engage in informal strategies that keep them invisible. For example, they sofa surf, hide, engage in survival sex, form relationships to keep a roof over their head or work in the sex industry.

This report, written by Cathy Bunker, reveals the shocking truth of homelessness amongst women, what they do to survive.

The challenge to us is what can we do as individuals and organisations? As organisations we can look at how we work with street homeless women and make changes demanded by this report. BHT will do this.

As individuals, we can support one or more of those services in Brighton and Hove that work with homeless women (see pages 20 and 21).

Andy Winter, BHT Chief Executive

Paying tribute

“ I interviewed 15 women who were, or had previously been, homeless in Brighton and Hove to understand the daily issues they faced.

I would like to thank and pay tribute to the women who shared, so courageously and generously, their experiences and views.

I was moved by their stories, inspired by their resourcefulness and feel privileged to have met them all.

I hope that this report will increase understanding of some of the issues they face and have an impact so that more homeless women can find safety, housing and fulfilment in their lives.

Cathy Bunker

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Physical and Sexual Violence

Personal safety

The issue of personal safety is of concern to most women but substantially escalated in the homeless community.

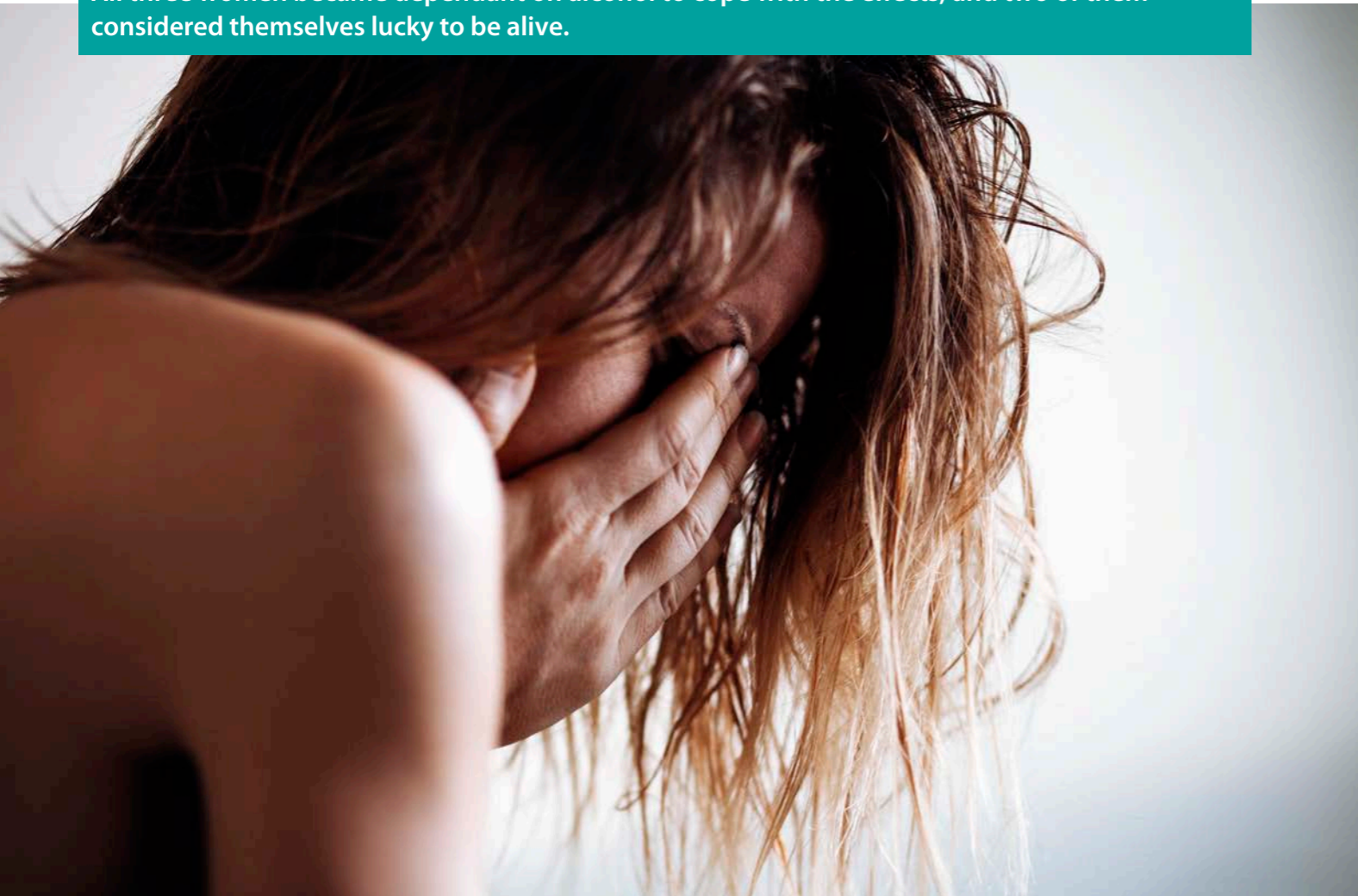
Physical and sexual violence (as an adult or child) is the most gendered cause of homelessness in women, in particular domestic violence. Furthermore once homeless women are more likely to be attacked than men and less likely to turn to seek medical or police help once assaulted (Garland et al, 2010).

