

# **Homelessness Task Force Research Series**

## **The Future of Hostels for Homeless People**



**SCOTTISH EXECUTIVE**

# **THE FUTURE OF HOSTELS FOR HOMELESS PEOPLE**

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Scottish Health Feedback

Scottish Executive Central Research Unit  
2001

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## **SUMMARY**

### **INTRODUCTION AND BACKGROUND**

1. The overall purpose of the research was to review the role, appropriateness and effectiveness of hostel provision in tackling homelessness and in meeting the needs of homeless people. It aimed to make recommendations for future policy and practice and to inform a major hostel closure and reprovisioning programme in Glasgow. A key influence on the momentum for this research was the Scottish Executive's commitment to address homelessness and related support issues more effectively, to ensure the end of rough sleeping and to support the phasing out of large-scale outmoded hostel provision in Glasgow. In the course of the research, the Scottish Executive endorsed and published the report of the Glasgow Street Homelessness Review Team 'Helping Homeless People' (Scottish Executive, 2000).

### **OBJECTIVES AND METHODOLOGY**

2. The key objectives of the research were to consider:

- the historic and current characteristics and role of hostels in Scotland
- the views and preferences of hostel residents on hostels and future housing and support
- the views of homeless people, who were currently not using hostels, on the hostels
- the views of staff involved in managing hostels and related services
- the evidence on what contributes to the effectiveness of different types of hostels

3. The research methods employed were as follows:

*Literature review:* This was conducted to enable a framework to be established for defining different types and functions of hostels and to inform consideration of 'what works'.

*Compiling an inventory of hostel provision and resident interviews:* Following an inventory of hostels in Scotland, an interview programme was conducted with hostel residents in five local authority areas in Scotland: Aberdeen; Fife; Glasgow; North Ayrshire and Perth and Kinross. The interview sample was structured broadly to represent the overall distribution of hostel residents at a snapshot in time, in terms of characteristics such as gender, age and types of hostels. A total of 203 individual interviews were carried out, with just over half of these in Glasgow. Hereafter, the four areas other than Glasgow are generally referred to as 'other areas'. A standard questionnaire was applied, although respondents were additionally invited to make their own comments on provision.

*Interviews with non-hostel users:* Seventeen homeless people who were in contact with outreach workers and/or using homelessness day services, were interviewed

in Glasgow and Perth to hear their views on hostels and related services. Almost all were sleeping rough and all had recent experience of hostel living

*Interviews with hostel and related support staff:* The research team interviewed the managers of all the hostels sampled, as well as other staff providing support and health care services to hostel residents in the five districts. A focus group involving hostel staff was held in each area. A substantial interview programme was also conducted with policy makers and planners interested in the effectiveness of hostels and related homelessness services.

## MAIN FINDINGS

### Provision of hostel accommodation

4. Hostels currently represent a key resource in the growing stock of temporary accommodation used by local authorities for homeless people, with other major forms being local authority house or flat lets (furnished or unfurnished) and private sector bed and breakfast hotels. Other types of temporary accommodation include women's refuges, which may or may not be hostels, and in some rural areas faced by increasing homelessness and a scarce housing supply, in recent years mobile homes and caravans have been used. Overall, the inventory carried out for this research identified 126 hostels in Scotland with an estimated 3,707 places. This included provision mainly for single homeless people in Glasgow, and outside Glasgow, it included provision for a mix of families and single people. Of these, the very largest hostels were found in Glasgow, with the city being the only area in Scotland to have hostels with 100 plus places/bedspaces. Outside Glasgow however, there were some 379 places identified as located in medium-sized hostels with 50-99 places, comprising 55% of all Scottish provision in this size band.

### Profile of residents interviewed

5. Some of the key characteristics of the residents interviewed are outlined below:

*Gender:* In the Glasgow study sample, men outnumbered women 4 to one, while in the other areas covered the spread was more even. Outside Glasgow there was more hostel provision accommodating both households with children and single people, while in Glasgow the hostels predominantly cater for single homeless men.

*Age and ethnic origin:* In the Glasgow sample 32% of respondents were under 25 while this rose to 51% in the areas outside Glasgow. No individuals of ethnic minority origin were identified and/or willing to be interviewed.

*Patterns of hostel use:* Some distinct patterns emerged between Glasgow and the other areas, with hostels in other areas more generally having a clearer temporary accommodation function. In Glasgow, 40% of residents had been in their current accommodation less than 3 months, compared to 64% elsewhere. Glasgow therefore has more residents who have been in hostels long-term, with a

significantly higher number of people surveyed who had been in the hostel for over 2 years - over one fifth (22%) of Glasgow residents had done so, compared with only 3% in other areas. This longer-stay hostel use pattern in Glasgow was confirmed by the finding that 31% of Glasgow respondents had been in another hostel in Glasgow before moving into their current one, compared to 8% in the other areas. (Chapter Two)

*Health and support needs:* The greatest incidence of health issues identified by hostel residents were physical health problems, with 77% of all respondents in other areas reporting such problems, compared with only 39% of Glasgow respondents. Respondents outside Glasgow also reported higher instances of addiction problems - 23% of respondents from outwith Glasgow, compared to 8% of Glasgow respondents. It was notable that hostel staff and support providers identified health issues as being more serious than did the residents themselves, with for example, staff in most areas reporting that drug use was significant and posed some key challenges for management in the hostels. There were indications, however, that drug-related problems have gained a higher profile and attention than alcohol dependence or mental health problems in recent years and that this balance needs redressed if services are to respond effectively to needs. In larger, generalist hostels, hostel staff reported moving towards increasing joint work with support and health providers in addressing residents' support and health needs. Concerns highlighted by staff included that some very vulnerable people's needs may be largely neglected and that hostel staff are inadequately trained or resourced to respond effectively to complex or multiple needs (Chapters Two and Five).

*Future accommodation preferences:* Most people's first future housing preference was to have a house of their own, although this preference was more strongly evident in the areas other than Glasgow (80% compared to 67%). However in considering a broad range of move-on options, those identified as acceptable included staying in the current hostel (11% in Glasgow compared with 6% in other areas). Other acceptable options included sharing arrangements or housing coupled with support services. (Chapter Three ).

*Help with moving on and resettlement:* Dissatisfaction with information and advice about housing options was noted everywhere but was highest in Glasgow with 70% of respondents reporting they were dissatisfied compared with 50% in the other areas. In larger hostels staff reported that they either had no time to carry out detailed casework with residents, or that they had no remit to do this 'in-house' and that hostel staff provided support informally in many hostels. In the main, hostel residents saw a need for assistance with rehousing and settlement, ranging across money and debt management, access to a deposit, practical help to set up a home and to sustain a tenancy, including visiting support (such as befriending) and home care for some people (Chapter Three).

## **Views on hostel life**

6. The interviews explored a number of themes relating to residents' views on hostel life:

*Overall satisfaction:* On the surface at least there was a notably high level of general satisfaction expressed about hostels across the Scottish local authority areas studied, with a marginally higher level of general 'satisfaction' expressed in areas outside Glasgow. In Glasgow nine out of ten saw the hostel as a "good place to live" (42%) or "alright" (48%), while 11% of the residents interviewed described the hostel as "a bad place to be". Overall in the 4 other areas covered 95% of respondents were generally satisfied with the hostel, with over half (52%) describing their hostel as "a good place to be", 43% describing the hostel as "OK/alright"; and only 4% saying their hostel was a "bad place to be".

*Specific views on the hostels:* When respondents were asked to comment on particular aspects of hostel provision, facilities and services, some notable differences between types of provision and areas of dissatisfaction emerged. Clear distinctions emerged between large-scale/medium-sized hostels and smaller, more specialist accommodation with satisfaction noticeably higher in the smaller hostels. This was constant over a range of issues such as toilet and bathing facilities, food provided and the provision of leisure facilities such as TV rooms/lounges and other facilities on offer including cooking and washing facilities (Chapter Three). In the main, staff were more critical than residents of physical aspects, although there were some very telling comments by residents on poor standards. The poorest quality hostel accommodation in terms of physical condition was found in the commercial sector (Chapters Three and Five).

*Social aspects of the hostels and resident mix:* There was ambivalence about the social life in hostels, with aspects of communal living and companionship being highly valued by some residents, while for others the social life was a source of complaint. There was consistent dissatisfaction expressed about the impact of sharing facilities with a mix of residents in terms of the range of age groups and needs accommodated, with 27% of respondents in Glasgow and 19% in the other areas dissatisfied with this aspect of hostel life (Chapter Three). Staff in medium and large-scale hostels also consistently identified the mix of residents and the lack of differentiation of people's needs as a significant problem in hostels. (Chapter Five). In some areas the location of hostels was seen as inconvenient for carrying out daily living activities, access to services and maintaining social contacts, while there was a high level of satisfaction with the location of hostels that were centrally located and enabled ease of transport (Chapter Three).

*Institutionalism, regulation and rules:* Dislikes about hostels centred strongly on aspects of hostel regulation which restricted flexibility or infringed on privacy and personal dignity. The matter of hostel rules and their implementation was a clear focus of criticism. Issues highlighted by residents included that some rules were seen as being too rigid, such as restrictions on visitors, curfews and unannounced room checks, and that at times the rules were seen to be applied inconsistently. These aspects of hostel living were disliked across the different types of hostels.

*Safety and security:* The vast majority of respondents said they felt safe staying in hostels. A higher proportion of respondents in the 4 areas outside Glasgow appeared to feel safe “all of the time” - 63%, compared with 56% in Glasgow. On the other hand, 40% of Glasgow respondents and 29% from other areas felt safe “most of the time”. A small minority of residents did not feel safe any of the time. A notably high proportion of younger people in specialist provision reported they felt safe (Chapter Three).

*Support provided by hostel staff or other organisations providing support:* Overall, a high percentage of respondents reported that they received no help; 49% in Glasgow reported receiving no help compared to 31% in the other areas. A similar percentage of respondents in Glasgow reported receiving no help from visiting professionals or volunteers while 55% in hostels in other areas responded negatively to this question. Both hostel staff and other staff providing services to hostel residents believed that providing support was not part of the remit of staff in the very large hostels, who did the best they could under the circumstances. Overall, it appeared that hostel residents were not always aware of the range of potential sources of help from relevant social work, health and voluntary services, whether in relation to resettlement advice and assistance or to addressing particular needs. (Chapters 3 and 6).

*User rights, involvement and participation:* Hostel residents have limited housing rights, and there were indications from this research that they are unclear about the rights they may or may not have. Formal occupancy agreements, which specify rights and responsibilities were mainly to be found in the smaller, specialist and newer hostels, and this situation is currently being addressed through Subordinate Legislation to the new Housing Bill. User participation is underdeveloped in the hostel sector, although this has received greater attention by providers of smaller, more specialist accommodation. The main thrust of participation strategies has been to involve users individually in the processes of needs assessment and planning to meet their future housing and support needs. This research found few examples of positive and creative good practice in user involvement in the management of hostels and related support services. Overall there appears to have been only limited progress in shifting the balance of power by involving hostel residents collectively in decision making and planning in relation to the management and facilities on offer in hostels. Moreover, there is little evidence to date that service users are being properly informed about or consulted on reprovisioning (Chapter Five), yet a significant number of respondents indicated they would welcome greater involvement and having a say in relation to all aspects of hostel living (Chapters Three and Four).

