

Keeping a Face for the World: A WY-FI Analysis of Women's Experiences, Journeys and Outcomes

Edited and authored by

- Eve Headley – Research Volunteer
- Mark Crowe – Research and Evaluation Officer

Based on contributions by:

- Mez Marsden – Co-Production Support Worker
- Simon Dixon – Co-Production Involvement Lead
- Geoff Doyle – MIS and Evaluation Officer
- Anthony Leeman – Data Analyst
- WY-FI Network Members



Contents

Key Findings 3

Recommendations: working with women with multiple needs..... 3

Introduction 6

Women's needs on entry into WY-FI, how long they were on caseload, the services they used in relation to their needs and their outcomes and exits. 6

 Needs 6

 Demographics 7

 Age 7

 Children 7

Homelessness, Addiction, Reoffending, Mental Ill-health (HARM) 7

Outcomes for Women on WY-FI 9

Positive and Negative Impacts on Women’s Journeys in WY-FI 11

Challenges Women Face 12

Accessing Multiple Services 13

The Role of the Personalisation Fund in Creating Positive Outcomes..... 14

The Outcomes of Multiple Service Use..... 16

Focus Groups and Questionnaire..... 18

Accessing Services with Children 19

Case Studies 21

 Why do these women have multiple needs? 21

 How the WY-FI Project has uniquely helped women. 21

Accessing multiple services outside of HARM 22

 Children 22

Together Women Project..... 23

 Outcomes 24

 Deep Dive into the Journeys of the TWP Year 1 Starters 26

COVID-19..... 28

Conclusions: Why a person, female-centred approach is needed in order to provide effective support to women 31

References: 33

Appendix – 1 – Case Studies 35

Key Findings

The prevalence of multiple needs in women does not vastly differ from that of men, but addressing those needs is done most successfully with:

- A person-centred and asset-based approach
- A trauma and gender-informed approach
- A trusting relationship with a Multiple Needs Navigator or Peer Mentor who helps co-ordinate multi-agency support over a long period of time
- A range of services and interventions, designed to keep women safe, as well as maximise positive outcomes

WY-FI data shows that:

- Younger women are more likely to experience multiple needs
- Suitable, safe and secure housing is critical to establishing successful outcomes for women
- Women are more likely to have a prison stay, and transitions between prisons, communities and services are critical to support these women.
- Prison stays whilst on WY-FI caseload have not improved outcomes for these women.
- Women are more likely to experience issues that may not be in a service's remit to address, for example relationship issues, confidence/resilience and emotional wellbeing. These issues can make it difficult for women to engage, which can lead to exclusion from a service. They also increase the risk of reoffending behaviour.

Recommendations: working with women with multiple needs

Multiple Needs Navigator support does not need to be gender-specific, but the services they refer people into need to be much more gender informed. Workforce training and co-production of services can begin that process.

Services must work together to provide flexible, person-centred support for a wide range of issues for women, including:

- More women-centred services (ideally co-produced with women who use these services)
- A range of face to face, online or telephone appointments and other interventions.
- Accommodating women's children so that they can continue to engage
- Housing First type accommodation once "Everyone In" accommodation ceases
- Tailored support for women at risk of domestic abuse in the event of future local, regional or national COVID-9 related lockdowns
- A trauma informed approach to service delivery – by definition nearly all women with multiple needs will have experienced trauma
- Services using the same assessment tools that include information relevant to women's journeys and histories
- Multi-agency support plans, agreed at multi-agency meetings, that hold agencies to account

Working with a woman who have children is also an opportunity to work with the children themselves, as they are highly likely to present with multiple needs as adults.

Alternatives to prison must be prioritised, especially in the case of lesser offences or recall, where there is no threat to people.



Introduction to the Fulfilling Lives Programme and West Yorkshire Finding Independence

The Fulfilling Lives Programme was set up by the National Lottery Community Fund (then the Big Lottery Fund) in 2013 and invested £112 million in 12 areas of England, including West Yorkshire. The programme defines multiple needs as experiencing three out of four of the following HARM needs:

- Homelessness
- Addiction (substance misuse)
- Reoffending
- Mental ill-health.

The projects under the Programme (including WY-FI) were designed around the principles of:

- Person-centred support
- Multi-agency working and service collaboration
- Co-production of service design, delivery
- Using learning to drive system change

The National Lottery Community Fund facilitates a range of thematic meetings. One of the most important of these amplifies the voice of people with lived experience through the **National Expert Citizens Group**. This group brings together people with first-hand experience of multiple needs, and WY-FI is represented by members of the WY-FI Network, who bring their knowledge, research and learning to improve the design and delivery of services.

More information about the Fulfilling Lives Programme and the other 11 Fulfilling Lives Projects can be found here: <https://www.tnlcommunityfund.org.uk/funding/strategic-investments/multiple-needs> and here: <https://www.fulfillinglivesevaluation.org/>

About West Yorkshire Finding Independence

West Yorkshire Finding Independence (WY-FI) supports adults with at least three needs in the areas of homelessness, reoffending, substance misuse and mental ill health. These are also adults who are struggling to engage with services.

Launched in May 2014, WY-FI's vision has been that by 2020, adults with multiple needs in West Yorkshire should have the opportunity of a settled home, positive health and wellbeing, access to education and employment, and trust in a positive future.

WY-FI is led by Humankind (formerly DISC), and as lead partner they are responsible for commissioning and managing the project. Between 2014 and 2020, our delivery partners also provided direct beneficiary support across West Yorkshire. These partners were Barca (Leeds), Bridge (Bradford), Spectrum (Wakefield), Community Links and (Kirklees) and Foundation (Calderdale).

The key aim of WY-FI has been to **improve partnership working and achieve a 'system change' in the way in which people with multiple needs are supported** in West Yorkshire. It is based around a core model comprising the following key elements:

- A **Regional Support Hub** based in Leeds
- **Navigator teams** based in the five districts to ensure beneficiaries can access the support they need
- **Multi-Agency Review Boards (MARBs)** to facilitate multi-agency case conferencing, improve the co-ordination of service delivery, and ensure services are delivered in a personalised and flexible fashion
- An **Employment, Training and Education (ETE) Team** delivering a Peer Mentor course as a pathway into volunteering or paid work
- **Peer Mentors** to provide support to beneficiaries and show that positive change is possible
- **Co-production** with beneficiaries
- **BME, Women's Engagement, Advocacy and Prison Engagement workers** (in post between 2014 and 2017)

The project is overseen by a **Core Partnership Management Board** made up of experts by experience, delivery partners, and statutory organisations with representation from local authorities, police, the Prison and Probation Service, and mental health services.

The role of the **WY-FI Multiple Needs Navigator** is an important element of the project's model, and is referenced in this report. The role is founded in small caseloads and a person-centred approach, to allow Multiple Needs Navigators to deliver a wide range of intensive support, including advocacy as well as emotional and practical support to beneficiaries. They play a pivotal role in engaging beneficiaries and ensuring that they can access services and interventions when they need it.

WY-FI also provided a **Personalisation Fund** so that Multiple Needs Navigators could apply for additional financial support to beneficiaries. This was used to where funds were not available to provide items or services which would be likely to aid beneficiaries' recovery and support them to develop more stable and independent lives.

More information about WY-FI can be found at: <https://wy-fi.org.uk/>

Women in WY-FI: An analysis of their experiences, journeys and outcomes

Introduction

This report analyses the experiences of women whilst on caseload with West Yorkshire Finding Independence (WY-FI). The data and evidence used in this report has been gathered by WY-FI from June 2014 – May 2020.

The report considers:

- Women's needs on entry into WY-FI, how long they were on caseload, the services they used in relation to their needs and their outcomes and exits
- How custodial sentences have affected women's journeys through WY-FI and what changes could be made to help women recover in a more effective way
- The journeys of a subset of women who came onto WY-FI caseload at the start of the project, who we jointly supported with the Together Women Project
- How COVID-19 has influenced the recovery of women and how this has highlighted the need for a female-centred approach to support
- Why a person, female-centred approach is needed in order to provide effective support to women

[Women's needs on entry into WY-FI, how long they were on caseload, the services they used in relation to their needs and their outcomes and exits.](#)

WY-FI has worked 296 women, compared to 527 men (see Tables 2 & 3, Page 5).

Just over half these women (156 – 52.7%) experienced needs in all four of the HARM areas (WY-FI, 2020).

WY-FI data shows that women on WY-FI caseload achieved significantly better outcomes and planned exits than men.

Needs

- Over 90% of women on WY-FI caseload presented with HARM needs in the areas of addiction and mental health (and our data tells us that women with addiction needs are more likely to have alcohol cited as their primary substance)
- Over 85% of women presented with three or more HARM needs, with housing needs slightly more prevalent than re-offending ones
- Almost 70% of women presented to WY-FI with reoffending needs and 67% of them reoffended whilst on WY-FI caseload
- Just over one third of the women identified with a re-offending need had a prison stay whilst on their WY-FI journey,

At the outset of the WY-FI Project, the eligibility criteria for acceptance onto the project's caseload was that individuals were experiencing needs in at least three out of the four HARM areas.