Physical and sexual violence impacted all the women interviewed to a varying degree. Whether as a cause of their homeless status, part of their decision of where to stay, or an experience for them personally once they were homeless. It was a constant factor of determining how they lived day-to-day, to minimize risk and keep themselves safe.

The women interviewed were not asked about their experience of violence but based on the information offered, at least five (one third) of them had experience of domestic violence which was a significant factor leading to their homelessness.

Three of these women were suffering from PTSD, hyper vigilant to the potential for attack and described feeling unsafe most of the time.

All three women became dependant on alcohol to cope with the effects, and two of them considered themselves lucky to be alive.



Violence whilst rough sleeping

Virtually all of the women interviewed described situations where either they or their friends had been attacked: verbally attacked, spat at, punched, kicked, battered, strangled, set fire to, urinated on, sexually harassed, assaulted or raped.

Bianca summed this up when she said:

“As a woman you are exposed to obviously physical abuse, sexual abuse.

Grace said:

“I’ve seen both men and women get kicked and punched just by random people... I think as well its scarier for women. Most men think they can handle anyone but most women know they can’t.

She also said most of the women she knew had been sexually assaulted, which whilst hearsay, reinforces the perception amongst women they are likely to be sexually attacked.

Megan had experienced multiple attacks for being transgender and living with a disability:

“I’ve been kicked in the head while sleeping rough... I am too scared to go out of the building for fear of abuse and attack... I just don’t feel safe in Brighton at all, being trans and sleeping rough.

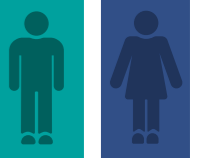
Many of the women (especially those who had experienced gender based violence) avoided local day centres for the homeless because of feeling threatened by the high proportion of men who attended and the potential for further violence. This had an impact regarding showering, support, access to housing advice and medical advice.

- nine of the women said they would thus prefer women only services
- Megan said she would prefer specific transgender services
- the other women were comfortable with mixed services

Brighton Housing Trust has started a weekly women only drop in session at First Base Day Centre in recognition of this need.

The average life expectancy of a man living on the streets is 47 years, for a woman just 43.

Average national life expectancy: 78.8 for a man and 82.8 for a woman



Physical and Sexual Violence

The threat of violence in hostel life

Almost all of the women had spent time living in a hostel or supported housing.

Living in a hostel could appear to be safer, but this depends on previous experience of trauma and who else is living in the hostel. In Brighton there are no single sex hostels at present (although Brighton and Hove City Council recently commissioned a new women-only accommodation service).

Usually in hostels there are significantly more men than women, and residents may have a variety of mental health needs and/or high levels of drug and alcohol use. Darcie described one hostel as 'like a nuthouse, mental hospital and prison all in one' where the police, firemen and paramedics are called regularly.

For the women who had experienced gender based violence, living in mixed hostels was particularly difficult as Issie explains:

“ I was homeless due to domestic violence and then they housed me where there was loads of violence... there were always fears of what might happen, physical assault, sexual assault... I am more scared of men under the influence of drugs and alcohol and can be more aggressive... those are the kind of things that I found really scary in a hostel.

Nancy reported:

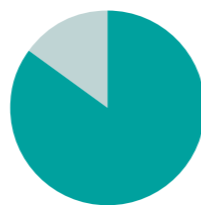
“ Incidences in the house with men hassling. Somebody had a major breakdown in the middle of the night, kicking the doors down, threatening to kill us. That then triggers me back to the old domestic violence...

The incident also triggered Nancy's PTSD as she had to climb out of her bedroom window to safety. Following this incident she spent three months living in isolation in her room for fear of another attack by this man.

Issie felt so frightened in another hostel she slept in the hostel the minimum number of nights to keep her position on the council house waiting list, whilst spending most nights sleeping on the floor at a friend's flat where she felt safe.

Research suggests up to **85%** of homeless people have mental health problems.

Brighton Housing Trust 2015: <http://bit.ly/2x0XcMo>



Violence from men supposedly protecting them

Many homeless women seek protection from men but sadly some of these relationships lead to further violence.