## **Non-hostel use**

7. The majority of the 17 people consulted in this research who were mainly sleeping rough and not using the hostels, were not sleeping rough as a matter of choice. They were doing so because they were debarred from entering hostels, or because they felt they could not take up the offer of a place in a particular hostel that was seen as an unsafe environment for them personally. Overall they saw themselves as having no real accommodation options. They were predominantly male, but included couples in

Glasgow who felt excluded because they could not obtain accommodation where they could be together. While they recognised the behaviours and problems leading to exclusion, including some that were addiction related, their views on hostel life emphasised its institutional character, its rigidity and sometimes that the hostel system was seen as unfair and unforgiving. They reported that exclusion from one hostel in an area can lead to exclusion from all (Chapter Four). This reflected the shift away from the direct access function of hostels, given the trend towards centralised gate-keeping of access to hostel places in some areas (Chapter Five).

### **Improvements to hostels suggested by service users**

8. Potential areas for improvements in hostel accommodation identified by respondents were:

- better quality physical environment, better facilities and accessibility standards
- providing more specialist hostels, to cater for people with particular needs such as older and younger people and people with mental health problem or addictions
- increased flexibility in the management of hostels
- making hostels more humane and supportive by improving staff attitudes and taking a more holistic approach to meeting need
- providing better information about rights and options and support to move on from hostels.

9. Broadly, agency and staff views on hostel improvements mirrored those of residents. There was, however, emphasis placed by staff on the key role of needs assessment and on the need for more and improved joint work at both strategic and operational level. Additionally, staff stressed the case for increased training opportunities and it was evident that particular training topics were seen as highly relevant and beneficial, such as managing difficult behaviour or mental health issues.

### **KEY RECOMMENDATIONS - THE FUTURE OF HOSTELS**

10. The indications from this research are that hostels will continue to play a significant role in addressing homelessness, at least in the next decade, and it must be noted that a significant minority of residents expressed a preference for hostel living. Planners and providers should ensure that hostels in the future:

- Have a clearer role and more explicit objectives in addressing homelessness.
- Play a defined clear role at the level of local authority areas in joint strategies for resolving homelessness, which aim to provide through partnerships a range of good quality temporary accommodation, an appropriate and imaginative range of move-on accommodation and support, and opportunities for social inclusion.
- Prevent homelessness and promote resettlement within local systems, which ensure there is:
  - adequate temporary accommodation to meet a wide range of needs including currently unmet needs such as rehabilitation and detoxification facilities

- information and advice services in place to inform hostel residents about accommodation and support options
- sufficient access to permanent tenancies
- positive partnerships to meet needs and which develop integrated community-based approaches to settlement
- integrated good quality support services
- resettlement and outreach support
- access opportunities to appropriate ordinary housing and housing with support.
- Offer a decent standard of accommodation that at the very least meets rights to basic services but also ensures appropriate standards to meet privacy and dignity and accessibility. The design of new hostels should be as small in scale as is feasible.
- Maximise occupancy rights including periods of notice.
- Respect individual rights and encourage service user involvement and participation so that homeless people and those who have experienced homelessness can have a say.
- Recognise needs for independent advocacy.
- Recognise the power of hostel staff to make an important difference to homeless people who may be at an extremely vulnerable point in their lives. Such recognition requires that relevant training is provided and accessible to staff.
- Ensure that assessment procedures and resettlement support and assistance are holistic in approach and enable a positive and ongoing response to people's changing needs.
- Establish and sustain the joint work required to assist people with multiple and complex needs and ensure that hostel residents with community care needs gain access to the assessment and support they require.
- Collaborate with planners and providers to monitor and address exclusions and rotation in the system, reviewing how best to enable direct access and appropriate support for people sleeping rough.
- Address broader aspects of inclusion through links with training, employment and education services.
- Develop a service ethos which is person centred.

### **Hostel closures, reprovisioning and improvements**

11. This research focused in some detail on the context of the reprovisioning strategy in Glasgow, as well as on reprovisioning and developments elsewhere (Appendix Four). Overall, this report's findings and recommendations are relevant to the future of hostel provision throughout Scotland, but at the same time may have implications for the major reprovisioning and resettlement programme in Glasgow. Recommendations with specific relevance to the Glasgow programme draw on the views of hostel residents and of hostel and related staff in the city. These stress the need for two specific strategies - an information and advice strategy and a consultation and involvement strategy - to be developed at a very early stage in the reprovisioning programme.

## **Strategic and longer-term issues for government agencies**

12. The research findings indicated a number of issues on which strategic consideration is needed across policy divides both within the Scottish Executive and at UK government level. These include:

- Funding implications (particularly revenue funding) for the development and sustainability of replacement hostel and supported accommodation.
- Cost implications of the additional responsibilities on local authorities for homelessness planning, housing advice services and temporary accommodation under the housing legislation.
- The development of a framework of rights and good practice through guidance on and monitoring of quality standards relevant to hostels.
- The potential for targeted financial assistance to enable service users to have a say.
- Additional good practice guidance on how the health and support needs of some homeless people and hostel residents can best be met.
- The development of a framework for a more flexible and positive approach to working with people who continue to use drugs.
- The impact on hostel residents or tenants who take up training and employment in terms of their ability to afford and sustain accommodation.
- The case for further research on temporary accommodation to inform policy and practice.

13. While the role of hostels will persist, current policy and reprovisioning trends mean that the volume of hostel provision will and should decline for a number of reasons, including:

- The trend towards meeting good practice through developing smaller hostels and hostels that are targeted to meet the needs of particular groups such as women and young people.
- The attempt to avoid the stigma of homelessness and hostel living by meeting the support and health needs of vulnerable homeless people through various forms of housing and support and of supported accommodation - which are unlikely to be termed 'hostels' in the future. Increasingly, supported accommodation targeted to resolve and prevent homelessness will include smaller accommodation units, small group homes and shared houses and ordinary integrated housing coupled with support arrangements.
- There will be a continuing thrust towards improvement in the standards of existing hostels and of new hostel specifications. In parallel, the logic of current policy means that the poorest quality provision will be replaced.

14. The changes will be most marked in the balance and nature of temporary accommodation in Glasgow where a major reprovisioning programme is in train. But trends such as those towards smaller-scale hostels and alternative types of provision, in Glasgow and elsewhere, must be seen in the context of local authorities' increased responsibilities for providing temporary accommodation under the new Housing Bill, in a period characterised by persistent high levels of homelessness. We may therefore see some momentum towards a growth in small-scale hostels providing temporary accommodation in different parts of Scotland over the next decade. Together with the

requirement for additional temporary accommodation, resource implications to be addressed by the Scottish Executive and the Homelessness Task Force, are likely to exceed the new resources recently allocated.

## **CHAPTER ONE POLICY AND RESEARCH BACKGROUND**

1.1 This first chapter of the report establishes the foundation for exploring the views of key stakeholders in hostel provision for homeless people in Scotland. It introduces the research overall, explores the policy background and key developments affecting hostel provision and related services, clarifies the definition of hostel applied in this research and then summarises key findings from the inventory that illustrate patterns of hostel provision in Scotland.

### **INTRODUCTION AND RESEARCH BACKGROUND**

1.2 This research was jointly funded by The Scottish Executive and Scottish Homes. It was commissioned in late September 2000 as part of the Homelessness Task Force's research programme focused on 'what works' in tackling homelessness. In addition to commissioning research, the Task Force is considering the rights of hostel residents and is developing a strategic agenda for alleviating homelessness in Scotland.

1.3 The research took place against a background of increasing homelessness in Scotland, a rise in single homelessness in particular, the progress through Parliament of a new Housing Bill, and the announcement of the Scottish Executive's support for the policy to decommission and reprovision the outstanding large-scale hostel provision in Glasgow. During the course of the research the Glasgow Review Team published its 'Review of Street Homelessness', (November 2000).

#### **Aims and objectives of the research**

1.4 The overall aim of the study was to inform policy and practice by considering the current and future role of hostels and related services for homeless people, with the central focus of the research being on the hostel sector. Given the notable reliance on large-scale hostels to accommodate single homeless people in Glasgow, and the policy commitment to close these establishments and develop replacement services, the research has had a distinctive focus on Glasgow, while also considering hostel provision across Scotland. The research sought to:

- take account of homeless people's experience of hostel living and their preferences including those of homeless people not currently using hostels
- take account of the views of staff connected with hostels, including those providing health and support services
- clarify and review the role, appropriateness and effectiveness of hostel provision in meeting needs.

#### **The research programme and methods**

1.5 While the research brief emphasised its interest in the future role of hostels in meeting the needs of homeless people, the first priority was to discover more about the provision and role of hostels in Scotland today. To that end, eight key tasks were progressed in the research:

1) To review the literature on hostels for single homeless people

A diverse body of literature on homelessness was examined to clarify:

- the definition of ‘hostel’
- the role of hostels in addressing the needs of homeless people
- the impact of wider policy developments such as the thrust towards care in the community
- homeless people’s and professionals’ views on hostel living
- reasons for the non-use of hostels, including hidden homelessness and rough sleeping.

2) To agree a definition of hostels for homeless people:

This task was critical in setting the research framework, although it was problematic given the multiple terms now used to describe residential services for homeless people. The operational definition adopted for the purpose of this research is given later in this chapter.

3) Inventory of hostels for homeless people:

One key task was to develop baseline information on hostel provision in Scotland and this was conducted by Scottish Health Feedback, initially to inform the sampling process for the residents’ survey. The aim was to establish a databank on hostel provision covering a number of key variables to enable the sample to be stratified. In the event, both the timescale of the research and the response rate required the sample to be constructed by drawing on information supplied by other sources.

4) To construct a framework classifying functions and aims:

Building on the first three tasks, and aiming to cover the complexity and variety of hostels for homeless people, a framework was developed to clarify the functions and purposes of hostels for homeless people and to review what contributes to effectiveness in meeting these aims (See Appendices One and Two).

5) Drawing the samples of hostels and hostel residents and the interview programme:

Given the extensive reprovisioning and resettlement strategy planned for Glasgow, the research has focused on Glasgow in some depth. Four additional local authority areas were selected as case study areas: namely Aberdeen, Fife, North Ayrshire and Perth and Kinross. Hereafter, these additional local authority areas are generally referred to as ‘other areas’. The aim was to reflect an urban and rural spread and the varying roles and types of hostel provision in different districts.

The hostel residents’ interview programme was conducted with 203 hostel residents between November 2000 and January 2001 by Scottish Health Feedback. 103 interviews were carried out in Glasgow (just over 50% of the total), with the remainder conducted in the four other districts.

6) Interview programme with service providers and policy makers:

A programme of interviews was conducted in parallel with hostel managers and staff. This explored hostel characteristics, organisational policies, management systems and procedures and perceived issues in the hostels. Other key housing officials and relevant support and health providers were consulted about the effectiveness of different types of hostels and views were also sought on patterns of non-use of hostels.

7) Seeking the views of non-users of hostels:

A mixture of individual interviews and structured small group discussions were held with homeless people who were currently not using hostels for different reasons, both in Glasgow and in Perth. Contact was made through links with day centres, outreach services and advocacy organisations. The aim was to represent the views of people sleeping rough, including women, young people and those who had been in care or institutions. In the event, the majority of those reached were men, however a group discussion was held with street workers whose clients include homeless women.

8) Analysing and assessing the future role of hostels:

The fieldwork for our research was completed in February 2001. The thrust of the analysis aimed to review the roles of hostels for homeless people, the types of accommodation and support provided, how appropriately and effectively these meet service users' preferences and aspirations, and the roles that particular types of hostels may and should play in the future. This required residents' and non-users' future accommodation preferences to be reviewed, a framework for classifying hostel aims and objectives to be developed, and conclusions to be reached about effectiveness in relation to different aims.