In response to the specific needs of women, eligibility for their acceptance onto WY-FI caseload was reduced to two out of four HARM needs (although it should be noted that there is a negligible difference between the numbers of men and women experiencing three or more needs).

Relaxing eligibility criteria has been especially important in cases where other factors were contributing to a lack of engagement with services (for example domestic abuse, responsibility for

children, physical health issues). The following section explores some of these additional factors in more detail.

Demographics

The following data is based on a sample of 714 individual journeys for which WY-FI has complete data. This sample is made up of 271 women and 443 men.

Age

More women than men are likely to experience multiple needs earlier on in life. The age profile of beneficiaries shows that there were more women in the 18-44 age group, and more men in the 44 and over group.

Younger women are also more likely to have a prison stay. Whilst the largest proportion of female beneficiaries overall was in the 35-44 group, the largest proportion of women who had a prison stay during their WY-FI journey was in the 25-34 age group.

Children

WY-FI has supported a total of 238 beneficiaries with responsibility for one or more dependent children, and 101 of them were women (representing 37% of all women on WY-FI caseload).

WY-FI data shows that 20% of women with dependent children had a prison stay whilst on WY-FI caseload.

Our data also shows that these women had more planned exits from WY-FI than women without children. In addition, women whose children lived with them had better exits than women whose children didn't.

In contrast, fewer men (30% of all male beneficiaries) had responsibility for dependent children. 25% of men with dependent children had a prison stay recorded and 33% of these (35) had responsibilities for children.

It can be assumed that prison stays, and other experiences men have with the criminal justice system, will have an impact on the women in their lives who have formal or informal caring roles for their children.

Homelessness, Addiction, Reoffending, Mental Ill-health (HARM)

The tables below show different combinations of HARM needs.

The data highlights that more men than women experience re-offending needs - 21.3% of men presented with a combination of reoffending, addiction and mental health needs, compared to 16.6% of women.

And fewer men than women presented with a combination of homelessness, addiction and mental health needs, but not reoffending (13.5% of men compared with 17.9% of women)

Whilst reoffending is prevalent in over 70% of female beneficiaries, it's access to suitable and sustainable housing that's presented as more of an issue for women.

Table 1: HARM needs for all beneficiaries

HARM Needs (All)	Number	Percentage
HARM	463	56.3%
ARM	161	19.6%
HAM	124	15.1%
AM	24	2.9%
HAR	20	2.4%
HRM	14	1.7%
HM	7	0.9%
HA	4	0.5%
A	2	0.2%
AR	2	0.2%
RM	1	0.1%
M	1	0.1%

Table 2: HARM needs for all male beneficiaries.

HARM Needs (Men)	Number (total 527)	Percentage
HARM	307	58.3%
ARM	112	21.3%
HAM	71	13.5%
HAR	16	3.0%
HRM	8	1.5%
AM	7	1.3%
HM	3	0.6%
AR	1	0.2%
RM	1	0.2%
HA	1	0.2%

Table 3: HARM needs for all female beneficiaries.

HARM Needs (Women)	Number (total 296)	Percentage
HARM	156	52.7%
HAM	53	17.9%
ARM	49	16.6%
AM	17	5.7%
HRM	6	2.0%
HM	4	1.4%
HAR	4	1.4%
HA	3	1.0%
A	2	0.7%
AR	1	0.3%
M	1	0.3%

Outcomes for Women on WY-FI

WY-FI uses two scoring systems to measure progress and outcomes. These are Housing Outcome Stars (HOS) and New Directions Team Assessment (NDTA) scores.

At the beginning of a WY-FI journey, Multiple Needs Navigators would complete an initial assessment to agree starting and target scores with beneficiaries.

HOS scores are based on 10 outcomes, which include:

- Managing money and personal administration
- Social networks and relationships
- Drug and alcohol use

Chaos Index (NDTA) scores are also based on 10 (slightly different) categories, including:

- Unintentional self-harm
- Risk to others
- Engagement with frontline services

In this section, we look at journey data and scores for 823 beneficiaries with a total of 852 journeys (28 people have had two journeys and one person had three journeys).

Two thirds of these beneficiaries had a planned exit, and a third had an unplanned exit.

Over half (154) of all beneficiaries left WY-FI with other support/external networks in place and 27 gained independence.

Of those beneficiaries that had an unplanned exit from the project, 20 people went to prison, five went into residential mental health care, six relapsed and 12 died. A total of 55 people either refused, or were not ready for WY-FI support.

Only two female beneficiaries left to an unknown destination.

A total of 74 (25%) women had disabilities that were defined as "emotional" or "behavioural" and a further 29 (10%) had progressive conditions such as HIV or cancer. Three quarters of these women had planned exits, highlighting the importance of flexible, person-centred support for a wide range of issues.

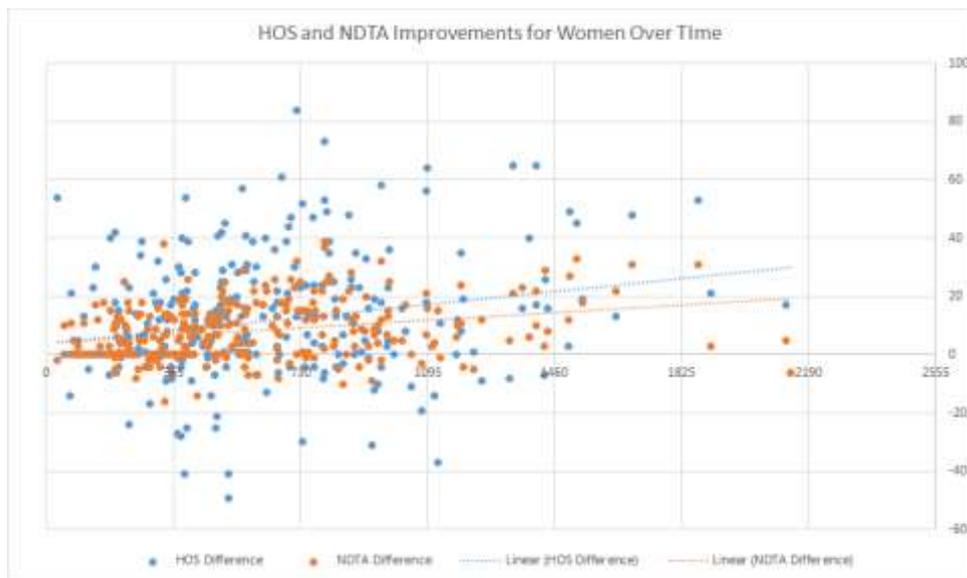
In Table 4 (below) it's clear that greater numbers of women made improvements in years one to two on caseload, and from year three onwards, making it clear that this is the optimum journey length for effective support.

Table 4: HOS and NDTA Outcomes for Women over Time

	HOS Improved	NDTA Improved	HOS same	NDTA same	HOS Worse	NDTA Worse
Up to 1 Year	40	46	45	35	11	15
1-2 Years	71	83	16	12	21	13
Over 2 Years	67	76	5	3	20	13

Figure 1 (below) shows that most women made an improvement in their assessment scores whilst on WY-FI caseload. The most consistent and the greatest improvements were made between 365 and 1095 days (one to three years) with the project. This corresponds to the findings in the CRESR WY-FI Value for Money Report, which identifies that a return on investment starts to appear between eighteen months and two years of support. This is the result of diverting individuals away from ineffective service use (CRESR 2020)

Figure 1: HOS and NDTA Improvements for Women over Time



Positive and Negative Impacts on Women's Journeys in WY-FI

In the case of beneficiaries who experienced three or more HARM needs, reoffending was more common in men than women (97.6% of men vs. 90.6% of women).

WY-FI data shows that initial NDTA scores between male and female beneficiaries are not hugely different, although scores are slightly lower for those who didn't go to prison.

WY-FI beneficiaries showed improvements in NDTA scores the longer they were in contact with a Multiple Needs Navigator. Of the 129 beneficiaries that were in contact with their navigator for over 24 months, 88% showed improved NDTA scores, compared to 60% who had up to six months' of navigator support.

Of the 823 beneficiaries that WY-FI supported, 608 (74%) of them were referred with co-existing mental health and accommodation issues, and 219 (36%) of these were women.

For many people experiencing multiple needs, including homelessness, their chaotic lives mean that they often only present in services at the point of crisis. It's at this point that challenging behaviour can make it difficult for them to engage, or comply with support plans, which can lead to exclusion from services. This only serves to reinforce their chaotic lifestyles (WY-FI, 2019).

Of the 610 beneficiaries referred to WY-FI with a homelessness need, 97% of them had an addiction (substance use) need and 96% had a mental ill-health need.