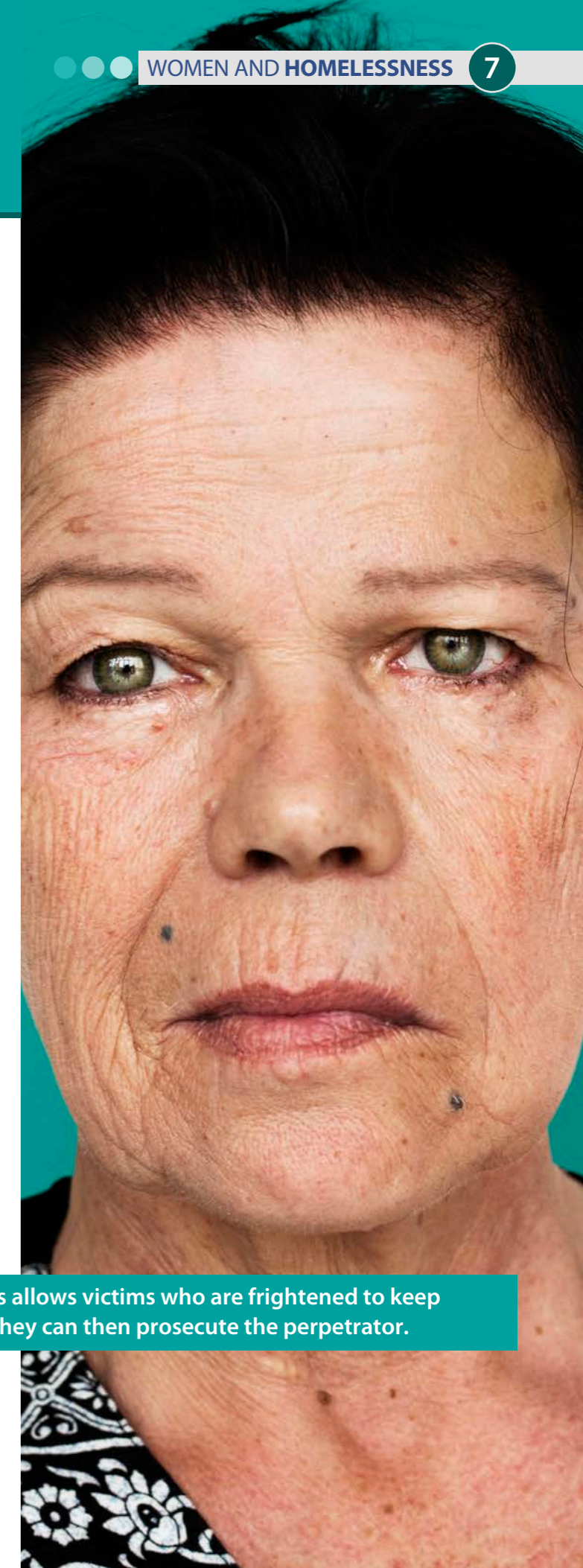
Lauren spent three months with a male friend, initially on the streets and then in another friend's flat, until he violently assaulted and raped her:

“ I felt safer and I learnt everything I knew from a guy I was with for three months and then I was really nastily assaulted and raped by that guy, who I implicitly completely trusted... I got great help that's my experience... but I had to get to the point where I was black and blue and in hospital with broken ribs and things hanging off and blood. It was horrible.

Several of the women interviewed said they would not report assaults to the police, some due to fear of recriminations from the perpetrator, others a lack of trust of the police.

Lauren did not report her assault to the police for fear of further attack. However, a doctor reported it when she was in hospital due to the severity of her injuries. She then received very good support and protection from professionals, including having a police escort when she went out for the first couple of weeks because of risk of further assault.

Third party reporting of assault by professionals allows victims who are frightened to keep silent, but informs the police of the attack and they can then prosecute the perpetrator.



Hiding and Strategies to Keep Safe

Whilst rough sleeping

When the women interviewed were rough sleeping they chose where to sleep based on assessment of risk, personal safety and the belief they would not be able to defend themselves in the event of an attack.

They employed a variety of creative strategies to protect themselves.

For most of them hiding provided the safest option, sleeping in places literally out of sight, and clear examples of hidden women's homelessness. The women slept in shop doorways, parks, driveways, gardens, car parks, boats, underneath the pier and on a shop roof.

Olivia slept hidden in private gardens by a window of the house so that if anyone attacked her she could call for help from the people inside.

Grace said:

“ You do sleep with kind of one ear open, it's not like a restful sleep.

It is these hidden homeless women who would not be found by Rough Sleeper Teams who work with and check on the homeless, so they would consequently not be registered on the council housing waiting list or receive any support and advice.

In complete contrast to this, three women chose to sleep in brightly lit shop doorways on main shopping streets where they were highly visible. These central streets remain busy late into the night with a lot of public passing by and police patrolling through the night.

They hoped they would be less likely to be attacked but if anything did happen they would have the potential for back up from the public or police.

To increase safety while sleeping, women often doubled up with someone, as Bianca described:

“ You don't ever sleep on your own. That's too dangerous... that's why we stay in groups with the women, we stay together like two or three of us so its better. Sleeping next to a friend has the added benefit of being warmer, a source of comfort and two of you to find resources: food, drink, cardboard for insulation and somewhere safe to sleep.

On 31 December 2015 there were **69,140 homeless households** in England living in **temporary accommodation**: with family, friends, in hostels, Bed and Breakfasts or temporary flats.

Department for Communities and Local Government 2016: <http://bit.ly/1OfAosd>



Grace also described how homeless people help each other out:

“ The homeless community really do look out for each other and so one girl came to stay with me for a few nights in the doorway even though she was in a hostel, because I was out on my own she stayed out with me.

She, like other women interviewed, had male homeless friends who would walk past her whilst she was sleeping at night to check she was safe, reinforcing her belief that as a woman she needed male protection.

Another hiding strategy was sleeping in tents or vehicles. Three of the women had lived in tents including Calina who initially slept in a tent in a car park with her partner, then moved and creatively made a semi permanent home in the tent on the outskirts of Brighton, using discarded furniture and decorations left in the street.

Krystal spent a few weeks sleeping in a car with another woman until that 'friend' left town with all Krystal's possessions.

Olivia was lent a van for a few months, which was not very comfortable to sleep in but she could lock it from the inside, which was crucial particularly one night when someone tried to break into the van whilst she was in it, which she said was terrifying.

A very different form of hidden homelessness and strategy for managing the risk of violence was to sleep in the day when it was relatively safer and keep awake and moving around at night when there was increased risk.