## POLICY AND DEVELOPMENTS AFFECTING THE ROLE OF HOSTELS

### **The historic use of hostels**

1.6 Hostel provision has played a long-standing role in accommodating homeless people, with the various forms of provision often being segregated and stigmatised. Throughout the 20<sup>th</sup> century the regime of traditional hostels reflected perceptions of single homeless people as feckless and unsettled and the denial that homelessness was a housing problem (Lowe 1997). The term 'traditional hostels' is used in this study to refer to hostels providing accommodation for homeless people, that may vary in scale, but are almost always institutional in design, particularly in respect of communal facilities such as eating and sitting areas, and with corridors leading to bed-spaces or accommodation, which may be in shared rooms or in bedrooms (sometimes very small or cubicle-like) and shared baths and toilet facilities. Through time such provision has commonly been segregated and stigmatised, homeless families were often split by gender within them, and at times children were taken into care simply because of homelessness. Historical types of hostel accommodation have included:

- Commercial lodging houses or hostels developed by charitable and voluntary organisations such as the Salvation Army, from the 19th century onwards.

- Workhouses managed by local authorities under the Poor Law between 1772 and 1948, the management of which was often contracted to private agencies. Those termed ‘vagrants’ were often accommodated separately in casual wards or night asylums.
- Resettlement units providing short-stay accommodation for the ‘unsettled’, set up under the National Assistance Act, 1948 by the National Assistance Board, which became the Department of Health and Social Security after abolition of the Poor Laws in 1948.
- Between 1948 and 1977, hostels were established by local authority welfare departments to provide temporary accommodation while statutory homelessness duties were being discharged (Robson et al, 1996).

1.7 The introduction of the Homeless Person’s Act in 1977 brought new rights to permanent accommodation for households with children, provided they were not found to be ‘intentionally homeless’. Single people were denied the right to permanent accommodation unless they were deemed to be in priority need, due to assessed vulnerability because of old age, mental health, physical disability, learning disability or ‘other special reasons’. Modern hostels therefore mainly accommodate single homeless people although hostels are also used on a temporary basis to accommodate households including families, assessed as being in priority need under the homelessness legislation.

### **Increases in homelessness and in single homelessness**

1.8 In spite of measures to give some rights to homeless people, the rise in homelessness is well recognised today as a serious social problem demanding policy attention and multi-agency action in Scotland, just as elsewhere in the United Kingdom, Europe and the United States. The growth has been sharpest for single people and young people. Homelessness applications in Scotland increased overall by 83% over the decade from 1988/89 to 1998/99, when a total of 45,700 applications were made to Scottish local authorities, the highest level since records began. (Statistical Bulletin: Housing Series: HSG/2000/5).

1.9 In 1998-99, 62% of all applicants were single people, although the percentage varied between 82% of all applicants in Glasgow and 31% in Perth and Kinross. Of total applications from single homeless people:

- 10% were under 18 years
- 18% were between 18 and 24 years
- 31% were 25 years and over and under retirement age
- 3% were retirement age or over.

(Scottish Executive, Statistical Bulletin, HSG/2000/5)

### **A temporary accommodation function**

1.10 This research is concerned with exploring the purposes and functions served by hostel provision. Today, hostels represent one form of temporary accommodation for homeless people, with the others being bed and breakfast hotels, designated local authority lets and temporary or transitional supported accommodation. Overall, the

Scottish Executive reports a major growth in the use of temporary accommodation by local authorities in Scotland under the Homeless Persons Legislation, increasing from 1,602 households in 1989 to 4,361 in 1999. By 31 March 2000 there was a further 2% growth. One trend in the provision of temporary accommodation has been an increased reliance on the use of hostel accommodation over the last decade. Other trends are outlined below:

- Most of the temporary accommodation under the homelessness legislation has been provided in local authority dwellings, however this sector decreased proportionately over the past decade, from 53% of temporary accommodation provided in 1989 to 45% in 1999, possibly reflecting the general contraction of local authority stock as a result of the right to buy and stock transfers.
- The proportionate use of bed and breakfast has remained around the same - 18% in 1989, compared with 17% in 1999 - although the high-level use of bed and breakfast in that year appears to reflect the significant increase in the use of bed and breakfast in Fife.
- The proportion of households accommodated in hostel places increased in parallel, from 21% in 1989 to 37% in 1999 (Scottish Executive, Statistical Bulletin, HSG/2000/5).

1.11 These figures must be interpreted with some caution however, as the use of hostels as temporary accommodation for single homeless people under the legislation appears to have taken place mainly in Glasgow. In other areas it would seem that single homeless people may be more likely to gain direct access to hostels and so are less likely to appear in the homelessness statistics. However, in areas outwith Glasgow, hostel accommodation is also used as a significant resource for temporarily accommodating priority homeless applicants, including families.

### **The persistent role of hostels in responding to escalating homelessness**

1.12 While the policy thrust overall has been to phase out large hostels, their development persisted in the 1970's and 1980's, so that our use of the term 'traditional hostels' is not confined to obsolescent Victorian or Edwardian establishments. Glasgow City Council's 4 largest hostels, each with approximately 250 beds, were built in the 1970's, initially aiming to cater for itinerant workers, but then becoming a key resource in the response to increasing homelessness amongst single people.

1.13 As indicated above, this reliance on hostel provision can be seen partly as a strategic response, aiming to develop alternatives to the use of costly and substandard bed and breakfast accommodation for accommodating homeless people. Local authorities were positively encouraged by central government to reduce their reliance on bed and breakfast as temporary accommodation for homeless people, and between 1991/2 and 1993/4 the (then) Scottish Office made available £29 million additional capital resources by way of borrowing consents specifically to tackle homelessness. The criteria issued for bids emphasised the need for alternative accommodation for young single people and schemes involving furnished tenancies or supported hostels were encouraged. Of the projects funded under this initiative, 13% were in accommodation defined as a hostel, provided either from within local authorities' own stock, or property which had been purchased (Currie and Pawson, 1996).

1.14 Throughout the 1990's, a number of authorities - the 5 case study areas for this research - developed new hostels or accommodation units as temporary accommodation for homeless people, including those in priority need. Then, in August 2000 a further £5 million was allocated to councils in Scotland to fund alternatives to bed and breakfast for homeless people, particularly families. Services being developed under this initiative in urban areas include 100 supported accommodation places in Edinburgh, a Homeless Families Support Team in Glasgow and supported tenancies for young people who had been in care in Stirling. Rural developments include temporary furnished accommodation and supported tenancies for young single people in rural areas like Argyll and Bute, Fife, Dumfries and Galloway, Highland and Aberdeenshire. However, in spite of the additional resources allocated since the early 1990's to developing alternatives to bed and breakfast, a number of local authorities have been unable to avoid using bed and breakfast (Currie, 2001). Moreover, it is probable that some of the alternatives to bed and breakfast currently planned or under development may be in the form of hostels.

1.15 What can be detected then is a dual thrust in policy on hostels. One dominant policy strand has been to close and replace larger-scale, institutional, outmoded services, while the other recognises the role of hostels in providing temporary accommodation, with the aim of providing a less costly and higher standard alternative to the bed and breakfast sector.

### **De-institutionalisation, reprovisioning and alternatives to hostels**

1.16 Recognition of the inappropriateness of large institutional forms of hostels was reflected in central government's 1985 policy to replace the reception or resettlement centres run by the (then) Department of Health and Social Security, with smaller less institutional accommodation to be managed by local authorities or voluntary agencies. (Anderson et al, 1993). In fact the closure of all resettlement centres was never completed, and in 1992 plans were announced to refurbish those resettlement units in reasonably good physical condition and transfer them to the voluntary sector. It was only in the early 1990's that agreement was reached for a replacement strategy to close Scotland's only resettlement unit in Bishopbriggs in 1996.

1.17 The wider trend towards the reduction or down-sizing in hostel places has been reflected in Scotland since the 1970's. In the 1980's this policy thrust was facilitated through resettlement programmes, or rehousing and support strategies, notably in Glasgow where 2,000 people were rehoused between 1980 and 1987 via a partnership between housing and social work departments. Similar rehousing and support strategies followed the example of Glasgow and Manchester - for example, in Leeds, London, Aberdeen, Edinburgh and Aberdeen (Dant and Deacon, 1989). Overall in Glasgow, 550 hostel places were closed in the 1980's, a large nightshelter was closed in the 1990's and a large-scale, formerly privately managed hostel is soon to be closed. Closures and down-sizing represent a continuing trend. As at 2000, the Glasgow City Council, for example, plans to close around 1,300 bedspaces by 2006 and the first hostel closure (240 beds) is planned to take place in 2002. In Edinburgh, there has been approximately a 31% reduction in hostel places from 337 in 1997 to 232 at October 2000.

1.18 The impact of such hostel contractions has generated considerable debate. Reviews of hostel replacement strategies have generally stressed that large-scale hostels

should be closed and that ordinary housing solutions are appropriate and viable (Dant and Deacon, 1989, Thomson and Naumann, 1978). Some commentators have emphasised, however, that it should not be assumed that “people should inevitably move from hostels” as some may wish to live communally (Drake et al, 1982). More recent debates in the capital cities of Edinburgh and London, point to the links between hostel bed closures, problematic access to emergency accommodation and a tendency towards increased use of 24-hour services, including night shelters (Edinburgh Street Homelessness Team, 2001). Of current import are the planning implications of the reprovisioning programme in Glasgow, where it will be necessary to project future housing and support service requirements, both for the 1,000 or so current hostel residents who may be displaced under the planned closures, and for homeless people in the future.

1.19 Other urban and rural areas in Scotland reflect a similar momentum towards changing the structure of homelessness services, in a period characterised by growing homelessness and new legislative requirements. As a result, more systematic and integrated local planning will become increasingly important to address homelessness effectively.

1.20 Both in policy and in practice de-institutionalisation can be seen as a trend in homelessness provision. Alternatives to traditional institutional hostel provision have been increasingly developed throughout the United Kingdom and Europe in the community care field, often involving formal partnerships or structured collaboration between housing and care providers and joint work between resettlement services. Examples across Scotland of alternatives to traditional hostel provision include:

- Small specialist transitional supported accommodation, usually in a recognisable unit, such as Stopovers for young people, vulnerable homeless women, services for people with mental health difficulties, some women's refuges. Note that by supported accommodation we are referring to “housing designated for the specific purpose of accommodating individuals who need some form of support in order to live independently in the community” (SCOTSPEN, 1999).
- Increasing diversity in the range of supported accommodation services, linking accommodation and support services to provide medium or long-stay and move-on-accommodation for homeless people with particular needs, including:
  - older homeless people
  - young homeless people who have experienced abuse
  - young people seeking access to training and employment. Such provision was initially developed in the form of relatively large-scale hostels, but there are increasing examples of more flexible models
  - people who have been homeless long-term and who may have additional problems such as substance dependence
  - homeless people with HIV/Aids.
- Ordinary housing coupled with support services, usually in confused tenancy arrangements, for example where the accommodation is let to the support provider, whether this is the local social work department or a voluntary agency.

- Tenancies in ordinary housing with support provided to tenants with particular needs by social work teams or voluntary agencies, and sometimes, volunteers - sometimes referred to as floating support.