The differences in types of need between women and men are often the result of gender-specific circumstances, for example women may be more likely to have a specific housing need whilst supporting children.

Over a quarter of all beneficiaries (218) claimed Child Tax Credit. However, deeper analysis has revealed that over half of these beneficiaries were men. Out of the 296 female beneficiaries, 90 reported to have children. However, under reporting of children needs to be considered as this isn't included in Housing Outcome Stars or Chaos Index Scores.

Other explanations for why housing is more of an issue for women need to be considered, as it appears to be more complex than having children. Furthermore, women are more likely than men to be escaping domestic abuse or feel unsafe in temporary accommodation.

Set in context, for example, from 2010 to 2018 there was a 400% increase of the number of rough sleepers in Leeds. This may be a result of the 56% reduction in spending from 2008/9 to 2017/18. Nationally it's estimated that women make up 14% of all rough sleepers (Homelesslink 2017) although as Bretherton and Pleace (2018) observe "Women's experience is almost certainly being undercounted as women's patterns of rough sleeping may mean they are less likely to be recorded in count". It's worth noting that the Leeds Homeless and Rough Sleeping Strategy 2019-22 only makes specific reference to women in the context of street sex-work.

Solutions to housing issues go beyond making sure women have a roof over their heads. It's about making sure that they have safe and secure long-term housing solutions.

Challenges Women Face

Research into gender neutral services by Bramley et al (2019) has shown the different needs of men and women and the barriers faced in services by women. Disadvantages such as substance misuse and homelessness were a result of different difficulties in men and women's lives (McNeish et al, 2016).

In the same way that individuals have different styles of recovery that work for them, women have different needs outside the four HARM areas. The Corston Report identified problems in the criminal justice system, which has largely been designed by men, for men. Equality needs to be considered, which does not mean treating everyone the same. Men and women need to be treated with equal amounts of respect according to their need and be inclusive to all (Corston, 2007).

Key findings from previous WY-FI research include:

- In prison, women are more likely to have mental health problems than men (Lowthian, 2015).
- Unfair sentencing impacts heavily on women in the criminal justice system. This could include loss of relationships with children, either temporarily or permanently (Northern Women's Network 2020).
- Self-harm rates are higher for women than they are for men (Lowthian 2015).
- Women are more likely to be victims of domestic abuse (Lowthian 2015).
- Women reported to be more at risk from others than men (WYFI Data Sept. 2019).
- Women tend to under-report substance misuse needs, mental and physical ill-health etc. This can be because of responsibilities around children, their community, or a fear of perpetrators or sex work (Lowthian 2015).
- Women experiencing domestic abuse in the home often cannot leave because of children (Lowthian 2015).
- Over 10% of women on WY-FI were recorded as being sex workers (WY-FI Data Sept. 2019). Out of these women:
 - 47% reported being a victim of crime, robbery, or rape
 - 36% reported threats by text, email or phone calls
 - 30% reported getting income from sex working.
 - Drug/alcohol use is worse for these women.
- Women are more likely to live in accommodation that isn't their own, i.e. their partner's home or sofa surfing. Often they are not in charge of their own accommodation (Momplé 2013).
- 45% of women questioned in HMP Newhall said they would not have accommodation on release (WYFI Prison Research 2018).
- 50% of women questioned in HMP Newhall had at some time in the past experienced not having settled accommodation or being homeless (WYFI Prison Research 2018).

Women have reported that accessing services can increase their risk of victimisation (Lowthian, 2015). This could be one of the reasons why fewer women than men have accessed WY-FI. In context, compared to areas such as Greater Manchester, North Yorkshire and South Yorkshire, West Yorkshire has the most domestic abuse-related crime recorded by the Police. In March 2019 this was 52,073 cases, with 73% of these being classified as a domestic abuse related crime (Office for National Statistics, 2019).

Accessing Multiple Services

For WY-FI and other Fulfilling Lives projects, the HARM needs are the main focus of helping people with multiple needs to access services. However, this has meant that much less consistent data has been gathered about women's additional (but equally important) needs.

As a result, our understanding of the help women seek or obtain to address these other needs is drawn from anecdote, case notes or case studies. This data deficit could also be due to women accessing services elsewhere and not reporting it to their Multiple Needs Navigator.

WY-FI beneficiaries often faced disadvantage because of the multiple services they've needed to access and the barriers they've encountered. Of the 296 female beneficiaries, 249 experienced three or more of the HARM needs.

Furthermore, for many female WY-FI beneficiaries, HARM needs were not the only needs they were experiencing. Of the 32 women that were most impacted by the criminal justice system, i.e. being in the top tier of arrested, convicted and imprisoned people, four beneficiaries with children reported receiving no support whilst in their recovery and two of these women were also experiencing domestic abuse. Even for these cases, there was little evidence to suggest that a Multi-Agency Risk Assessment Conference (MARAC) had taken place, despite there being a referral.

For many women with additional needs, such as domestic abuse, having children or involved with sex working, because these needs aren't included in the HARM criteria, there is little to no information about how their recovery is affected by them. A more in-depth process would be needed to systematically collect information about transitory or episodic situations such as temporary housing, unofficial sources of income, or controlling/ coercive relationships.

For many WY-FI beneficiaries however, additional needs were part of their WY-FI support, which offered a holistic approach to recovery. The Basis Yorkshire team started a project with WY-FI to begin a Leeds-based Housing First (HF) pilot in November 2016. Basis Yorkshire provide support to sex workers living and working in Leeds, as well as young people experiencing sexual exploitation (Basis, 2020).

The Innovation Pilot, commissioned and funded through WY-FI, funded six HF tenancies for twelve months, along with a dedicated caseworker from Basis Yorkshire and a housing support worker from Foundation.

Embedding this model in WY-FI meant that the core values of co-production, co-ordination and support remained central to the pilot. For people experiencing chronic homelessness, where their needs were not being met by existing services, the pilot considered the additional needs that sex workers might have. For sex workers, stigma can surround their work, so steps need to be put in place to safeguard women so that they can feel safe in their homes.

Additionally, multiple factors need to be considered when rehousing women, such as proximity to schools, GP's, shops and bus routes. For many women experiencing multiple needs who engaged with WY-FI, their needs went further than being rehoused. As such, a comprehensive understanding of their different needs should be adopted.

The Role of the Personalisation Fund in Creating Positive Outcomes

For women, the Personalisation Fund ensured that once they'd accessed services through WY-FI support, they could apply for funds to sustain their recovery. The majority of Personalisation Fund payments ranged from £45 to £600, and these were primarily for accommodation related costs, including helping to pay deposits, rent and rent arrears, removal costs, repairs and emergency accommodation.

The rapid application and approval process meant that women fleeing domestic abuse or at risk of summary eviction could be safely accommodated until a more suitable longer-term solution was found.

For women who presented with housing as their primary need, as well as securing suitable accommodation, the Personalisation Fund also helped to ensure that it could be made into a safe and comfortable home, with white goods and furnishings.

The frequency of applications for white goods and carpets, as well as decorating and gardening materials, demonstrates the important transition from moving into a property to turning it into a home.

A smaller number of women accessed the Personalisation Fund to enable their children to stay with them, particularly if they were being looked after by a family member. In some cases, the fund made it possible for women to formally increase contact with their children.

Examples of purchases to help with contact and access included: bedding and bedroom furniture; school uniforms, laptops and other schooling equipment; as well as purchases to be able to take part in family activities including on occasion, holidays.

A higher proportion of women accessed the Personalisation Fund than in the beneficiary group as a whole - 40% of approved applications were for female beneficiaries. This varied by locality - for example in Bradford, 60% of all applications were on behalf of female beneficiaries.

WY-FI has looked at the effectiveness of the Personalisation Fund (in 2018) in terms of whether it sustained beneficiary engagement in the project and improved outcomes for women. Our data shows that 84% of beneficiaries (62 out of 75) who received help from the Personalisation Fund remained engaged with the project, and 28 of these beneficiaries were women. This is compared to an overall retention rate of 65%, clearly demonstrating the fund's effectiveness in terms of engagement.

There are two reasons for this. The first is that women used the fund to access services directly and avoid long waiting lists, for example when accessing rehab, or other services not typically available such as dialectical behavioural therapy. This helped maintain the momentum of their recovery journey and avoid relapse.

The second reason is that a considerable proportion of "non-housing-related" applications were for meaningful activities (individual and group), such as arts activities and day trips. Some of these activities were designed to improve individuals' self-esteem, for example a local college ran a spa day for a group of beneficiaries, offering hair and beauty treatments.

Several beneficiaries extended meaningful activities into formal courses. Notably, one person started riding lessons, volunteered at a stable and went on to use the Personalisation Fund to access a BTEC in Land-based Studies (Animal Care).

Despite retention rates being almost identical for men and women, women have shown to have slightly better NDTA scores than men, with 13 out of 19 women showing an improvement in their NDTA scores, with an average improvement of 11.6 points.