Lauren went to:

“ ...big chain restaurants with toilets where I would just go into there and lock myself away, and actually curl up on the toilet floor and sleep in there during the day and then out at night.

Olivia used to buy weekly bus tickets and sleep on the buses during the day then keep moving at night.

Megan, having experienced transphobic assaults said:

“ We have to dress down as blokes basically to prevent us being attacked and also I feel safer being dressed down as a bloke.

Strategies to Avoid Rough Sleeping

The constant threat to personal safety leads the women to be creative and thoughtful regarding how to mitigate the risk of violence and the women employed different strategies to avoid rough sleeping altogether.

Eight of the women sofa surfed, two stayed in a relationship to keep a roof over their heads and one lived in a squat.

Sofa surfing

For eight of the women, sofa surfing offered a temporary means to avoid rough sleeping, giving them a roof over their head, a bed of some kind (usually a sofa, sometimes floor space), possibly support and relative safety with friends or family.

However they faced different challenges due to not having any personal space, their own bed or storage, aware that their hosts always had the power to ask them to leave.

Faye described:

“ I didn’t have my own bed for about five years, I didn’t have a wardrobe or little things like that. I was just living out of bags.

Storing their belongings in bags behind the sofa and sleeping in a general living space is not easy and several spoke of feeling like they were indebted.

Grace describes this:

“ It’s awkward because you feel like you are in the way and you feel like you are a burden. And you can’t do anything, like you can’t turn the TV over, you can’t just go for a bath, you can’t just make yourself a cup of tea, you have to ask for everything.

For some of the women, this difficult living arrangement led to tensions and at times falling out with friends or family they were staying with. Faye spent five years sofa surfing with various friends because she was so scared of sleeping on the street and would physically recoil to even talk about it.

For Faye, stealing on demand for her friends allowed her to stay with them and avoid rough sleeping but meant she went to prison three times for shop lifting:

“ I had to do that kind of stuff to survive because if I didn’t supply them with the stuff they needed I wouldn’t stay there and living on the streets scared the shit out of me, massively, I wouldn’t have been able to deal with it.

Many homeless women engage in informal strategies that keep them invisible: Sofa surfing, hiding, engaging in survival sex, forming relationships to keep a roof over their head or working in the sex industry.

Relationship for a roof

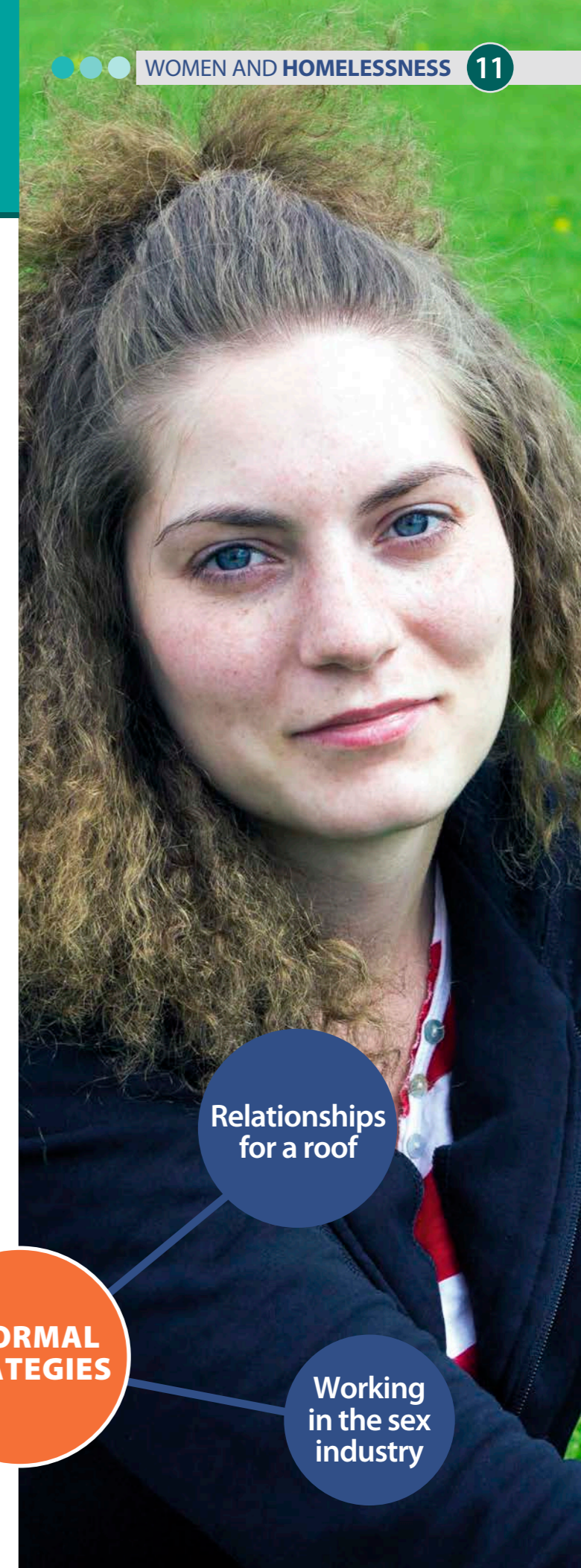
Some women actively choose to stay in a violent relationship rather than risk a potentially life threatening choice to leave and become homeless.