1.21 Just as in the case of hostels, such provision reflects a diversity of characteristics, including the size and ethos of services, the extent to which they are integrated with the environment of local communities and the extent to which they present as ‘homely’ rather than ‘institutional’

1.22 Regarding ‘ordinary housing’ alternatives to hostel provision, there is a wide spectrum of support services that may be on offer to vulnerable people living in independent accommodation. This may include:

- practical assistance with setting up home, such as housing and benefits advice and ‘starter packs’, including furnishings and other household goods.
- outreach and visiting support services in their own homes
- access to centre-based ‘drop-in’ advice and support services
- specialist advice and counselling on particular issues such as mental health problems or drug or alcohol dependence
- access to support focused on personal development, such as confidence-building programmes
- advice on education, training and supported employment services
- supported training and employment opportunities

1.23 The movement towards the de-institutionalisation of hostels is broadly consistent with the thrust of community care policy and practice during the 1990’s. A central argument of this research, therefore, is that homelessness services planning might usefully draw on lessons from the community care experience - particularly as there is an important interface between homelessness and community care issues and because vulnerable homeless people should have the same rights to access care in the community as people who are housed and settled in communities.

1.24 Looking at the connections between community care and homelessness, so far we have focused on the positive side in terms of how care in the community policy has sought to replace large-scale hospitals and care establishments with ordinary living and community-based support services. There are however some indications of a downside. The momentum towards community care has also been associated with a trend towards earlier hospital discharge times, and sometimes with poorly implemented discharge strategies, which have been seen reflected in vulnerability and health problems amongst homeless people. Harvey comments that across Europe, “De-institutionalisation is an important element in homelessness” (Harvey, 1999).

1.25 The nature of the connection between institutional closures, discharges and homelessness is unclear, although most homelessness providers can point to evidence of poor practice in terms of unplanned discharges from hospitals (particularly from acute sector wards), from care homes or offenders’ establishments. Where this happens structured discharge planning arrangements may be in place, but not properly implemented. Far more significant evidenced patterns are that follow-on or resettlement arrangements have broken down, or that people are discharged inappropriately back to

hostels after a hospital admission, particularly given a contracting short-stay hospital sector (Fisher and Collins, 1993).

1.26 Another area where there is common experience between community care and homelessness reprovisioning relates to the impact of community opposition to new services. In many areas agencies have faced intense and vehement opposition to the development of small-scale hostels or supported accommodation services. Such NIMBY ('not in my backyard') experiences have at times prevented services being established, or delayed the granting of planning approval, whether in relation to new build or converted developments. In developing new services therefore, it makes sense for homelessness agencies to consider their strategies for local consultation. Experience indicates that ordinary housing with outreach support services are less likely to generate development delays and problems of community integration .

1.27 Looking at the lessons that homelessness planning might gain from the community care experience one issue relates to the role of advocacy. It is notable that in structured hospital reprovisioning programmes and in services developed for community care client groups, good practice guidance stresses that service users who are vulnerable, such as people who are institutionalised and demoralised, should have access to independent advocacy. The Scottish Executive has produced guidance on this "Independent Advocacy: A Guide for Commissioners" and states:

*"It is vital that people who, for whatever reason, are unable to put forward their own case are helped to find a voice to represent their interests and their views, and to ensure that they get the services they need"* (Scottish Executive, 2000)

1.28 To date, this does not appear to have been reflected in hostel reprovisioning programmes, such as the Resettlement Agency's closure programme in the 1980's and 1990's..

### **Hostels and the rough sleeper initiative (RSI)**

1.29 The increased incidence and visibility of rough sleeping led to the establishment in 1990 of phase one of the Single Homelessness Initiative, now known as the 'Rough Sleepers Initiative' or RSI, to address rough sleeping in London, with funding of some £100 million over the initial 3-year period. This was to finance services such as hostel places, outreach work, move-on accommodation and resettlement services. Subsequent phases were announced in 1993 and 1996. The latter phase also saw extension of the initiative to other areas in England and, in 1997, to Scotland. Evaluations of the first 2 phases in London have been published (Randall and Brown, 1996) and in Scotland an interim evaluation has been conducted (Yanetta et al, 1999).

1.30 The review of the Scottish RSI found that a range of emergency and longer-term housing options are required to meet the varying needs of RSI clients. Many of the barriers faced by RSI agencies trying to assist rough sleepers were identified as being outwith the control of the agencies themselves or outwith the scope of the RSI. Problems included blocks to accessing non-RSI accommodation, restrictive housing management and community care practices, and the lack of access to specialist alcohol and drug

detoxification/rehabilitation facilities. Where projects experienced difficulties in meeting the needs of people sleeping on the streets, it was often because key services were not in place, such as move-on housing or resettlement support to reduce the risk of recurrent homelessness. Other influences on rough sleeping however, were identified as being within the control of local service providers, such as hostels' admission, discharge or eviction practices and the responsiveness of support services. (Yanetta et al, 1999). These emerged as significant in our study.

## **Current policy developments**

1.31 There are significant changes in train in the Scottish and UK wide housing context that will have an important bearing on the current role and future development of hostels in Scotland. These deserve some exploration. Most significant are the Housing (Scotland) Bill and the Supporting People funding proposals. Key elements of the Bill with implications for homeless people and for the provision of hostels and other forms of temporary accommodation include:

- Local authorities will be required to prepare and submit to Scottish Ministers a strategy for preventing and alleviating homelessness in their area and this should include addressing the present and planned role of hostels (Part One, Section One).
- An extended interim duty on local authorities to accommodate applicants who they believe to be homeless, while they are carrying out enquires prior to making their decision on the applicants' homelessness status, whereas currently the local authority has to assess them as homeless and in priority need.<sup>1</sup>
- A new duty on local authorities, for those who are homeless but not in priority need to "secure that accommodation is made available for his occupation for such a period as they consider will give him a reasonable opportunity of himself securing accommodation for his occupation."<sup>2</sup> This indicates significantly expanded responsibilities for all local authorities, as well as a new remit altogether in some areas where local authorities have not provided services for single homeless people not assessed to be in priority need, apart from basic advice and assistance.
- There is little mention of hostel residents' rights in the Bill, however the Bill enables Ministers, through regulation, to establish minimum rights for homeless people in hostels; to specify the types of occupancy of accommodation to which these rights will apply and the terms of occupancy of the accommodation. Non-compliance with subsidiary regulations will be a criminal offence.
- Extension of the duty to provide housing information, advice and assistance to homeless people. Section 2 contains a new duty to ensure that advice and information, in respect of homelessness and its prevention, and services that may assist a homeless person or assist in its prevention, are available to any person in the local authority's area. In addition, amendments to the 1987 Housing (Scotland) Act enable Ministers to prescribe the type of advice and assistance to be provided to people who are homeless or threatened with homelessness, in their attempts to secure accommodation or to ensure they do not lose their current

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<sup>1</sup> Section 3 (2) amends Section 29 (1) of the Housing (Scotland) Act 1987

<sup>2</sup> Section 3 (3) (i) and (1ii) amends Section 31 (3) of the 1987 Housing (Scotland) Act

accommodation. Overall, these provisions will oblige local authorities to be more pro-active in ensuring the provision of information and advice to prevent and alleviate homelessness in their areas.

- The promotion of the local authorities' enabling role through the transfer of local authority housing stock to registered social landlords. Glasgow City Council, for example, is heading towards a vote on the transfer of all its stock, excluding its hostels, to the new Glasgow Housing Association. It is not clear to date what arrangements will be made between Glasgow City Council and registered social landlords, to ensure access to accommodation for homeless people moving on from temporary accommodation. Section Four of the Housing Bill places a duty on Registered Social Landlords (RSL's) to assist local authorities in providing accommodation for homeless people. Where local authorities do not transfer their stock or engage in a partial stock transfer they, in deciding whether or not to make a request, must have regard to the availability of appropriate housing in its own stock first. RSL's may only refuse a referral if there is good reason. In cases of disagreement about good reason the local authority and RSL must appoint an arbiter to determine the issue. (Section Five).
- De-institutionalisation can be viewed as a current policy development, both at national government level given the Homelessness Task Force's commitment to the replacement of the large-scale hostels in Glasgow, and at local authority level, given the evidence of momentum towards the development of alternatives, including smaller specialist hostels, small supported accommodation services and housing with support services, involving 'floating support' models. Indications are that this policy implies a growing role for partnerships between local authorities, RSL's and voluntary agencies, and between advice, housing and support services, in preventing and alleviating homelessness.

1.32 Other significant developments include the major transition in funding arrangements for housing-related support through the new Supporting People arrangements to be implemented in April 2003, UK wide. While the interim housing benefit arrangements have clarified the distinction between accommodation-related support and care functions and costs, this research indicates that concerns prevail. These concerns relate mainly to the question of whether the Supporting People framework will redress the uncertainties and instability in the system of revenue funding, as this affects housing-related support services, hostels and supported accommodation more generally.

1.33 A further policy trend with potential future implications for service users and providers of hostels and related homelessness services could include the current movement towards the greater integration of health, social care and housing services as is reflected in all recent policy guidance (such as New Futures, 2001). Interestingly this policy thrust is already reflected in local strategy and practice in homelessness, such as joint planning on the RSI front in a number of areas, the joint strategy on reprovisioning and resettlement for the large-scale, traditional hostels in Glasgow and the new multi-agency front-line advice service in Edinburgh.

1.34 Finally, government policy has increasingly focused on ensuring quality standards in the provision of accommodation and support services. Key forms of regulation and guidance on acceptable physical standards include the Scottish Housing Handbooks, guidance on mandatory licensing and physical standards in houses in multiple occupation and regulations governing establishments registered with social work authorities. Regarding more qualitative

and management standards however, it is unlikely that licensing, with its focus on physical standards, will generate benchmarks in relation to these. While care regulation standards are being promoted for registered care and home care services for different client groups and housing support standards are also being progressed by a Supporting People working group, it remains unclear how the related guidance or regulation produced will be specifically relevant to hostels.

## **DEFINING HOSTELS**

1.35 The literature review conducted at the start of this research highlighted that while hostels have many features in common, there are some key variations in the characteristics and functions of hostel provision; these are explored in Appendix One. Variations in hostel characteristics include differences in ownership, scale, physical design, management systems, charging structures, aspects of institutionalisation, resident mix and culture. Variations in hostel functions relate to the purposeful roles that hostels may play in addressing homelessness, such as:

- To assist local authorities discharge their homelessness duties, whether through planned and co-ordinated access arrangements or through enabling direct or emergency access to accommodation for homeless people, including those sleeping rough.
- To provide temporary or transitional accommodation for homeless people in general (whether access is centrally managed or direct and not mediated).
- To address the needs of particular groups of homeless people by providing accommodation coupled with varying levels and forms of support, including advice and resettlement services.

1.36 Perhaps not surprisingly, there is no single agreed definition of 'hostel' to be found; rather there is a confusing array of definitions employed by the law, by service providers and by researchers. The reasons for this are complex. Three reasons are suggested here for this definitional uncertainty: first, there is the diversity of purposes and types of hostels; second, there is an overlap between the characteristics of hostels and other types of provision, such as supported accommodation or temporary accommodation provided by local authorities; and third, there is the fact that the labels we use reflect cultural and social influences, such as perceptions of stigma, so that whether or not a service is called a hostel may vary over time, between service areas or between districts and countries.

1.37 For the purposes of this research the following operational definition was used and in arriving at this definition, reference was made to the legal definition of hostel and to the definition of supported accommodation, the meaning of which at times overlaps with hostels. Moreover it was resolved that the definition should be inclusive of a range of types and sizes of hostels for comparative purposes and that it should exclude other forms of temporary accommodation and supported accommodation more generally.