Similarly, the average improvement for women's HOS scores was 20, with all women showing an improvement. Women had the same, if not slightly better outcomes than men when accessing the Personalisation Fund.

The Outcomes of Multiple Service Use

Over the course of six years, WY-FI has explored how Multiple Needs Navigators have been effective in supporting both men and women. We've also examined the ways that gender, ethnicity, age and other factors may affect levels of need, exclusion and recovery. The tables in the HARM section of this report show the needs for all beneficiaries, as well as men and women respectively over the course of WY-FI. (Page six)

By taking the four largest categories of need identified in Table 3 above (HARM, HAM, ARM and AM) which includes 275 out of 296 women, we can see the exits for each category of multiple needs.

Table 5. Exits Compared to Needs

Needs	Planned Exit	Unplanned Exit	Grand Total	%
HARM	90	66	156	58%
HAM	40	13	53	75%
ARM	30	19	49	61%
AM	15	2	17	88%

Although the data in Table 5 shows that almost 60% or more of exits were planned, what is noticeable is that women with a re-offending need were more likely to have an unplanned exit.

Table 6 Average Assessment Scores Compared to Needs

HARM Needs	Average of HOS Difference	Average of NDTA Difference	Number
HARM	10	8	156
HAM	11	8	53
ARM	9	8	49
AM	20	12	17

Table 6 shows a broad degree of consistency across the categories of need comprising the larger part of the women in WY-FI. It does indicate that greater improvements are possible for women who are not at risk of re-offending or whose housing is reasonably stable or secure.

WY-FI collected data on ongoing service use by beneficiaries for 18 types of service. These can be roughly divided between "positive" and negative" service interventions.

Negative service interventions include eviction, arrest, caution, custody, court, prison and accident & emergency visits.

Positive service interventions include hospital and mental health hospital out-patient and in-patient visits, counselling and CMHT appointments, drug and alcohol service appointments, detox and rehab.

Figure 2 (below) shows the relationship between improvement in Housing Outcome Star (HOS) and service use. Figure 3 (below) shows the relationship between improvement in New Direction Team Assessment (NDTA or Chaos Index) scores and service use.

Each beneficiary is assigned an orange dot for their use of positive serves and a blue dot for their use of negative services.

The vertical axes show how many services (positive orange, negative blue) were accessed.

Each dot is located horizontally at the point of how much improvement the beneficiary made against the different assessments.

The distribution and trend lines show that people who use the greater number of different positive services have better outcomes.

These are broad trends and more nuanced analysis could be done, for example identifying when in the journey different service use episodes took place. However, these graphs show that multiple positive service use led to greater improvement and outweighed negative service use for women on their WY-FI journey.

Figure 2: NDTA vs Service Use

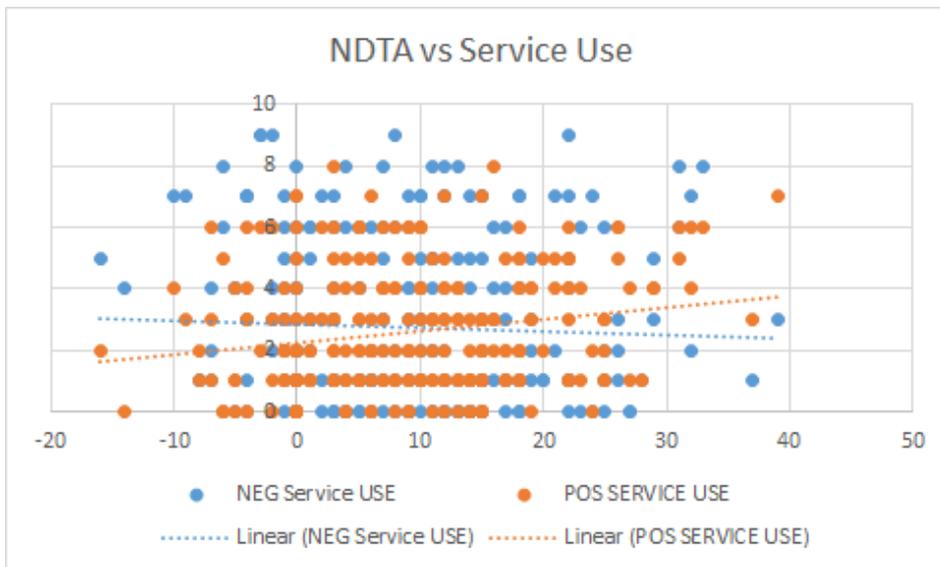
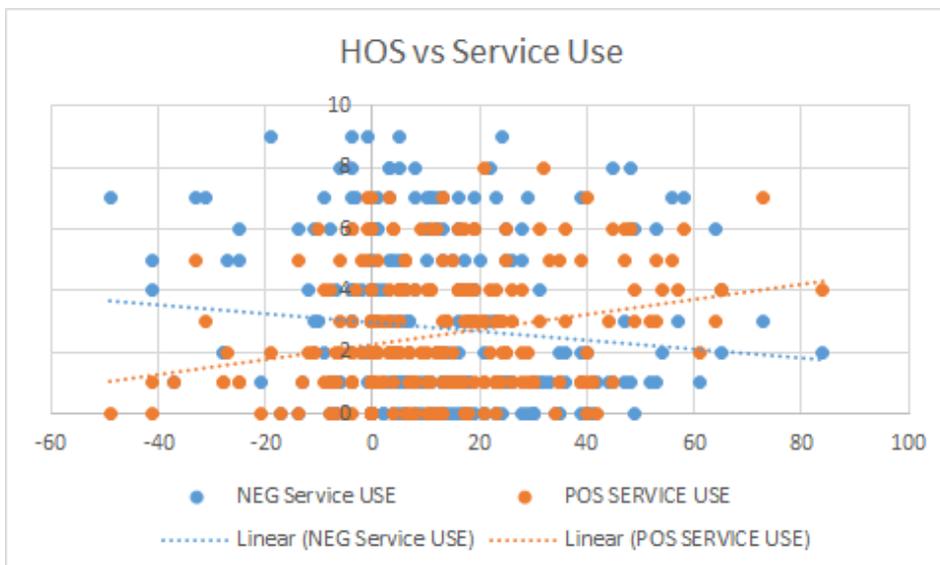


Figure 3: HOS vs Service Use



Focus Groups and Questionnaire

Women with multiple needs face many barriers when trying to access services and not all of them are always considered. Women's needs are different to men's, which means that they access services differently.

On 25th June 2020 telephone interviews were conducted with three wider WY-FI Network members to discuss the barriers they may have faced when accessing services in their recovery. Responses were captured using a semi-structured interview style format using four questions as prompts:

- Tell us about barriers you experienced using services.
- Tell me about your experience of service use with children.
- Have you ever had to change accommodation and why?
- Have you ever been arrested/ spent time in prison?

Two of the three women had experienced barriers in services in Kirklees. These women felt they were unable to build rapport with staff as they were often on leave or there was a high staff turnover.

"... a barrier was a worker was on leave all the time and had to tell my stuff to different workers who were covering all the time" – Huddersfield (WY-FI, 2020).

In addition to this, many women have stated feeling more comfortable with re-telling their story or discussing trauma such as sexual or domestic abuse with another woman, however services have failed to provide a female member of staff for them to work with. By providing often young, male members of staff, there's a risk that women will disengage from services because they're not getting the support they need.

"...Having to talk to a 20 years old man about domestic violence with only textbook experience was hard too" – Huddersfield (WY-FI, 2020).

In addition to telephone interviews, WY-FI's Co-production Team held a focus group in June 2020 to discuss barriers to services in a group setting. Focus groups are a useful tool for participants, as they can bounce ideas off each other that they may not have thought of before. This creates richer data, however it does mean that participants may not speak as freely about sensitive issues such as trauma, substance use or criminal offences.

During the focus group, the issue of discussing trauma with male workers came up again. Women come to services to discuss extremely personal issues, and their perpetrator is often a man. Having a male worker can make women feel uncomfortable and not entirely safe. During the focus group, one woman talked about having to hand in a urine sample to a male worker whilst menstruating. The women in the focus group suggested that this could be addressed by asking women whether they would prefer a male or female member of staff as soon as they engage with a service.

"[You] should be asked at the start if you have a preference for a female worker, [then you] wouldn't have to retell your story again after a switch from male to female worker"

Accessing Services with Children

It's likely that some women will have responsibility for dependent children whilst they are trying to access services, and this can sometimes be a barrier. During the focus group and telephone interviews, respondents discussed the effects of having children whilst in recovery and what barriers this can present. WY-FI (2020) has found that women (and men) with children have proportionally better exits than those without children.

For women with children, 79% of exits were planned and 21% were unplanned.

For men with children 71% of exits were planned and 29% were unplanned.