The conscious decision to stay in an unhealthy destructive relationship to keep a roof over their heads was described by Abi:

“ I had an argument with my boyfriend... I’d leave and realise I had nowhere else to go and I’d think shit, what have I gotta do and I would make up with him, I had no choice... it was so hard, like I was literally crying myself to sleep, self harming and stuff to make myself feel better.

Nancy’s partner was violent towards her but she decided living with violence from him was better than the risk of unknown assault and life on the street:

“ My son’s father was so violent I put him in prison six times and the reason I didn’t walk away is I didn’t have anywhere to go... I realise it wasn’t a good place for me but I had nowhere to go so I stayed in that relationship for another two and a half years.



Emotional Violence

Unrecognised emotional impact

The emotional impact of being homeless is insidious, unrecognised and under researched.

The women were almost unanimous in describing feeling a failure, being judged and looked down upon particularly by the public. The negative burdens of low self esteem, being isolated, feeling worthless and incapable weighs heavily on the women and like their homeless status itself, is largely hidden.

Society suggests that if we work and try hard enough we will succeed and do well, so to end up without a job or home is considered failure as Issie described:

“ I think people immediately assume you have done something, like really awful and you’ve failed and I even thought that of myself, I definitely thought I have failed. How come I ended up in this situation?... I never thought this would happen. I came from a middle class family... it’s another thing to feel ashamed about, I’m homeless and I’ve got no money.

Jo’s description of the emotional effect of her relationship mirrors the emotional assault women face being homeless:

“ I rather he’d hit me... at least when he hits me it’s quick and it heals up. But the mental just goes on and on and on... it’s just horrible, it really is nasty and no one understands it.

The sense of failure means homeless women can be blamed for their situation, which frees society from any responsibility for them and allows us all to look though them without any guilt or concern, as it they don’t exist.

This was eloquently articulated by Jo who said:

“ Everyone’s looking but they are not looking at you, they’re looking through you like you’re not there.



Rough sleepers

For rough sleepers, living on the street was described as really tough, awful, dirty and degrading.

Jo said:

“ It is a completely different world... you need to be a survivor as its survival of the fittest.

Life is transitory and emotional needs become less important as basic survival take priority: personal safety, finding somewhere to sleep and sleeping bags, food, shelter, where to shower and go to the toilet are all encompassing.

Public toilets are vital and also a means to wash, brush teeth, wash and even die hair. For women, particularly when menstruating, there are challenges when the toilets close and several of them talked about the degrading situation of going to the toilet outside.

Jo said:

“ Having to carry toilet roll around with you and then its like you are a dog picking up your own mess and putting it away... you do you feel like an animal out there.

She continued that that when she was in public toilets washing and brushing her teeth, she thought people were judging her and assuming she was there to take drugs.

Krystal articulated the frustrations of some homeless women:

“ A lot of people get angry on the street... because they want the help and support and no one is helping them.



Brighton and Hove has the largest homeless population outside London and has experienced the greatest increase in rough sleepers in the country.

In 2016 there were 144 people found to be rough sleeping on one night, an 85% increase on 2015.

Homeless link: <http://bit.ly/1L4P7CH>

Emotional Violence

Rough sleepers continued

Lauren summarised how she felt rough sleeping had affected her mental and physical health:

“ So you end up not eating, you end up malnourished, you end up really ill and I’m not surprised people get deeper into their addiction whilst being homeless because it’s the only thing that makes you go ‘it’s alright’... being out there mentally disturbed us for the rest of your life you know?... I got to the point where I didn’t care. I really didn’t. I would shut my eyes at night and think well if they don’t open, c’est la vie!

Being judged extended to the assumption that homeless women would be desperate and willing to engage in sex for money which several women described as degrading.

Grace said:

“ I can’t tell you how many men offered me money for sex and stuff it was unreal. If I had a pound for every one I would have been fine and probably could have paid a deposit.

The ultimate tragedy of death on the street was raised by four of the women who had known people who had died through ill health, drugs and so-called legal highs (especially Spice), hypothermia or suicide. Bianca was planning the funeral of one friend at the time we met and Grace said she had been to 15 funerals in the last three years (although it was not clear if these were all homeless people).

The experience of multiple losses was a recurrent theme. Many of the women had lost everything, sometimes more than once. This not only included their home and possessions, but also friends, family and children. A couple of the women had been married with a house, car, holidays and children yet lost it all.

At least seven of the women were mothers, three of whom had lost children to local authority care including one who had lost all seven of her children.

The shame and sense of having failed as a mother is another hidden trauma for these women, two of whom said would like to see their children but still did not feel they were in a good enough state to meet up with them.



Homeless people are **four times more likely to die of unnatural causes** and **35 times more likely to commit suicide**.

Brighton Housing Trust 2015: <http://bit.ly/2x0XcMo>



Hostel life

As well as the horror of living on the streets, hostels were described by some as depressing, dark, drug environments where despite the efforts of organisations running them, it is almost impossible to stay sober or clean from drugs.

Abi said:

“ It all went a bit bad and we all got into drugs and alcohol and started fighting... it’s meant to help you but it makes you ten times worse.