## **Definition of hostels for the purpose of this study**

- Temporary or transitional accommodation primarily for *single homeless people*.
- Either or both, board or shared facilities for the preparation of food<sup>3</sup>
- Accommodation for a minimum of six residents<sup>4</sup>
- Staff services, ranging from supervision to housing advice and support services
- Service users do not have a tenancy agreement but some other form of contractual arrangement such as an occupancy contract (or possibly no written contract at all).

1.38 We shall return to the question of definition in the concluding chapter, particularly in the light of the fact that definition is now a matter being addressed by a Scottish Executive Working Party on Subordinate Legislation.

## **OVERVIEW OF CURRENT HOSTEL PROVISION IN SCOTLAND**

### **Overall number of hostels and hostel places in Scotland**

1.39 The primary function of the inventory was to enable a representative sample of hostel residents throughout Scotland to be drawn for the research, taking into account factors such as the range of types of hostels and relevant proportions of gender and age bands in the hostel population. However the inventory also offered the opportunity to find out more about hostels and their use in different parts of the country and some key points based on an analysis of the data from the inventory are noted below. First of all, the overall pattern of hostel provision across Scotland by local authority area is shown in Appendix Three.

1.40 In sum the inventory found:

- 126 eligible *hostels* in Scotland based on the research definition used
- 3707 eligible hostel places

1.41 Provision within Glasgow City Council accounted for:

- 28 or 22% of the total 126 eligible hostels in Scotland
- 1733 or 47% of the eligible places in hostels in Scotland

1.42 The discrepancy between the percentage of *all* Scottish hostels and the percentage of total hostel places *within* Glasgow is accounted for by the presence of the large-scale hostels in Glasgow as shown in Table 1.1 below.

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<sup>3</sup> Housing Scotland Act 1987 Part One (5)

<sup>4</sup> As per SCOTSPEN criteria for supported hostels

**Table 1.1 The number of hostel places in hostels of different size bands in Glasgow compared with the rest of Scotland**

Hostel size band based on number of places	No of places within band located in Glasgow	% of all Scottish hostel places by band located in Glasgow	No of places within band located in the rest of Scotland	% of all Scottish places by band located in the rest of Scotland outside Glasgow
Under 25	168	16	891	84
25-49	140	17	704	83
50-99	316	45	379	55
100 or over	1109	100	0	0
TOTAL	1733	47	1974	53

1. The table is based on the 126 hostels known to the research team and judged to be eligible for inclusion on the best information available. Information on the number of places was available for 121 of these hostels.
2. The estimate of hostel size (in terms of the number of places) is based on
  - a) The detailed questionnaire returned by the hostel itself, where available (79 out of 126 cases)
  - b) Otherwise on information from the local authority if it is available (in a further 42 out of 126 cases)
3. A few 'hostels' are spread over a number of addresses, under one management. Each such establishment is reported here as one hostel.

1.43 Key points from Table 1.1 above include:

- Glasgow accounts for 100% of all hostels in Scotland with in excess of 100 places emphasising the extent to which very large-scale hostel provision is a feature unique to Glasgow. The city has 5 hostels in this size band
- Glasgow accounts for 45% of all Scottish hostels with between 50 and 99 places
- The rest of Scotland, excluding Glasgow, accounts for 84% of smaller hostel provision providing under 25 places and 83% of that providing between 25 and 49 places
- Of the places defined as being provided in hostels in Glasgow, 64% are in hostels with over 100 places while 82% are in hostels with over 50 places.

1.44 While it is clearly the case that a unique feature of Glasgow hostels is the sheer size of provision in relation to the number of bedspaces provided in the 5 very large hostels, there is significant provision in hostels with between 50 and 99 places in the rest of Scotland. While Glasgow has 4 hostels within this size band there are a further 6 in the rest of Scotland, providing some 55% of all Scottish provision in this category. However, some authorities manage hostel accommodation spread over a number of addresses and for the purpose of this research these were classified as one establishment.

1.45 It is perhaps also relevant to again mention here the definitional difficulties in determining exactly what is a hostel. The very low percentage of places in smaller hostels within Glasgow, as a proportion of the Scottish total, may reflect moves away from 'labelling' or designating smaller more specialist provision as a 'hostel'. Glasgow City Council, for example, manages 3 units termed 'supported accommodation' that are not included in this study. These include temporary accommodation for 18 older homeless men who were long-term residents in the large hostels, in self-contained furnished flats with common facilities in a tenement building, and transitional units for 16 young people.

## **Ownership and management of hostels**

1.46 Ownership and management of hostels again show distinct patterns comparing Glasgow with the rest of Scotland outside Glasgow as shown in Table 1.2 below.

**Table 1.2 Providers of hostel accommodation places**

<b>Provider</b>	<b>Glasgow %</b>	<b>Rest of Scotland %</b>	<b>Scottish average %</b>
Housing association	13	12	12
Local authority	63	44	53
Private/commercial	12	0.4	6
Voluntary organisation (other than HA)	11	43	28
All types of provider	100	100	100

1.47 Glasgow is notable for the extent to which local authority provision dominates while the rest of Scotland has a significant percentage of accommodation provided by voluntary organisations other than housing associations. Glasgow also varies from the picture across the rest of Scotland in the extent to which the private/commercial sector is a significant provider of hostel places.

1.48 Other significant points regarding the providers of hostel places and overall places in hostels include:

- 6 local authority hostels in Glasgow provide 50 plus places with 4 of these providing more than 100 places
- 2 housing associations in Glasgow provide 50 plus places
- 1 private/commercial sector hostel provides 100 plus places
- there are 3 local authority hostels outside Glasgow, providing 50 or more places each
- outside Glasgow there is 1 housing association hostel providing 50 or more places
- outside Glasgow there are 2 voluntary organisation hostels providing 50 or more places each.

## **Distribution of hostel residents by gender, age and ethnic origin**

1.49 It is important to note from the outset that significant differences appear in relation to gender and age breakdown of hostel residents when Glasgow and other area types, as defined for the research, are compared. It is difficult to give definitive answers to the reasons behind the wide variations in provision. It should be noted however that the available information on gender and age is based on information provided by individual hostels. In total, 79 hostels (63%) of the total sample provided such information. In Glasgow 17 hostels (61%) provided such a breakdown from the total 28 hostels identified in the city. Of the Glasgow hostels providing more detailed information 6 were local authority run, 1 was managed by the private/commercial sector, 5 were managed by housing associations and 5 were managed by voluntary organisations not including housing associations.

**Table 1.3 Distribution by gender\***

Type of area	Percentages	
	Women	Men
Glasgow	10	90
Urban	43	57
Mixed urban/rural	43	57
Rural	49	51
TOTAL ALL AREAS	26	74

\*Note: The available information on gender is based on information provided by individual hostels. In total, 79 hostels (63%) of the total sample provided such information.

1.50 Points to note from the available information on gender highlight key differences between Glasgow and the rest of Scotland with:

- 10% of residents in Glasgow are estimated to be women
- 43% of residents in other urban and in mixed urban/rural areas are estimated to be women
- 49% of residents in hostel provision in rural areas are estimated to be women

1.51 The Glasgow figure can usefully be compared with gender differences to be found in the homeless population in Glasgow as reported by the Glasgow Review Team (Scottish Executive, 2000) which estimated that of 6,500 homeless people living in hostels in the city or sleeping rough 1,000 or 15% are women. We would suggest that our figures do not throw doubts on this estimate, given the profile of the hostels which responded to the request for a gender breakdown, which included the very large district council hostels solely accommodating men.

1.52 Outside Glasgow the inventory identified a significant percentage of women in the hostel population. While the reasons for this are not entirely clear it may reflect a number of factors such as the provision in some areas of hostel accommodation for 'priority' homeless people, accommodating both households with children and single people. Such accommodation is likely to show a higher number of lone parent female headed households. Age may also be a factor with young women more likely to be accommodated in specialist provision providing for young people than in the larger, more generalist hostels. An earlier study of single homeless people found that 53% of 16-17 year olds in hostels and bed and breakfast were women (Anderson et al, 1993). Areas outside Glasgow, according to the inventory and the definition of hostel for inclusion in this, had significantly higher percentages of young people under 25 accommodated in hostel provision than was the case in Glasgow.

**Table 1.4 Distribution by age\***

Type of area	Percentages			
	Age 16-17	Age 18-24	Age 25-59	Age 60+
Glasgow	2	12	69	17
Urban	14	30	47	9
Mixed urban/rural	29	24	39	7
Rural	13	34	44	10
TOTAL ALL AREAS	10	20	57	13

\*Note: The available information on age is based on information provided by individual hostels. In total, 79 hostels (63%) of the total sample provided such information.

1.53 Information presented above on age distribution of hostel residents comparing Glasgow with other areas again demonstrates a different pattern between Glasgow and elsewhere. Key differences are:

- 14% of residents in Glasgow hostels are recorded as under 25 years of age
- 53% of residents in mixed urban/rural areas are recorded as under 25
- 47% of residents in hostels in rural areas are recorded as under 25.-full stop

1.54 These findings with regard to Glasgow contrast with the findings of the Glasgow Review Team with regard to the age distribution of those using hostels or sleeping rough, with the Team estimating that 33% of homeless people were under 25. We can only assume that the variance can be accounted by:

- A distinctive local authority and inter-agency strategy developed to tackle youth homelessness, particularly for young people under 18 years, who were treated as being in priority need since June 1983 in Glasgow. The approach has been to divert young people from the hostels by developing youth housing support, targeted social care services and supported accommodation.
- Definitional issues where some specialist provision for young people may have been defined out, or defined itself out, for the purposes of this research.
- The profile of the hostels replying to the detailed research inventory, which included the large-scale hostels, which do not admit people under the age of 18.

### Ethnic distribution

1.55 It should be noted that it is difficult to tell how many hostels provided an estimate of the percentage of residents who were from ethnic minorities as many put an ambiguous sign-usually a dash in the relevant space. It was not possible to deduce whether this meant a zero estimate or that no information was available. We have interpreted these as zeros so the figures in the table below are based notionally on the 79 hostels that provided information.

**Table 1.5 Percentages of residents from ethnic minorities by type of area**

Type of area	Percentage
Glasgow	2.9
Urban	2.0
Mixed urban/rural	1.2
Rural	2.3
<b>TOTAL ALL AREAS</b>	<b>2.4</b>

## SUMMARY

1.56 The different themes covered in this chapter raise a number of issues relevant to the future of hostels for homeless people and these include:

- There are indications of a decline in both traditional forms of hostel provision and in traditional forms of direct access. This reflects the trend of improving the standards of emergency accommodation and of co-ordinating access through clearing-house systems
- The diversity of hostel provision is well described by the inventory, which has identified some key differences between the structure and role of individual hostels within districts, as well as between them. For example, Glasgow's hostel provision is unique in Scotland and the United Kingdom, with some notable differences emerging across variables such as size, ownership and management and client group characteristics
- 'Hostel' as the term is currently understood and used encompasses a wide range of provision with different aims and functions. The meaning of hostel generally implies very limited or no housing rights for service users and often there is stigma associated with hostel living for service users. As the result of both stigma and definitional uncertainties, there is a growing tendency among service providers to redefine smaller hostels as supported accommodation, or not to use the term at all except in relation to very large establishments
- The policy context of hostel provision is changing, with new legislation bringing new duties for local authorities in relation to the provision of temporary accommodation for homeless people and related duties to ensure access to housing information, advice and assistance and to plan to address homelessness in their areas. This will have implications for the role of hostels within local systems of temporary accommodation provision in the future.