Despite this, many women reported barriers when trying to access services whilst in recovery. Similar issues were discussed in both the research undertaken by the Northern Women's Network (WY-FI, 2020) and the focus groups and telephone interviews performed by WY-FI. These were:

- Not feeling able to be honest with staff members about their experiences because there are children in the room.
- Unfair sentencing resulting in a loss of relationships with children.
- Finding childcare when children aren't in school.
- Finding childcare because the service they're trying to access doesn't allow children in the building (building insurance issues).
- Accommodation issues for women in recovery and their children.
- Few, if any accommodation options for women who want to access residential recovery projects with their children.
- Women often having to rely on people they're trying to distance themselves from for support for their children. Alternatively, help is often sought from people that could keep them stuck in their current situation such as a loan shark or a dealer.
- Women fear asking for support due to the risk of intervention from children's services.
- Women often lose contact with their children when given a custodial prison sentence.

For some women, having children prevented them from sinking further into their addiction. During a WY-FI focus group one woman discussed how having children meant she needed to 'keep a face for the world', when she was collecting her children from school:

"When I first came into recovery I didn't have children and I'd hit it really bad because I didn't have to keep a face for the world. When I had kids I had to keep a face for school cos I didn't want social services involved so I had to keep what happened under wraps in a certain way"

Participants made suggestions for services to help women with children such as:

- Providing a craft room for children.
- Providing a crèche for children to go during appointments.
- Having a 'Women with Children' clinic.
- Providing peer support from other women to create a more inclusive and welcoming environment.

Research into multiple and severe disadvantage by Bramley et al (2019) found that adverse childhood experiences, such as a parent experiencing multiple needs, abuse or neglect, meant it was far more likely that these children would experience multiple needs as adults.

Notably, this research found that mental health is associated with a slightly higher average number of adverse childhood experiences than domestic abuse or substance misuse (Bramley et al, 2019).

Through developing an understanding of why many women, and adults generally, develop multiple needs, it becomes clear that many of the services required are different to the prison settings women are put in.

The Corston Report (2007) highlights this, requesting a radical change by introducing smaller, woman-centred custodial centres as an alternative to prison. These centres would only house women who are a threat to the public and would allow more access for visitors, giving women the opportunity to stay in contact with their children.

Helping women stay in contact with their children not only supports women's progress. It can also be used as a compelling argument in any "invest to save" case – it costs around £90,000 per year to keep a child in care.

Case Studies

For women with multiple needs, each story is different and individual, highlighting the importance of a person-centred approach. The following areas are covered by case studies we've collected, showing how WY-FI's Multiple Needs Navigator and Multi-Agency models have resulted in effective recovery for many women on WY-FI caseload. A collection of WY-FI case studies can be found [here](#) and in Appendix 1.

Why do these women have multiple needs?

Beneficiaries on the WY-FI programme often experienced adversity in their lives, and adversity can lead to substance misuse issues. Experiencing abuse and trauma in earlier life can also result in mental ill-health and other HARM needs, because of issues such as relationship breakdowns and lack of self-esteem. However, this is not the case for everyone and sometimes it can be difficult to determine what came first.

Baroness Corston (2007) proposed that most women do not commit crimes. More often they are victims of abuse, or the crimes they commit are caused by relationship problems or coercion by men. In contrast the criminal justice system is a system that has been designed for men and is completely inappropriate and ineffective for the recovery of women.

Women like *Emma*, *Lucy* and *Rachel*, who all suffered abuse before engaging with WY-FI, were vulnerable and needed support rather than sentencing.

'Rachel was sexually abused as a child. With no support at the time, Rachel struggled to deal with the trauma and her life gradually deteriorated.'

Corston (2007) suggested we bring about radical change to not only treat and protect women who have already offended, but also those who are vulnerable and at risk of offending. For these women, their vulnerability puts them at more risk of offending and subject to further abuse because they weren't supported in an appropriate way.

Roxanne was referred to WY-FI from probation. She had a history of shoplifting, was a regular user of crack cocaine and alcohol and had untreated bipolar disorder. *Roxanne* was coming to the end of her probation order. She was in temporary accommodation and vulnerable to financial exploitation, theft and sexual assault.

A large number of WY-FI beneficiaries have experienced multiple needs, relying on multiple services that can be difficult to navigate without the right tools.

How the WY-FI Project has uniquely helped women.

Services have been able to help people experiencing multiple needs, like the women in WY-FI's case studies, by adopting and adapting the WY-FI Navigator Model and Multi-Agency working.

As the WY-FI model is person centred, this in turn, makes it women centred, as Corston (2007) suggests services need to be. WY-FI Multiple Needs Navigators supported beneficiaries by building trusting relationships with them, considering what support they needed as an individual. For example, *Emma's* WY-FI Multiple Needs Navigator ensured the right benefits were in place, as well as supporting her to access the services that were right for her needs.

Accessing multiple services outside of HARM

Beneficiaries experienced additional needs outside of the four HARM areas, and these needs must also be addressed to achieve a holistic recovery. For *Roxanne*, who had a number of physical illnesses, getting appointments in services that could help with her addiction and mental ill-health needs was difficult.

In some cases, WY-FI Multiple Needs Navigators were unable to engage beneficiaries because services have failed to understand the complexity of their individual circumstances. This was the case for *Jessica* in Wakefield, who needed a leg ulcer dressing three times a day. Jessica was struggling to keep appointments because of her additional needs.

Two services failed to understand these needs and barred her for not turning up for appointments. A third service refused to let her in as she wasn't registered there. During this struggle, Jessica attempted suicide.

Struggles such as these were typical for WY-FI beneficiaries, which is why long-term system change and multi-agency working is so important.

Louise is another of our case studies. Once *Louise* was settled in sober-living accommodation at Freedom House, she was able to volunteer at the Basement Recovery Project in Huddersfield. After completing the WY-FI Level 2-accredited Peer Mentoring course, *Louise* started volunteering with the Calderdale Navigator Team and then went on to become a Community Builder with the Basement Recovery Project. This is just one example of the many female beneficiaries that have accessed our Peer Mentoring course to allow them to contribute positively and give back to the recovery community.

Children

Some female beneficiaries with dependent children found it extremely difficult to support their children whilst trying to address their needs. *GB's* relationship with her family and children broke down due to her drug use, and as a result she could only see them during supervised visits.

Services must consider the long-term effects that separation can have on children, including how these effects can accompany someone into adulthood, if multiple needs are to be avoided across different generations of families. (Bimpson et al, 2020).

Together Women Project

The Together Women Project supported 21 female beneficiaries who started their journeys in the first year of WY-FI (2014). This group will be referred to as 'TWP women'. From the sample of TWP women, 17 of them experienced all four HARM needs. However, as this analysis makes clear, women can also face other needs, increasing the complexities of recovery (TWP, 2020).

Women with multiple needs experience services differently to men as they have different needs. For example, on average, more women than men experience domestic abuse. Between April 2014 and March 2017, 73% of victims of domestic homicide were women (Women's Aid, 2019).

Additionally, the children of women in such a group are also likely to be adversely affected by their parents' needs, increasing the likelihood of them experiencing multiple needs in their own adulthood.

Set in context, other forms of need that can affect the complexity of an individual's ability to forge a more fulfilling life is evident from the WY-FI data for this group:

- Three are recorded as living with a progressive condition (such as HIV, cancer, multiple sclerosis, fits etc.)
- Three had mobility issues
- 11 experienced domestic abuse

These women were also putting themselves at risk to gain an income:

- Eight of the 21 women have done sex work whilst on WY-FI caseload
- Seven were begging for money
- 14 said they have gained an income from an illegal source

Multiple needs affects not only the individuals with those needs, but their family members as well. In particular, children can be affected, and potentially at every stage of their development. For example, women who misuse substances during pregnancy may put their babies at risk, and later stages of their development, children can:

- Develop behavioural, emotional or cognitive problems
- Have difficulties building relationships
- Be exposed to toxic substances and criminal activities
- Have problems with their attendance levels at school, leading to poor personal attainment.

Children of parents that misuse drugs and/or alcohol are also at an increased risk of developing drug or alcohol problems or adopting offending behaviour themselves (NSPCC website). This creates a cyclical issue for society.

WY-FI beneficiary case notes show that some of the women on caseload have parents that have experienced substance use issues themselves. Furthermore, the case notes show that children of beneficiaries have problems with substance use and re-offending, further emphasising the intergenerational nature of this issue.

Outcomes

WY-FI's assessment of the TWP group showed that 76% improved their HOS score in relation to their substance use. However, only 37% showed an improvement in their NDTA score relating to the same need.

This could be due to many reasons, such as taking the scores at different stages of their respective journeys, or perhaps the score itself. This is because the HOS score captured beneficiaries' opinions about their journeys, and may not have reflected their actual progress, as measured by their NDTA score.

Another notable difference is that TWP women have improved their drug and alcohol use at a higher rate of 76%, compared to 52% in the overall project. Overall, 65% of TWP women improved their overall HOS, and 63% improved their NDTA score as shown in the tables below.