Issie described how bad things were in one hostel:

“ I felt like I had hit the bottom rung of life by the time I got in there... everyone is struggling so it feels harsher than harsh... if anybody saw the reality of how much struggle people have to go through... how much resilience you need just to get through the system.

Several women interviewed described feeling powerless and having no control living in hostels because the staff have ‘your life in their hands’, according to Darcie and the power to throw you back out on to the street if they wanted to.

After several years living in one homeless hostel, Darcie showed learned helplessness saying:

“ I don’t think I will ever get out, I will die in a hostel.

Feelings of insecurity and worry about the future were common: where they will live and what will happen to them, feeling powerless and having lost control of their own life.

Nancy was living in temporary accommodation and described this through tears:

“ Oh my god, what’s going to happen to me? Where am I going to go?... I walk down the street and it’s very sad, I look in people’s windows and I think ‘Why can’t I have that? Safety and security.’

Strategies for Emotional Survival

Creativity and resourcefulness

The women showed creativity and resourcefulness in finding ways to live beyond just survival.

Despite the challenges, several women took pride in how they looked, including wearing nice clothes. This partly hid their homeless status, which unfortunately could mean they got less help. Indeed Olivia was turned away by the council housing department, who refused to register her as homeless because, she says, she 'didn't look it', even though she was rough sleeping.

One of the most common coping strategies employed by virtually all homeless women, particularly those rough sleeping, is the use of self-medication through alcohol and drugs. BHT found among rough sleepers 72% reported needs around alcohol use and 47% reported needs around drug use.

In this sample nine of the women admitted having a problem with drugs or alcohol.

Lauren said:

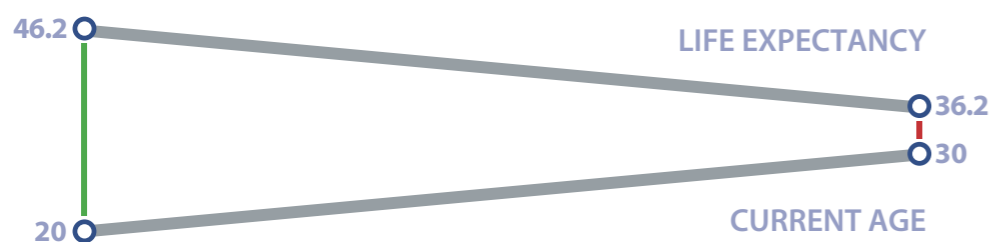
“If you actually sobered up on the streets you would think ‘Oh my goodness I have just taken a sandwich out of a bin to eat! It’s disgusting!’

Grace said:

“It’s not much fun, so you drink to... not feel. And then in the afternoon and evening you drink so you can sleep at night.’ In this way alcohol and drugs were part of their survival skills to dull the pain, boredom and reality of living on the street.

Olivia would find it calming to sit inside a pub and ask for a glass of water when she was rough sleeping, just to be inside four walls:

“I felt... protected, contained and civilized because you are inside. It sounds strange but if you spent a few days without being inside, just walls are human you know, civilisation.



The mortality rate among homeless women is more than **five times higher** than the general population and **increases with age**: the life expectancy of a homeless women of 20 is **46.2 years** whereas at 30 it is just **36.2 years**.

Nusselder et al 2013: <http://bit.ly/2xQICGI>



Access to services

Most of the women had received support from agencies and professionals working in the local area.

A couple of the women had received counselling or attended self help training courses, which had been positive.

Some had reduced or stopped alcohol or drug use, felt less depressed or had reduced self-harming. A few enjoyed the pampering by volunteers at one drop in service for women. Others described strategies such as reading, art, creative expression, gardening and religion.

The three women who were living and working at Emmaus found the structure, routine and responsibility of a job contributing to the community had helped them immensely.

To constantly focus on the potential for victimisation would be exhausting, so one of the survival strategies Bianca described was not to dwell on what was going on as follows:

“You just bide your time and bide your time and you’ve just got to keep your head down. ‘Cos if you sit and worry and you dissect what’s going on around you, you will go mental... you can’t. You almost have to block it out, you have to physically, mentally, spiritually... just to survive, to keep your sanity.

The emotional form of violence on the women is seriously under researched and unrecognised, yet the impact on the women is potentially more damaging than physical violence.

For these marginalised women to rebuild their lives in order to find a home, stability and a job is a huge hurdle made far more complicated by this insidious emotional assault and why support services are so crucial.

About This Research

I undertook this research in 2016 to explore the issue of women and hidden homelessness as part of my Masters Degree Dissertation.

I interviewed 15 women who were, or had previously been, homeless in Brighton and Hove to understand the daily issues they faced. This report is a summary of my findings which showed how physical, sexual and emotional violence frames the experiences of homeless women.

Of the fifteen women interviewed, the majority were white British, one mixed race and three from overseas. Four identified as lesbian, one transgender, one living with a disability, and two as middle class (having been to boarding school).

The youngest was nineteen and the oldest two in their fifties.

The length of time they had spent homeless ranged from four months to on-and-off for twenty years, with a combined aggregate of nearly seventy years spent homeless. The women had stayed in a variety of settings and most had moved several times cycling in and out of different temporary accommodations: rough sleeping, sofa surfing, hostels, B&Bs, a squat and prison.

At least seven of them were mothers, although none of them had dependant children living with them at the time, either due to their children having grown up or having been removed from their care.