## THE STRUCTURE OF THE REPORT

1.57 A further five chapters follow this introductory chapter, and their content is summarised below:

- Chapters Two, Three and Four report on the interview programmes with hostel users and current non-users of hostels. The discussion highlights a range of views on different aspects of the hostels, and some differences and similarities between Glasgow and other areas.

- Chapter Five presents a dialogue about the role and future of hostels, drawing on the views of housing and care professionals concerned with hostels and related support services for homeless people.
- Chapter Six considers the future of hostels and related services. It takes account of the role of hostels in the system of planning and provision of emergency accommodation. The chapter also considers issues of effectiveness for hostels and related services, and implications for hostel reprovisioning.

## **CHAPTER TWO**

## **RESIDENTS' VIEWS, PREFERENCES AND ASPIRATIONS**

### **INTRODUCTION**

2.1 The views of hostel residents will be reported in this and the following chapters. This chapter first briefly sketches some key issues from the growing literature on users' views of hostels for homeless people. The chapter then presents information from the interview survey of residents in hostels for homeless people in 5 local authority areas in Scotland, including Glasgow. Profiles of the hostels included in the sample, and the 203 residents that were interviewed are reported. This includes information about respondents' gender, age, ethnic origin, household composition, and perceptions of health problems and disabilities. The chapter then examines respondents' housing history including how long they had lived in the current hostel and in hostels overall. The chapter concludes by examining what help they had received to move on from hostels, in other words what kind of resettlement support was offered, and what individuals' future aspirations were for accommodation and support. Chapter four focuses on residents' perceptions of various aspects of the hostels and life within them.

### **KEY ISSUES FROM THE LITERATURE**

2.2 The majority of single homeless people state they want a place of their own in mainstream accommodation (Anderson et al 1993). This research highlights the support needed to make the transition, while other research has noted a shortage of appropriate move-on accommodation, which can result in people living in hostels for lengthy periods (Kemp 1997). Nonetheless, for a minority of homeless people, independent accommodation in self-contained accommodation is not the preferred option. Anderson et al (1993) for example, found that 9% of residents in hostel and bed and breakfast accommodation wished to stay in their current accommodation, although the reasons for them wishing to do so were not fully explored. Similarly, one Glasgow study found that 46% of male respondents preferred hostel living, and concluded that for many single homeless people hostel living was a rational response to personal concerns about restricted options, affordability and care and support needs (Falconer, 1990). A subsequent study found that 40-45% of hostel residents' interviewed in the large-scale hostels wanted to live in some form of hostel (Wylie and Court, 1992).

2.3 For some hostel residents, at some point in their lives, hostels may become a kind of home, offering informal support and companionship as well as help from professionals (Falconer 1990, Neale 1996). Indications from research on reprovisioning and resettlement (Petch et al, 2000) and on housing advice services (Goodlad and Rosengard, 1998) raises the question of whether homeless people, including hostel residents, are always informed about the range of housing and support options that could offer alternatives to hostel living. Such studies emphasise the importance of user involvement in needs assessment, alongside access to good quality information about the full range of housing and support options and to advocacy.

## **FEATURES OF THE SAMPLE HOSTELS**

2.4 One of the research objectives was to study the experience of living in a range of different types of hostel for homeless people across Scotland. In practice, fieldwork was carried out in 2 stages: first, a sample of hostels was selected in Glasgow; and second, hostels in 4 other local authority areas that represented urban, rural and mixed areas were selected. This has offered the opportunity to examine the unique landscape of Glasgow's hostels for homeless people and other parts of Scotland separately, whilst being able to make comparisons across the resident sample as a whole.

### **The sample of Glasgow hostels**

2.5 Nine Glasgow hostels were selected to be broadly representative of the size distribution and the different kinds of provider organisations. They included direct access or emergency hostels and specialist hostels - for example, provision catering for women or young people. A hostel catering for refugees was approached and agreed to participate, but its residents did not wish to be interviewed. At the time of compiling the inventory of hostels, there were 28 hostels in Glasgow fitting the definition adopted by the study, providing 1,733 places.

2.6 The final sample reflects the interests of, and guidance received from, the Research Advisory Committee on which Glasgow hostels to select. This emphasised that the sampling frame should reduce the proportion of hostels with 100 places or more, both to ensure sufficient representation of the commercial sector and to inform the Glasgow Review Team's planned reprovisioning of the large-scale hostels. In the table below, the hostels selected are compared by sector, size, type and resident mix.

**Table 2.1 Hostels selected in Glasgow by sector, size, type and resident mix**

<b>Hostel</b>	<b>Sector</b>	<b>Hostel size – Bedspaces</b>	<b>Hostel Type and Resident Mix</b>
1	Local authority	252	Generalist, men only
2	Local authority	217	Generalist, men only
3	Commercial	118	Generalist men only
4	Housing Association	99	Generalist, mixed
5	Local authority	77	Generalist, women only
6	Commercial	28	Generalist, mainly older men
7	Voluntary	15	Specialist, women only
8	Housing Association	12	Specialist, young people
9	Voluntary	67	Generalist , mixed

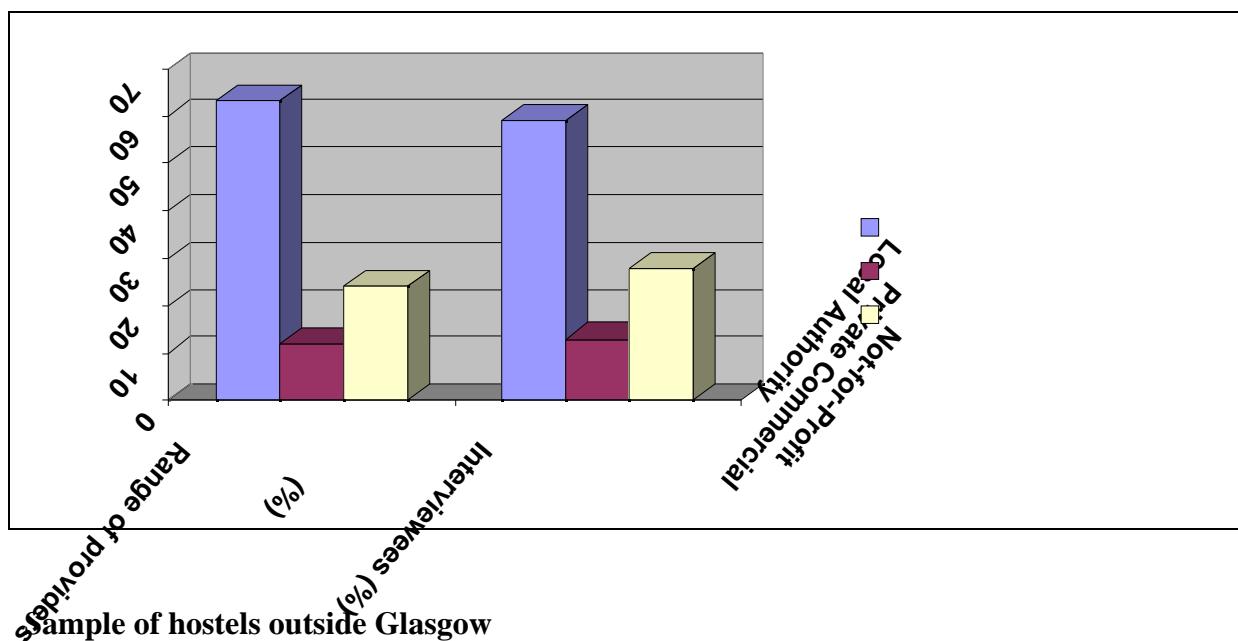
2.7 The selection of hostels took account of the distribution of different sized hostels in Glasgow described earlier in this report. The following table compares the number and proportion of interviewees selected from different sized hostels with the actual spread of provision in Glasgow. Six out of 9 hostels, including all local authority hostels, one commercial and one in the voluntary sector, were generalist, traditional, very large or medium-sized hostels accommodating either men only or women only, while 2 accommodated both. Another commercial hostel included was small-scale (28 beds) and generalist, but the majority of its residents were older men. Two hostels in the not-for-profit sector were small-scale specialist provision with between 12-15 bedspaces, one for women, and the other for young people.

**Table 2.2 Proportion of interviewees living in hostels of specific sizes compared with the proportion of total beds in hostels of different sizes in Glasgow**

Hostel Size	Bedspaces		Interviewees	
	Number	Percent	Number	Percent
Under 25 places	168	10	7	7
25-49 places	140	8	7	7
50-99 places	316	18	34	33
100 or more places	1109	64	55	53
TOTAL	1733	100	103	100

2.8 The sample was also drawn so that it broadly represented the distribution of hostels in the local authority, commercial and not-for-profit (including voluntary and housing associations) sectors. The chart below shows that the proportion of interviewees from hostels with different providers compared to the actual distribution of providers in Glasgow, was broadly similar.

**Figure 2.1 Proportion of interviewees from hostels with different providers compared with the actual range of providers in Glasgow**



2.9 Thirteen hostels in 4 other local authority areas were selected. The 4 local authorities, chosen to be representative of urban, rural and mixed geographical areas, were Aberdeen, Perth and Kinross, Fife and North Ayrshire. Information from the inventory regarding hostel size and type of provision, number of beds, provider, and resident mix in the 4 areas was used to determine the size of the sample in each. Compared to Glasgow, there was a high percentage of small-scale provision in the other 4 areas, and therefore fewer residents in individual hostels to sample from, which resulted in selecting a greater number of hostels than originally planned.

**Table 2.3 Distribution of hostels and bedspaces in the 4 local authority areas, and the number of interviewees and hostels included in the research sample**

Local authority area	Distribution of hostels and places		Research sample	
	Number of bedspaces	Number of hostels	Number of interviewees	Number of hostels in sample
1 Aberdeen	216	10	45	5
2 Perth and Kinross	103	4	22	3
3 Fife	65	6	14	3
4 North Ayrshire	91	2	19	2
TOTAL	475	22	100	13

**Table 2.4 The distribution of hostels of different sizes, sectors, resident mix, and type of provision**

Local authority area	Hostel	Sector	Hostel size – bedspaces	Type and Resident mix
Aberdeen	1	LA	73 (within 3 units of accom)	Emergency, mixed
	2	LA	32	Emergency, mixed
	3	Voluntary	12	Young people, mixed
	4	Voluntary	18	Specialist-wet-hostel, mixed
	5	Voluntary	22 (within 6 units of accom)	Specialist -Women's Aid
Perth and Kinross	1	LA	48	Emergency, mixed
	2	Voluntary	7	Nighshelter emergency, mixed
	3	Voluntary	36	Resettlement, men only
Fife	1	LA	8	Mixed
	2	LA	11	Mixed
	3	Voluntary	9	Specialist- young people, mixed
North Ayrshire	1	LA	35	Emergency – mixed
	2	Housing Assoc	56	Emergency – mixed

## PROFILE OF THE SURVEY SAMPLE

2.10 As far as possible within the selected hostels, quotas for sampling the resident population were set to reflect the variables of gender and age in the total population in both Glasgow and the rest of the country. In Glasgow, the quotas were based upon figures for the population of single homeless people as reported by the Glasgow Street Homelessness Review Team (2000) as this was the best information available at the time, while quotas in the other areas were based upon information from the inventory. In Glasgow, 103 hostel residents were interviewed during December 2000 and January 2001, representing around 6% of the total hostel population at that time. A total of 100 hostel residents were interviewed in Fife, Perth and Kinross, Aberdeen and North Ayrshire during January and February 2001, representing 5% of the total hostel population in the rest of Scotland, excluding Glasgow.