Table 7

HOS Score	Improved	Maintained	Worse
Overall	11 (65%)	0 (0%)	6 (35%)
Motivation and taking responsibility	8 (47%)	4 (24%)	5 (29%)
Self-Caring and living skills	8 (47%)	3 (18%)	6 (35%)
Managing money and personal administration	10 (59%)	4 (24%)	3 (18%)
Social networks	10 (59%)	4 (24%)	3 (18%)
Drug and alcohol misuse	13 (76%)	1 (6%)	3 (18%)
Physical health	8 (47%)	3 (18%)	6 (35%)
Emotional and mental health	6 (35%)	7 (41%)	4 (24%)
Meaningful uses of time	9 (53%)	6 (35%)	2 (12%)
Managing tenancy and accommodation	8 (47%)	4 (24%)	5 (29%)
Offending	11 (65%)	3 (18%)	3 (18%)

Table 8

NDTA Score	Improved	Maintained	Worse
Overall	12 (63%)	1 (5%)	6 (32%)
Engagement with Frontline Services	8 (42%)	6 (32%)	5 (26%)
Intentional Self Harm	11 (58%)	4 (21%)	4 (21%)
Unintentional Self Harm	9 (47%)	9 (47%)	1 (5%)

Risk to Others	11 (58%)	6 (32%)	2 (11%)
Risk from Others	12 (63%)	5 (26%)	2 (11%)
Stress and Anxiety	7 (37%)	9 (47%)	3 (16%)
Social Effectiveness	9 (47%)	4 (21%)	6 (32%)
Alcohol/Drug Abuse	7 (37%)	11 (58%)	1 (5%)
Impulse Control	8 (42%)	8 (42%)	3 (16%)
Housing	9 (47%)	6 (32%)	4 (21%)

Of the 21 TWP women, nine of them had planned exits, and 12 had unplanned exits. However, three beneficiaries remained on the project, of which only one has had a previous journey that ended in a planned exit.

Table 9

Exit State	Description	Count	Percentage
	Gained Independence	2	10%
Planned Exit	External Support Networks in Place	6	29%
	Hospital – Mental Health - Voluntary	1	5%
	Beneficiary Refused WY-FI Support	4	19%
Unplanned Exit	Beneficiary not ready for support	3	14%
	Prison	3	14%
	Deceased	2	10%

Together Women worked with some of the most complex women in WY-FI. Often they had other needs, in addition to the four HARM needs. Circumstances such as sex working or relationships have a large effect on how HARM needs are dealt with. For example, homelessness could be underreported because women suffering from domestic abuse believe they have nowhere else to go, or sex workers report experiencing stigma when seeking help from other services.

Table 10 shows that the majority (68%) of TWP women exited the project having spent more than two years on caseload, compared with only 24% of the overall WY-FI project. The data shows that the TWP women were more likely to stay on the project for a longer period of time. On average, TWP women stayed on the project for 859 days compared to 486 days for the whole WY-FI project.

Table 10 – Journey Length

Grouped Journey Length	TWP	Overall project
Less than 6 months	0 (0%)	131 (17%)
6-12 months	2 (11%)	202 (26%)
12-18 months	3 (16%)	174 (23%)
18-24 months	1 (5%)	82 (11%)
24 months and over	13 (68%)	182 (24%)

Deep Dive into the Journeys of the TWP Year 1 Starters

Just over half of TWP Women (12) had unplanned exits. This figure includes the two women who died, and one who was discharged from HMP New Hall to a mental health in-patient facility.

Again, half of these women had short journeys (nine months or less) and the reasons for their exit were either that they refused further support or received substantial prison sentences. A number of these women were simply too chaotic for WY-FI to engage with from one meeting to the next. Another consequence of their chaos was that they couldn't sustain appropriate housing for very long.

Both the women who died had been supported the longest out of all our female beneficiaries, at just over five and four years respectively. One of the women died from an overdose administered by an associate, and the other had a long history of physical illness associated with injecting drugs.

Both women had significant mental health problems and had experienced substantial challenges in accessing suitable assessment and treatment. Both lived very precarious lives, permanently short of food, heating and money. They were both involved in sex working, not only for financial survival, but also because they were in and out of controlling and coercive relationships.

They were at the mercy of the benefits system which impacted on their ability to enter into and sustain tenancies. One had particular problems with moving around West Yorkshire and Lancashire. Her moves were dependent on prison discharges, being periodically detained under the Mental Health Act and the availability (or otherwise) of suitable and supported accommodation. This reduced the effectiveness of their engagement with services (including WY-FI) and reduced the effectiveness of multi-agency working.

A common core of factors in these “unplanned exit” cases were:

- Childhood trauma and early use of alcohol and drugs, which in some cases leads to dependency
- Being in violent, controlling or coercive relationships that revolved around sex working and substance use
- Untreated mental ill-health and low self-esteem
- Sexual assault, financial abuse (in and out of the home) and domestic abuse
- Uncontrolled drinking leading to public order and other offences (by and large not serious)
- Breach of orders and subsequent recall to prison

- Frantic attempts to secure accommodation either on release from prison or as a result of “anti-social behaviour” or rent arrears
- A sense that these women were in a permanent state of vulnerability – in terms of finances, housing, contact with children and families, breaching orders, losing their freedom, being sanctioned, falling into gaps in the benefits system, or failing breath tests and/or blood and urine tests. In short they felt they were always on the verge of not complying with the “system” or being haunted by past failures

Two of the TWP women’s journeys ended when they were admitted to mental health hospitals (both were transferred there from HMP New Hall).

Five women had planned exits from WY-FI, mostly with “external networks in place”. One of these was a planned exit to a mental health hospital (identified above) as a result of Korsakoff’s Syndrome.

Two of the exits seemed to be overly optimistic assessments based on the latest case notes – which indicated ongoing drug use and possible controlling relationships. One of these was a very short journey, whilst the other journey was a much longer one, indicating that the latter exit may have been more of a considered choice.

The two women with planned exits had journeys of 20 months and 4 ½ years respectively and showed sustained progress through these journeys. And whilst both these women had many of the core characteristics of the TWP group of women, they had support from family and/ or a partner which led to them being sustainably housed.

In addition, they engaged positively with addiction and mental health services and in their last two years on WY-FI caseload, didn’t record any reoffending behaviour.

The woman on the 4 ½ year journey had three prison sentences, a hospital stay of three months, and reduced from opiate use to a script, before achieving complete abstinence. At the end of her journey with WY-FI she was healthy and in a secure property. In addition, she was pregnant and looking forward to having a baby with her partner.

Looking at the four longest journeys made by TWP women, one thing common to them all is the consistent involvement of a small number of core workers. From reading the case notes, these workers have shown an almost superhuman commitment to their work, operating as a “multi-agency unit” to pool knowledge, resources and opportunities in an attempt to stabilise their beneficiary’s life. This may not be surprising though, as a good number of the TWP Women were well known to services for many years and workers may well have had previous contact with them.

In some instances (and in the case of the two beneficiaries who passed away) the TWP group of women was an opportunity for WY-FI to work with people who’d never really engaged with services before. There was a sense of workers joining forces in one multi-agency effort to try something different.

A number of the women in this cohort may still be circulating around services in West Yorkshire. More up-to-date information on their journeys may be obtained by data matching with other services. It’s worth noting that these journeys all commenced at the very beginning of WY-FI delivery (May 2014). As a result, this group of women would not have had the full benefit of the multi-agency working that WY-FI developed over the lifetime of the project.

COVID-19

In June 2020, the National Experts Citizen's Group (NECG) held three regional and one national meeting focussing on COVID-19. Discussions focused on how COVID-19 has changed services, whether there have been improvements to how people with multiple needs access them, and how services could continue with good practices established during this time.

Overall, feedback from NECG members about their experience during COVID-19 was positive. Three key areas of engagement that they said have improved are:

- Increased flexibility, with a choice of how to engage
- Fast tracking and simpler referrals
- More outreach work
- Services being proactive and creative

NECG members said that COVID-19 led to increased flexibility around appointments. For example, workers have been coming up with creative and innovative ways of reaching people, often on digital platforms. These include people who may have been difficult to engage even prior to lockdown, because of challenges they face leaving the house, for example anxiety.

Often, the rigidity of appointments, set by services and usually face to face, carries a higher risk of women disengaging. This can be the result of issues accessing childcare, as well as worries about the perceived stigma attached to visiting a service. There may also be a risk of seeing perpetrators in the same service (Moreton et al, 2020).

For many women, anxiety is a big factor that prevents them leaving the house and accessing services. Often, these women still need support, even more so on days when their anxiety is higher. Being able to access support digitally is extremely beneficial to these women.

COVID-19 has led to more choice for beneficiaries around how they can access services, and this has felt more person centred to them. Services are now considering individual needs, such as less time waiting for an appointment, teams helping with children and more regular contact due to there being no travel time (NECG, 2020).