The reasons they were homeless included relationship breakups, mental health issues, domestic violence, drug relapse, coming out of prison and being kicked out of home by a parent.

Research suggests up to 85% of homeless people have mental health problems (BHT 2015), with a large number of women likely to have 'physical and mental health problems that have gone untreated' (Mayock et al 2015).

Thirteen of the women interviewed (87%) said they had mental health problems, with seven of them citing depression as a contributory cause or result of being homeless. One was bipolar but was misdiagnosed for 28 years and her manic behaviour ultimately contributed to her becoming homeless.

Three of them talked about having taken overdoses or tried other means to kill themselves, including one whose attempted overdose left her with an ongoing disability. One woman had taken four overdoses and commented that 'she couldn't even get that right.'

Nine admitted having a problem with alcohol or drug use; six said they had experienced domestic abuse or sexual assault, as a result of which, three said they were suffering from Post Traumatic Stress Disorder (PTSD).

It is important to note that none of the women were asked about their mental health, drug use or experience of violence: this information was volunteered so the numbers may have been even higher.

The sample size was small and not racially diverse. The women were all in touch with support services, asked and agreed to take part, so not fully representative of homeless women in Brighton. However we can gain valuable insights from their experiences of homelessness. I aimed to be respectful and non-exploitative in this research, and hope I have represented them fairly. The names of all the women have been changed to protect their identities.

Cathy Bunker

BHT in Numbers

TOTAL NUMBER OF TENANTS AND CLIENTS WORKED WITH:



7,286

3,909 of our clients were women and 24 identified themselves as trans.

TOTAL NUMBER OF CASES OF HOMELESSNESS PREVENTED:

1,396



Number of people worked with whilst they were sleeping rough:

1,062

Number of tenants and former clients on work placements at BHT: 13



NUMBER OF VOLUNTEERS:



97

TOTAL NUMBER OF VOLUNTEER HOURS:

7,206

Number of tenants and former clients placed by BHT on work placements externally: 14

Number of tenants and clients trained in computer literacy:



627

BHT Women's Services

BHT is committed to improving the services it provides to women and, working with partners and commissioners, to delivering systems change for women who are homeless or sleeping rough to ensure services better meet their needs.

BHT has developed a range of specialist women's services and groups (examples listed below), to facilitate and encourage inclusion and engagement.

We also lead the South East Fulfilling Lives project, which is one of 12 projects across England where Big Lottery Fund investment is supporting people with complex needs. As well as supporting people, the funding will evidence more effective and efficient ways for designing, commissioning and delivering support services for this group in the future.

The legacy of the eight year programme will be that systems and services in all three geographical areas will better meet the needs of this group. A current focus of this work is women at risk.

BHT Threshold Women's Services

Threshold provides support to women with a wide range of issues, including anxiety, depression, self-harm, post-traumatic stress, chronic low self-esteem, suicidal thoughts, parenting issues, birth trauma and perinatal depression.

Many of the women have past or current experience of abuse or violence; most living on low incomes.

The service offers counselling and therapy offered by trained counsellors, art psychotherapists and volunteer counsellors, wellbeing group-work and workshops, intern placements and volunteering opportunities and drop-in sessions. **Threshold Wellbeing Group and Drop-ins:**

Monday: Threshold Women's Wellbeing group offers a safe, supportive and welcoming space where women meet other women and get involved in activities that aim to improve wellbeing. 27-29 North Street, Brighton

Tuesday: Threshold's weekly Art & Chat drop-in at the Cornerstone Community Centre, Cornerstone Community Centre, Church Road, Hove, BN3 2FL

Big Lottery Community Engagement Project

Delivered in partnership with First Base, Rise and Fulfilling Lives, the Big Lottery's Community Engagement Project is for women who are currently rough sleeping or insecurely housed who would like to access a safe space.

Every Wednesday an Assertive Outreach worker from Rise is present at BHT's First Base Day Centre to support women with domestic violence issues, as well as to offer informal advice and guidance. A structured activity is also delivered each week.

Women accessing the service can use BHT's First Base Day Centre facilities and receive an assessment if required.



BHT Route One

Route One is a specialist mental health services providing accommodation and support to over 60 people with mental health issues and complex needs.

Within this service BHT provides a dedicated women-only house as well as women-specific groups and workshops covering issues such as anger management, vulnerability, physical health, sexual health and relationships.



BHT Phase One

Phase One is a high support hostel accommodating 52 homeless men and women.

The accommodation can be used flexibly to provide women-only areas. Individually programmed key fobs give clients access to certain areas of the building only. The hostel also has four pre-tenancy flats consisting of shared accommodation that can be designated women-only when required.



BHT Addiction Services

Women referred to the service, providing they meet the service criteria, are prioritised at both Detox Support Project (DSP) and the Recovery Project (RP) to enable fast access to treatment.

Four of the five project workers at RP are female and in recovery and DSP has one female staff member in recovery. All achieved their recovery with our services and are now positive role models for women in recovery. All female clients are assigned a female keyworker.

Female staff at both DSP and RP are very experienced in supporting women in recovery who have children in care at the time of treatment, or who have had children adopted while in active addiction. The Addiction Services safeguarding lead provides guidance to Addiction Services keyworkers on this issue when needed.