### Gender

2.11 Men outnumbered women in the Glasgow study sample by approximately 4 to one. Out of 103 interviews undertaken, 83 (81%) were with male residents, while 20 (19%) were with female residents. Information later obtained from the inventory suggested that the ratio

at the time of sampling was in the region of 9 males to one female. The Glasgow Street Homelessness Review Team reported a ratio of 85% male to 15% female in Glasgow's single homeless population. The research team made a decision to sample a slightly higher number of females than represented in these figures however, in the interests of ensuring a reasonable representation of women's voices in the research.

2.12 In the sample of residents in the 4 other local authority areas, the distribution of men and women was fairly even: 53 men and 47 women. The gender distribution in hostels outside Glasgow were more evenly spread, ranging from 43% to 49% female in urban and rural areas and 57-51% male. The reasons for this significant contrast with Glasgow's resident population were not obvious at the time of sampling, but 2 reasons emerged for this. First, hostels outside the larger urban districts in Scotland cater more frequently for a mix of families and single people. Second, it appears that a higher proportion of Women's Aid provision in other districts classified itself as hostel provision than is the case for Glasgow. The resident mix across hostels in Glasgow therefore reflected a lower representation of lone parent families headed by women.

## **Age**

2.13 In Glasgow, quotas for selecting residents of different ages applied the age distribution of single homeless people as reported by the Glasgow Review Team: that is, 33% of single homeless people were aged 16-24 years; 31% were aged 25-34 years; 25% were aged 35-54 years; and 11% were aged 55 years or over. This was applied in the absence of sufficient returns from hostels at the time of sampling. In retrospect, there are clear differences between the age profile obtained from the inventory and the overall population of single homeless people in Glasgow as reported by the Review Team. The table below contrasts the sample selection across different age groups with that of the total hostel population in the rest of Scotland obtained from the inventory.

**Table 2.5 Age distribution of interviewees compared to the total hostel population in Glasgow**

Age in Years	Interviewees		Age distribution of residents in Glasgow from the inventory Percent
	Number	Percent	
16-17	3	3	2
18-24	30	29	12
25-59	59	57	69
60+	11	11	17
TOTAL	103	100	100

2.14 The age distribution of residents living in hostels in the rest of Scotland as found by the inventory differed significantly from that in Glasgow. It was different in terms of the percentage of provision catering for young people, and had slightly fewer people who were aged 60 years or over. Whereas in Glasgow, the highest proportion of residents had been aged between 25 and 59 years, in the other areas there were a sizeable proportion of residents aged 18-24 years. One explanation for the divergence is the extent to which provision for young people in Glasgow was defined, or defined itself out, of the study.

**Table 2.6 Age distribution of interviewees in the other areas compared to the total hostel population in the rest of Scotland**

Age in Years	Interviewees		Distribution across urban, rural and mixed authorities as found in the inventory
	Number	Percent	Percent
16-17	17	17	19
18-24	34	34	29
25-59	42	42	44
60+	7	7	9
TOTAL	100	100	N/A

### Ethnic Origin

2.15 The entire study sample described their ethnic origin as ‘White’. The estimated percentage of the minority ethnic population in Glasgow’s hostels is around 2.9% and in the region of 1-2% in the rest of Scotland. Interviews were planned with individuals living in hostel accommodation for asylum seekers in Glasgow and provision was made for using interpreting services, but individuals chose not to participate in the research. Random sampling methods in other hostels did not result in the inclusion of any individuals from a minority ethnic group.

### Household Composition

2.16 In Glasgow, the majority of respondents (that is, 71 individuals or 69%) described their marital status as ‘single’, though this does not mean that all were never married. Similarly, 65% of respondents in the other 4 areas were ‘single’. A sizeable minority (27% in Glasgow and 16% elsewhere) were either separated from a partner or divorced. One of the significant differences was that while in Glasgow only five people were married or had a partner, none of whom were living in the same hostel, in the other areas almost one in five (18%) had a partner or spouse and 71% of these were living with them in the same hostel. These figures do not of course mean that no residents had been widowed, as this was not specifically asked for in the interview.

2.17 Roughly the same proportion of respondents in both samples had children, including grown-up offspring (54% in Glasgow; 53% in the other 4 areas). While only one person in Glasgow had children living in the hostel with her, 21% in the other areas had children living in the hostel with them. Although the definition of a ‘hostel’ adopted by the study referred to provision predominantly for single homeless people, the number of people in families staying in hostels in the other areas only came to light when the random sample was drawn.

2.18 That over one in 4 respondents in Glasgow had children not living with them may in part be explained by the predominance of men in the sample, compared with 17% in other areas. It also reaffirms other research findings that relationship breakdown including divorce, is a major cause of homelessness for men, as well as suggesting that hostel provision catering for people with children was not to be found in Glasgow, or that any such provision defined itself out of the survey. Women, of course, also become homeless through relationship breakdown and changes in marital status, but research indicates that they resolve their homelessness differently (Webb, 1993).

## **Health or support needs**

2.19 Overall, there were significant physical disabilities, health issues and support needs that emerged in the residents' interviews, although to a lesser extent than identified most recently by the Office for National Statistics (2000) survey of health and well-being of homeless people in Glasgow. The findings are not strictly comparable as this survey did not aim to assess health or social care needs specifically as did the ONS, for example. Respondents were asked to identify whether they had 'special' needs such as a health problem or disability and our findings therefore indicate residents' own reported assessments of their medical and/or health problems. Responses are summarised in Table 2.7 and the chart below.

2.20 In the Glasgow sample, almost equal numbers said they did have particular health problems or disabilities (51 individuals) as those who said they did not have any particular needs (52 individuals). In contrast, over three-quarters (77%) of respondents from other areas identified specific health problems or disability, some that they had chronic physical health problems, and/or mental health problems combined with drug or alcohol addiction.

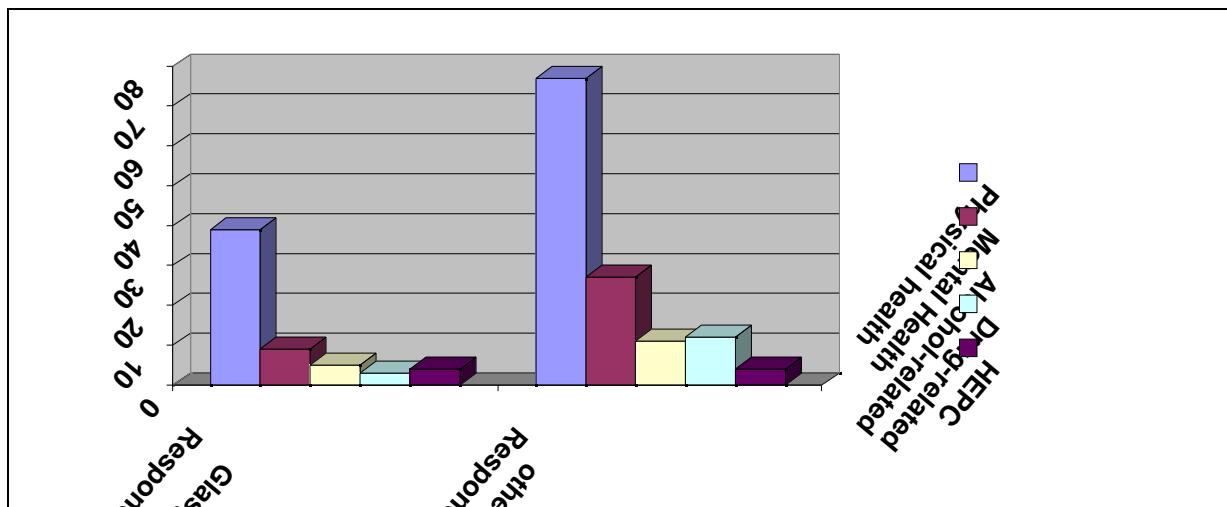
2.21 It is possible that, in common with other studies, health problems such as alcohol or drug dependency and mental health problems were under-reported by residents. One person said, "I've got a psychiatric nurse but I think I'm alright." A previous survey of the needs of residents in direct access hostels in Dundee (Shelter, 1998), similarly found disagreement of between 25-50% between residents' and keyworkers' assessments of need, with under-reporting of drug and alcohol problems. Furthermore, the recent ONS (2000) survey found a much greater incidence of mental health problems, hazardous drinking and drug dependency among the homeless population in Glasgow, and this is reflected in staff perceptions as reported in Chapter Six of this study.

**Table 2.7 Type of special needs identified by number of individuals and as a percentage of the overall sample for Glasgow and 'other areas'**

Specific Problems	Glasgow respondents		Other areas respondents	
	Number*	As % of Glasgow sample	Number*	As % of other areas' sample
Physical health	40	39	77	77
Mental health	9	9	27	27
Alcohol-related	5	5	11	11
Drug-related	3	3	12	12
HEP C	4	4	4	4

\*Respondents could identify more than one

**Figure 2.2 Specific health problems and disabilities identified by respondents from both Glasgow and Other Areas**



2.22 In both samples, physical health problems were the most commonly identified: that is, 8% of those with problems in Glasgow and 100% of those in other areas. Physical health problems included breathing difficulties such as asthma or bronchitis; joint problems including arthritis and rheumatoid arthritis; limb fractures (broken arms, hips and legs); back problems; heart problems; skin problems such as eczema; sensory impairments; and epilepsy. Some had a combination of serious or chronic illnesses or multiple health problems, for instance:

*“I have got a liver malfunction, loss of sensation in one of my legs, lung trouble, gastro-enteritis and trouble with my heart” (Resident outwith Glasgow)*

2.23 This finding supports the findings of the body of research on the health of hostel residents and people sleeping rough (Mackenzie, 2001, Bines, 1997), with hostel residents and rough sleepers significantly more likely to suffer asthma and chest pains than the general population (rough sleepers, 3 times as much). Rough sleepers and hostel residents also report notably higher rates of difficulties with walking, musculo-skeletal problems and skin disease.

2.24 Just under a fifth of the Glasgow sample identifying specific problems mentioned mental health problems, whereas a third of those with problems in other areas said they had mental health problems. Depression and anxiety were the most common mental health problems mentioned:

*“I suffer from depression and get medication from my GP. Things can turn from a wee thing to a big thing if I don’t tell someone.” (Glasgow)*

2.25 A few people specifically mentioned they were diagnosed with clinical depression, psychotic illness, and schizophrenia – “I’m a schizo affective – that’s what they call it.”

2.26 Fewer people identified an alcohol or drug dependency than other types of problem. In comparison with the ONS survey the figures suggest under-representation of the real extent of drug and alcohol problems among the hostel population: 5% of the Glasgow

sample said they had an alcohol problem compared with 54% of those assessed by the ONS survey who were classified as having hazardous drinking patterns increasing with age. With regard to drug problems, the ONS survey, reported that 25% were dependent on at least one drug in the previous year while 18% were dependent on opiates such as heroin, particularly those aged between 25-35 years. This study found just 3% of the Glasgow sample reported drug problems. Given the age profile of Glasgow and the other areas' samples, these findings may not be entirely surprising. The ONS (2000) survey in Glasgow found that people aged 55 years or over were more likely to report a physical illness, while mental health problems were more common among younger people. Figure 2.2. above shows higher reporting of mental health problems in the other areas outside Glasgow.