However, the increased use of technology does not have the same positive effects for some as it does for others. Not everyone finds it easy to engage on platforms like Zoom:

“NA Zoom meetings, really helpful but sooner they were face to face. I find it really difficult to share on a zoom meeting” (NECG, 2020).

The newness and uncertainty of COVID-19 has resulted in increased difficulties for those who are either street homeless, don't have access to the internet or experience domestic abuse in the home. In these circumstances, people might not feel able to have discussions about their recovery over the phone.

However, heightened public awareness of domestic abuse during COVID-19 lockdown has highlighted the importance of helping vulnerable people. Since 9th March 2020, when lockdown began, the Metropolitan Police have reported 4,093 arrests for cases of domestic abuse, averaging 100 arrests a day (Grierson, 2020).

Services such as Jane's Place in Lancashire, who provide refuge for women fleeing domestic abuse, were incredibly important at the beginning of lockdown, to ensure that women in danger at home

continued to engage with services. To do this, creative measures were introduced, such as an online chat room for women who were at home with a perpetrator and needed access to advice and support (Hawtrey, 2020).

Since lockdown began, additional resources have also been put in place to help those who are homeless, such as providing hotel and B&B accommodation. However, staff in hotels and other emergency accommodation have little training in domestic abuse and placing large numbers of women into one environment puts them at risk of sexual exploitation (Moreton et al, 2020).

To address this, single sex accommodation needs to be considered in the event of subsequent local, regional or national lockdowns, to reduce the risk of females coming into contact with male perpetrators in accommodation (Fulfilling Lives, 2020).

However, since lockdown more women have been found to undertake risky behaviour such as 'survival sex' to meet basic needs such as supporting children and paying for bills and food. This is because of fewer opportunities to make money. In addition, as many businesses have been closed, employment rates have declined, leading to people resorting to other forms of income.

Domestic abuse has become more hidden than ever during COVID-19 lockdown. Unable to leave the house, lots of women have been left in vulnerable positions. Many of these women are failing to report cases of abuse to services, and new ways of engaging with these women are urgently needed.

In addition, Changing Lives (the Newcastle-Gateshead Fulfilling Lives Project) found that even when a referral is made, safeguarding services are struggling to respond. This can result in women facing challenges such as needing to use a refuge, or putting their child up for adoption, without the appropriate emotional and practical support in place. (Moreton et al, 2020).

The COVID-19 pandemic has resulted in large changes and new ways of living for the whole country. For those with access to digital platforms such as social media and Zoom, this has led to improvements, with more opportunities to stay connected to services and support from home.

On the whole, women more than men appear to have benefitted from changes in service delivery during COVID-19 lockdown. Phone contact removes the need to travel to appointments and makes it much easier for women to manage childcare. It also reduces the risk of them coming into contact with people that they may be trying to avoid in order to sustain their recovery.

However, the pandemic has left some vulnerable women in dangerous situations. These are women who rely on services to get out of the house, perhaps to escape domestic abuse, or women who rely on zero-hour contract jobs to support their family. For these women, their challenging circumstances and needs were managed through face to face contact and support. Because this hasn't been available during lockdown, the drive for person-centred approaches, with consideration for women's needs, remain crucial for effective recovery.

There is some other learning from this situation. Some women have realised that they value face to face contact more than they thought, as a way of helping them emotionally manage their support processes, as well as complying with support.

The 'new normal' is a phrase many of us have had to come to terms with as lockdown restrictions have eased. For us, this means learning from the way services have adapted to the lockdown in the short-term, and changing the way they are delivered in the long term.

From this research, recommendations include offering:

- More women-centred services
Options to have face to face, online or telephone appointments
- Services and places for children so that women can continue to engage
- Suitable accommodation once temporary hotels and B&Bs re-open
- Tailored support for women at risk of domestic abuse, especially in the event of future local, regional or national lockdowns.

Previously, women may have felt uncomfortable coming into services or attending appointments. Lockdown has meant that services have had to offer alternatives, for which it appears there may have already been a significant demand.

Previously, services have potentially been meeting the needs of professionals rather than the people who actually use the services. COVID-19 highlights the importance of person-centred and innovative services, created initially out of necessity, but that should be continued by choice.

Conclusions: Why a person, female-centred approach is needed in order to provide effective support to women

The data and qualitative evidence from various sources indicate that women experience additional and often indirect challenges to accessing services in general. These are socially determined challenges and relate to their roles as care givers (both for children and other adults) and to a perceived reliance on others for income and security.

In short, when it comes to interacting with support systems, women are not as autonomous as men, and interactions with the "state" are often seen as carrying more risk to them. In these interactions, men tend to be defined by what they have done, whereas women are defined by what might happen to them. Following this hypothesis through, it is unsurprising to find women's experiences of services to be less satisfactory than men's, as the system has been honed to deal with actualities and certainties, rather than possibilities and potentials.

Having said that, in some ways it's not surprising that women have done "better" in WY-FI than men. The person-centred and asset-based nature of WY-FI has helped to address a wider range of issues, as well as remove potential barriers to inclusion. This has offered women the support they need to progress on their journey.

For example, we've supported women to choose where to live, and this has helped them break free from toxic relationships and/or to (re)establish positive relationships. However we've not always been able to offer flexible support in all circumstances and women can still face barriers.

In situations that are particularly constrained, we've seen the damage the system does to women with multiple needs. These are women who, by definition, are also vulnerable and are likely to have been victims. One such situation is their interactions with the prison system.

The findings in WY-FI have been triangulated with those of other Fulfilling Lives projects in Newcastle-Gateshead and Nottingham, to draw more detailed findings from a greater number of people who offended whilst on their Fulfilling Lives journey.

Out of 215 individuals, 148 were men and 67 were women. What is striking is that over 30% (21) of the women were also victims of crime, as opposed to 12% (18) of the men.

Offences committed by women were mainly breach of orders (30 cases). These were breaches of licences, failure to attend court and restraining orders. Almost all these cases resulted in arrest and around a third led to an immediate recall to prison.

The next largest category were offences against a person/ public order of varying degrees. Intoxication was a factor in a quarter of these and five or six were potentially life-threatening (stabbing, arson, brandishing a bladed weapon in public, possession of a firearm). In addition, 10 offences were acquisitive and four were drug-related.

Conversely, over half the crimes committed against these women were of immediate and serious personal violence: four assaults; four rapes/ sexual assaults; two domestic abuse cases; and two women were victims of breaches of restraining orders. Others received threats or were subject to aggressive behaviour and there were five victims of theft/ burglary. In six cases, victims did not go to the police (one was a case of sexual assault and one was domestic abuse).

Almost a quarter of women who offended whilst on their Fulfilling Lives journey were recalled and a further quarter were given a custodial sentence for some (or the remainder) of their journey with the programme. Given the cost, as well as the poor outcomes of prison sentences on Fulfilling Lives journeys, there should be increased investment into diversion and non-custodial sentences to improve outcomes for service users and the public sector alike.

Two items on the case notes stood out, both from probation staff. In one, the Probation Officer stated it was not their job to accommodate their client; the other stated that their role was to enforce the orders of the court. Whilst these viewpoints are literally correct, they are limiting the chances of the rehabilitation of the individuals concerned (as demonstrated above) as well as simply displacing demand for resources elsewhere in the system.

References:

- Basis Yorkshire. (2020). *About Us*. Retrieved from: <https://basisyorkshire.org.uk/about-us/>
- Bimpson, E. (March 2018). *An Evaluation of Basis Yorkshire's Housing First Pilot*. Leeds Social Sciences Institute, University of Leeds. Retrieved from: <https://basisyorkshire.org.uk/wp-content/uploads/2018/03/Basis-Housing-First-Final-Report-March-2018.pdf>
- Bimpson, E., Reeve, K., Parr, S. (February 11 2020). *Homeless Mothers: Key research findings*. UK Collaborative Centre for Housing Evidence. Sheffield Hallam University.
- Bramley, G., Sosenko, F., Johnsen, S. (2019) *CONNECTED: Gendered Patterns of Severe and Multiple Disadvantage in England*. Herriot-Watt University & DMSS Research.
- Bretherton, J. and Pleave, N (2018) *Women and Rough Sleeping: A Critical Review of Current Research and Methodology*. Centre for Housing Studies, University of York
- Changing Lives. (2020). *COVID-19 Changing Lives, Open Letter for Sexual Violence and Abuse*. Retrieved from: https://www.changing-lives.org.uk/wp-content/uploads/2020/04/COVID-19-Changing-Lives-Open-Letter_Sexual-Violence-and-Abuse-FINAL.pdf
- Corston, J. (2007) *The Corston Report: a review of women with particular vulnerabilities in the criminal justice system*. London: Home Office. Retrieved from: <https://webarchive.nationalarchives.gov.uk/20180207155341/http://www.justice.gov.uk/publications/docs/corston-report-march-2007.pdf>
- CRESR (August 2020) *Value for Money Assessment of WY-FI*. WY-FI
- Crowe, M editor (October 2013) *West Yorkshire Multiple and Complex Needs Project: Research and Evidence Assessment* (DISC)
- Fulfilling Lives. (2020). *Open Letter to the Government: More must be done to protect women experiencing sexual violence and abuse during the COVID-19 outbreak*. Fulfilling Lives: Newcastle and Gateshead. Retrieved from: <http://www.fulfillinglives-ng.org.uk/blog/open-letter-government/>
- Grierson, J (April 27, 2020). *Domestic abuse surge in coronavirus lockdown could have lasting impact, MPs say*. The Guardian. Retrieved from: <https://www.theguardian.com/society/2020/apr/27/domestic-abuse-surge-coronavirus-lockdown-lasting-impact-mps>
- Hawtrey, M. (July/August 2020). *Safeguarding Sanctuary*. DDN News. Drink and Drug News. Retrieved from: <https://view.joomag.com/july-2020/0040304001594630464?short&>
- Homeless Link (2017) *2017 Rough Sleeping Statistics*. Homeless Link
- Leeds City Council (2019) *Homelessness & Rough Sleeping Strategy 2019 – 2022*.
- Lowthian, J (2015). *Vulnerable Women with Multiple Needs: What does the literature tell us about improving outcomes?* Report for WY-FI.
- McNeish, D. & Scott, S (2017). *Invisible Women: consultations with women affected by severe and multiple disadvantage*. DMSS Research.