Female staff are also experienced in supporting women in treatment who are dealing with the impact of domestic violence. Staff work proactively to challenge any communication from male clients that could make female clients feel unsafe or uncomfortable while in treatment.



Other services

Rise: an award winning charity providing sanctuary and support in Sussex since 1994. **01273 622822**

Brighton Oasis Project: a substance misuse service for women and their children in the heart of Brighton. **01273 696970**

Brighton Women's Centre: empowering women and reducing inequality by promoting independence in a safe, women-only space. **01273 698036**

BHT Services Guide

www.bht.org.uk/services

housing services & housing support

legal & advice

combating homelessness

recovery from addiction

mental health & wellbeing

work, learning & employment

Access to Work

Supports people to get ready for work.

Includes a valuable opportunity to gain experience working with a business.

01273 645432

judith.bradshaw@bht.org.uk

Accommodation for Work

Provides temporary, shared accommodation and support with work and learning.

01273 645440

afw@bht.org.uk

Addiction Services

Working across Brighton and Hove to help people achieve abstinence and prevent homelessness by supporting them towards healthy, independent living.

Detox Support Project Drop in weekly session, open invitation, every **Tuesday, 2pm – 3pm** at **5 Egremont Place, BN2 0GA**.

Recovery Project Drop-in weekly session, open invitation, every **Monday, 3pm – 4pm** at **10 Ditchling Rise, BN1 4QL**

All referrals are via the Brighton and Hove gateway service, **Pavilions Partnership**, based at **9 The Drive, Hove, BN3 3JE**

Archway

Enabling people with mental ill health to live as normal a life as possible.

Call **Ian Wilson** on **01273 748031**

BHT Training

BHT Training is a leading provider of voluntary sector training in Brighton & Hove.

01273 645420

bht-training.org.uk

Brighton Advice Centre

Provides legal advice on housing issues and a court duty scheme.

Appointments: **01273 234737**

Drop in: **9am – 12.30pm** and **1.30pm – 4.30pm, Monday to Friday**.

Legal housing advice drop in sessions: **9.15am – 12.30pm Monday to Wednesday**.

Eastbourne Advice Centre

Providing housing advice, a court duty scheme and the Macmillan Welfare Benefits Advice Service.

01323 642615

Monday to Thursday, 9am – 5pm. Friday 9am – 4.30pm

First Base Day Centre

Supports people who are sleeping rough or insecurely housed in Brighton & Hove.

Rough Sleepers session: **8am weekdays**.

Activity sessions: **11am weekdays**.

01273 326844

first.base@bht.org.uk

Fulfilling Lives

Working with people who have complex needs who are experiencing at least two of the following: homelessness, re-offending, problematic substance abuse, mental ill health.

Client beneficiaries for the project are identified through multi-agency case forums, rather than a direct referral process.

For details contact: **01424 452619**

Hastings Advice Centre

Working in Hastings and Rother to provide housing advice and a court duty scheme.

01424 721458

Tuesdays and Thursdays from **1.30pm – 4.30pm**

Hastings Young People's Service

A supported housing project for homeless and vulnerable young people aged between **16 and 25 years old**.

Referrals are made through **Hastings Borough Council**.

Housing Services

BHT's Housing Services tenants live in our community housing in Brighton and Hastings or in our leased accommodation in Brighton, Eastbourne and Hastings.

Access to our **community housing in Brighton and Hastings** is through referrals from the local councils' housing departments.

Intern Programme

Boosts the employment chances for people wishing to get back into work after long term unemployment.

Intern Placements are available predominately to anyone who has used BHT or similar services, has a history of homelessness or has been long term unemployed.

Referrals can be made directly to the **Intern Coordinator**: **01273 645444**

Mental Health & Wellbeing Services, including Threshold Women's Services

BHT's Mental Health & Wellbeing and Threshold Women's services support adults to improve and maintain their mental health and wellbeing.

Please download the referral form at www.bht.org.uk/services/mental-health-and-wellbeing and send it to **27 – 29 North Street, Brighton, BN1 1EB**

wellbeing@bht.org.uk

01273 929471

Phase One

Phase One is a **52 bed, high support hostel for single homeless men and women**.

Referrals are taken from **Brighton and Hove City Council (HOT EAST Team)**, the **Probation Service**, BHT's **Mental Health & Wellbeing service** and the **Rough Sleepers Street Services Team**.

01273 328285

phase.one@bht.org.uk

Route One

Support and accommodation for **53 adults with mental health support needs within Brighton and Hove**.

Contact Brighton and Hove City Council's **Housing Options Team**: **01273 294400**

01273 929470 for any general enquiries and advice on referral routes

Shore House

20 units of accommodation offering intensive and high levels of support with staff on site 24 hours a day.

All new referrals need to be referred via the **Mental Health Placement Officer** who can be contacted on: **01273 293198**

Whitehawk Inn

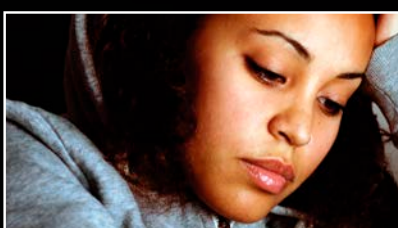
Provides information and advice about work & learning, and a range of support for people looking to go back to work.

whitehawkinn@whinn.org.uk

01273 682222

Until next time...

Look out for our next publication in **November 2017**



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