MEAM. (June 2020). *Flexible Responses During the Coronavirus Crisis: Rapid Evidence Gathering*.

Momplé, A (2013) *TWP Leeds Women's Research Key Findings and Report on TWP Involvement with Big Lottery WY-FI Project* in Crowe ed. (2013).

Rachel Moreton, Dr Joanna Welford, Beth Collinson, Michelle Hansel and Hayley Lamb. (July 2020). *Challenges and Opportunities: Evidence from Fulfilling Lives Partnerships on the Response to the COVID-19 Pandemic*. Community Fund. University of Sheffield. CFE Research.

National Experts Citizen's Group [NECG]. (June 2020). *Themes and Recommendations from the NECG's focus on COVID and System Change*.

NSPCC website <https://www.nspcc.org.uk/preventing-abuse/child-protection-system/parental-substance-alcohol-drug-misuse/>

Office for National Statistics. (November 25, 2019). *Domestic Abuse in England and Wales - Data Tool*. Retrieved from <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/domesticabuseinenglandandwalesdatatool>

Petrillo, M. (2007). The Corston report: A review of women with particular vulnerabilities in the criminal justice system. *Probation Journal*, 54(3), 285-287. doi:10.1177/02645505070540030805

Together Women Project [TWP]. (March 23, 2020). *Together Women Project Research*.

Women's Aid Federation of England. (2019). *Domestic Abuse is a Gendered Crime*. Retrieved from <https://www.womensaid.org.uk/information-support/what-is-domestic-abuse/domestic-abuse-is-a-gendered-crime/>

WY-FI (September 2018) *Prison Research Analysis* WY-FI Project (unpublished)

WY-FI. (August 2019). *Briefing: Impact on Homelessness Services*. WY-FI Project.

WY-FI Data Analysis (September 2019) *Female Sex Workers* WY-FI Project (unpublished)

WY-FI. (June 2020). *Feedback on Services for Women. Telephone Questionnaires*. WY-FI Project.

WY-FI. (June 2020). *Table and Chart for Female Beneficiaries*. WY-FI Project.

WY-FI. (2020). *Women Summary of Issues*. WY-FI Project.

Appendix – 1 – Case Studies

Roxanne's Story

Roxanne was referred to WY-FI from Probation, as there were concerns that she wasn't engaging with services. Roxanne was coming to the end of her probation order and was in temporary accommodation, where she was vulnerable to financial exploitation, theft, and sexual assault. She was a regular user of crack cocaine and alcohol, and had a history of shoplifting.

Roxanne also had untreated bipolar disorder, as well as a number of serious physical health issues which had previously kept her in hospital for almost a year. Her physical ill-health made it hard for Roxanne to get to any appointments. With WY-FI's support, Roxanne has started treatment for her addictions, and is abstinent from drugs and alcohol. Roxanne is now able to attend ongoing medical and dental appointments.

These are gradually improving her overall health and wellbeing. Roxanne is in settled accommodation and is managing her tenancy, a bank account and household bills. Roxanne is no longer involved in the criminal justice system and now has a vision for her future, which includes a stable relationship with her children.

Rachel's Story

Rachel was sexually abused as a child. With no support at the time, Rachel struggled to deal with the trauma and her life gradually deteriorated. By the time she was in her early thirties, Rachel was homeless and sofa-surfing. Her long-term relationship had broken down, she had been addicted to alcohol for 15 years and also addicted to cocaine and ketamine. Rachel was committing domestic violence offences against members of her own family, experiencing suicidal thoughts and suffering with night terrors. Her GP told her she would die before the age of 40 if she continued to drink.

Once Rachel had built a trusting relationship with her WY-FI Multiple Needs Navigator, she committed to her recovery and has successfully detoxed. Rachel is abstinent from alcohol and is reducing her cannabis use. The skills Rachel learnt in her Dialectical Behaviour Therapy (DBT) - a development of Cognitive Behavioural Therapy - help her manage her ongoing suicidal thoughts.

Rachel is now living in affordable housing, receiving the full amount of benefits she is entitled to and hasn't committed an offence for 19 months. She is also rebuilding her relationships with family and friends. The WY-FI Personalisation Fund helped to make Rachel's recovery possible by paying for her removal costs and a cooker. It also paid for her DBT therapy so that this could take place immediately after her detox rather than Rachel being put on a waiting list.

Rachel's story "When WY-FI first started helping me, I was still drinking and sick most of the time. Very suicidal and far too anxious to go anywhere alone. So, the way that I see it, WY-FI and my Navigator have helped to keep me alive, both physically and emotionally. They have incredible understanding of mental health and addiction. WY-FI means the world to me."

Rachel has started writing a book about her experiences of addiction, mental health, sexual trauma and the recovery process. In the longer term, she wants to get back into education and training and would love to work with music.

Sarah's Story

In her own words, Sarah was at rock bottom. She'd been smoking cannabis and using amphetamines for over 20 years and her mental health was deteriorating rapidly. Sarah was also struggling with unresolved grief after losing her horse in a riding accident.

Sarah's living situation was challenging - anti-social behaviour in her neighbourhood meant that she felt trapped in her own home. Sarah had been served with a probation order for her own behaviour and ongoing conflicts meant that she was at risk of re-offending. When Sarah first met WY-FI Navigator Paul, she felt overwhelmed and didn't know where to turn.

Paul supported Sarah to contact Kirklees Housing about the anti-social behaviour. He also helped Sarah address her own behaviour and complete her probation order. Paul introduced Sarah to the Basement Recovery Project and she started getting involved in group activities. Sarah also started attending SMART (Self-Management and Recovery Training) meetings to address her drug and alcohol use. As Sarah's confidence grew, she took up volunteering at The Breakfast Club in Dewsbury, where she's now a valued member of the team.

Paul referred Sarah to Horton Housing and she was able to move away from her old neighbourhood and into new accommodation in Huddersfield. Sarah now feels like she's part of the local community.

Sarah's recovery hasn't been without setbacks - she struggled with delays to her benefit payments whilst setting up a new claim. But with WY-FI's support, Sarah didn't return to old patterns of behaviour. Her mental health is much more stable now that she's abstinent from drugs and alcohol and taking her medication correctly.

Today Sarah says that she's happier than ever, and is looking forward to the future. Sarah hopes to be able to work with young people, supporting them to get involved in more sports and fitness.

Louise's Story

Louise was going through a difficult divorce and went back to live with her parents. She was drinking heavily and on long term incapacity benefits. Louise's relationship with her parents gradually broke down and they asked her to move out. Louise continued to drink heavily and was at risk of being made homeless when she found the Sober Living Project, a Community Links/ WY-FI funded project in Kirklees.

They offered her a place on their rehab programme, as well as a place to stay at their peer-led sober living accommodation - Freedom House. Once settled, Louise began volunteering at The Basement Recovery Project in Huddersfield. And when her rehab was complete, Louise decided that her next step would be to apply for a place on WY-FI's Peer Mentoring course.

Louise loved working and studying, and soon after completing the Peer Mentoring course, she was offered a role at the WY-FI Project in the Calderdale Navigator team. Louise had a small caseload of beneficiaries to begin with, and gradually started lone working.

After six months, Louise successfully applied to be a Community Builder at The Basement Recovery Project. A new job gave Louise the added confidence, as well as the financial stability, to look for her own place to live and move out of shared accommodation.



Louise was awarded a Personalisation Fund payment from Kirklees to help towards the legal costs of her divorce and house sale. Louise also used some of the payment to join a local gym and start improving her health, wellbeing and self-esteem.