### **Routes into homelessness and the hostels**

2.27 Homelessness can have many causes. For people in this survey, homelessness and subsequent entry into hostels was typically caused by a number of factors rather than one single cause. Relationship and family breakdown however was a predominant reason. In Glasgow, 40% of respondents and 46% in the other areas, cited a breakdown in personal relationships as the primary reason why they came to be in the hostel either for the first time, or why they had been staying in hostels for a number of years. Carlisle (1993) in surveying the housing needs of single homeless people in the Greater Manchester area, found that disputes were the most common cause of homelessness for 61% of their survey sample.

2.28 Our research found that arguments and tensions in relationships with close relatives including parents, spouses, partners, siblings, or friends, were frequently drink-related or especially in the case of the younger respondents, drug-related. Quite literally, they had been put out on the street, by a parent or spouse for 'being a drunk' or 'taking drugs'. They were not living in hostels by choice, but forced through circumstances and aspects of their own behaviour to enter hostels. Breakdown of a relationship because of a disagreement or the death of a spouse or partner were the reasons behind several individuals becoming roofless:

*"My ma put me out 8 years ago on Boxing Day. I've lived off and on in hostels ever since."*

*"I ended up homeless because the woman I was with left me and that broke my heart."*

*"My wife died and I couldn't hack living there any more."*

2.29 In Glasgow, 26% of respondents had been moved to the hostel either from another hostel or an assessment centre, for example, because "the Hamish Alan Centre sent me". Only 3 people mentioned referral by the local authority homelessness service in the other areas. While local authority gate-keeping of access to hostels is not limited to Glasgow, this finding confirms that hostel residents recognise the key role played by the Hamish Alan Centre in co-ordinating access to hostels in Glasgow, as discussed elsewhere in this report.

2.30 Being alcohol or drug-dependent was the main reason for homelessness for 18% of respondents in Glasgow, which is notably a higher percentage than those directly identifying themselves having health problems related to either drugs (3%) or alcohol (5%). In contrast, 12% of respondents had identified a drug-related problem and 11% an alcohol-related

problem in the other areas, and this coincided identically with 11% highlighting an addiction problem as the main reason for their homelessness.

2.31 Respondents identified being “involved with drugs” as a root cause of financial difficulties, ultimately resulting in homelessness and problematic personal relationships. Why some individuals “hit the booze” as one put it, or take drugs was identified as a response to a traumatic life event such as a chronic illness, bereavement, or the breakdown of a close relationship. Some people had accrued debts through drug problems, while others were fleeing situations or areas where drug taking was rife:

*“After my mum died in 1991, I lost all sense of restraint when the family disintegrated. Earning lots of money and I got involved in drugs. This led to debts, then I ended up on the streets or staying with friends, who used, got ill and I knew I needed to get help. I’ve come here to get away from the drugs environment.” (Glasgow)*

*“I moved out of my brother’s house ‘cos he was on drugs. I was off the drugs and I couldn’t stand seeing him on the drugs – jealous you see. I was dependent on him and I kent if I didna move I’d be dependent on him for the rest of my life.” (Aberdeen)*

2.32 Fourteen percent of Glasgow respondents mentioned some kind of financial difficulties, including rent and mortgage arrears, as the main reason why they were staying in hostels. For example, the Council or a private landlord had “thrown me out of the house for rent arrears”. Not being able to manage on welfare benefits, sometimes after losing a job, was common. Surprisingly perhaps, arrears and financial difficulties were hardly mentioned by respondents in the other areas.

2.33 More commonly mentioned by hostels residents in the other areas, were problems with overcrowded housing, unsuitable accommodation, including poor quality or cramped bed and breakfast provision and getting away from sleeping rough. These were also mentioned by the Glasgow respondents but less so. One explanation may be that Glasgow respondents tended to have lived in hostels for longer, and the sample population was older. However, Glasgow respondents did highlight that a reason they came into hostels was because they did not have access to mainstream housing options as they had not been classified as ‘priority clients’ by the Housing Department.

2.34 Some individuals spoke about being violent themselves in a domestic setting or were “in a fight”, “kicked out after arguing with staff” or had had a “fall out with the manager” in another hostel. Others were victims of domestic violence. Respondents in the other areas particularly highlighted being on the receiving end of domestic abuse. The reason for this divergence is probably the different gender balance between the 2 samples, and the inclusion of Women’s Aid hostels, whose residents are typically fleeing domestic violence, in the other areas. The following quotations illustrate desperate situations involving violent incidents that led to homelessness and ultimately to living in a hostel:

*“My daughter got out of prison so I let her come to stay at my house because I had her son, so that she could bond with him. But she invited her boyfriend who was also released from prison who is domineering and he beat me up along with my daughter. My daughter also brought punters back to my house and eventually I was forced to give up my tenancy. The child was taken off me, my daughter’s back in prison and I’m here.” (Glasgow)*

*“I’d a lot of problems where I was staying. I got burgled, it was traumatic. I answered the door to a knock and 2 men came in and hooded me and beat me up. They stole everything, even my food! I’ve had death threats, I had to get away.” (Fife)*

2.35 An aspect of violence mentioned specifically by 4 people from other areas, but not at all in Glasgow, was that they had come into the hostel because they were fleeing violent or abusive neighbours:

*“It was neighbours’ abuse. Windows were smashed in, my door wis kicked in, and booted late at night. Me having a 9-year-old, we just had to get out.” (North Ayrshire)*

2.36 A few people in the Glasgow sample spoke of deciding themselves to move from another hostel because it was “unsuitable” and did not meet their needs. Five people in Glasgow hostels and 5 in the other areas had moved to their current hostel from an institution such as prison, long-stay hospital, or after leaving the army.

## **History of hostel use**

### *Respondents’ length of stay in current hostel*

2.37 Sixty percent of Glasgow respondents had been in their current hostel for over 3 months, and just over a fifth (22%) had been living in their hostel for 2 or more years. Two of these people had been there for more than twenty years. In contrast, the vast majority (64%) of respondents in other areas had been in the current hostel for under 3 months and only 3 respondents had lived in the same hostel for 2 or more years.

2.38 The transient nature of the hostel population in the other areas compared to Glasgow seriously challenged the application of age and gender quotas during sampling for this research. Quotas were sometimes based on information collected in the previous month or so, dependant on when individual hostels completed and returned inventory forms, by which time the hostel population had clearly changed significantly. This may reflect the fact that there were restrictions on the period of hostel residence, or that the hostel had an explicit function to provide temporary accommodation only until such time as permanent accommodation was secured, especially for priority homeless applicants.

**Table 2.8 Length of time respondents had stayed in the current hostel**

Length of time	% of Respondents	
	Glasgow sample	Other areas' sample
Less than 3 months	40	64
3 months to just under 6	16	25
6 months to just under 1 year	14	5
1 year, but less than 2 years	9	2
2 years or more	22	3
TOTAL	101*	100

\*percent does not equal 100 due to rounding figures up (1 missing)

2.39 Three in 5 Glasgow respondents had stayed in other hostels in the past 3 years. For many of these people, moving from hostel to hostel had clearly become a ‘way of life’. The table below shows that before coming into the current hostel, nearly a third (31%) of Glasgow respondents had been living in another hostel. Others had had their own accommodation, or had been staying with family or friends until particular life events, or drug/alcohol problems had rendered them roofless. One in 10 had slept rough before coming into the current hostel and a few had been in bed and breakfast or supported accommodation.

2.40 Given the age profile of the sample in the other 4 areas, that is, a higher proportion of younger people, particularly those aged 16 and 17, it is perhaps not surprising that where respondents had been living before coming into the current hostel differed significantly. Seven out of 10 had stayed in ordinary housing in the community, either with parents or other family (24%), in their own rented house or flat (21%), with friends (18%), or had owned their house or flat (5%). Only 8% had moved from another hostel.

**Table 2.9 Where respondents had been living before moving into the current hostel**

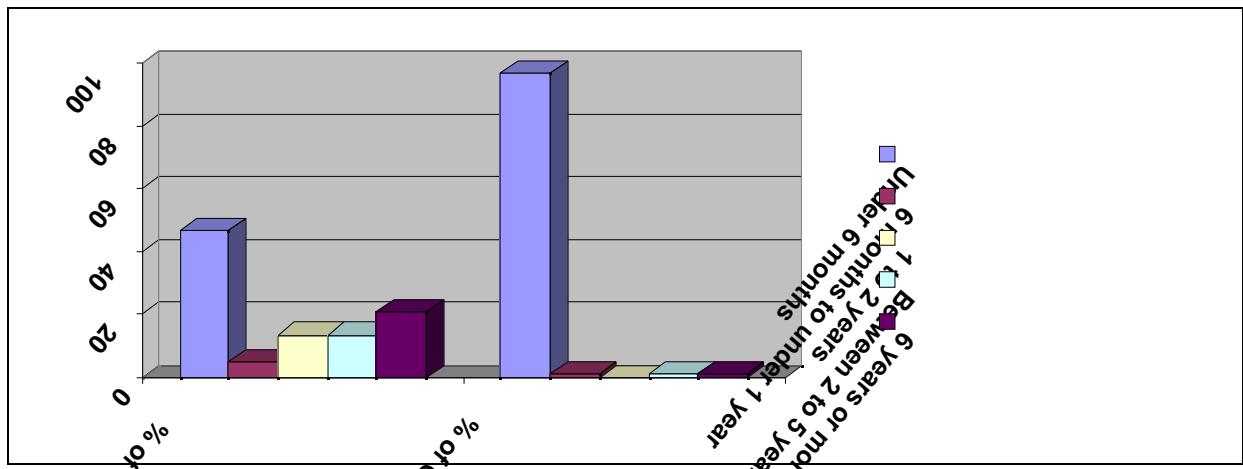
Accommodation	% of Respondents	
	Glasgow sample	Other areas' sample
Other Hostel	31	8
Rented flat or house	17	21
With parents or other family	13	24
‘Other’	12	13
Sleeping rough	10	5
Own flat or house	7	5
Staying with friends	6	18
Bed and breakfast	2	6
Supported accommodation	2	0
Can’t remember	2	0
TOTAL	102*	100

\*Percent does not sum 100 due to rounding figures up

#### *Respondents’ use of hostels overall*

2.41 Over a fifth (22%) of Glasgow respondents had been living in hostels for 6 years or more: of this number, 14 people had spent over 10 years in hostels, and 3 of these had spent a total of 30 years or more in hostels. In contrast, respondents from the other areas had typically been in hostels for under one month, and only 2 people had been in hostels for 2 years or more, one of these for 10 years in total. Figure 2.3. below illustrates this contrast.

**Figure 2.3 Length of time respondents had spent in hostels in total comparing Glasgow and the Other Areas**



2.42 When asked to make comparison between the current and previous hostels, 40% of Glasgow respondents felt the current hostel was better, while 12% said it was worse. A small number (8 individuals) said the current hostel was about the same as previous hostels. Twenty-eight percent in other areas had stayed in one or more hostels in the past 3 years. Of these, the overwhelming majority (64%) felt their current hostel was an improvement, and around a fifth that it was about the same as the previous hostel. Three people felt the hostel was worse than the previous one, and one person did not express an opinion.

2.43 Comparisons were not that straightforward in all cases, and although one aspect of a hostel could be better, it might be worse in other respects:

*“The other one hasn’t got so much security but it had a flat rather than a room, but it was a tip. You could go into anybody’s room at any time. The manager was sound there, she’d help you. She lived there too so she was more in touch kind of than this one. This one is ignorant.” (Perth and Kinross)*

2.44 Improved facilities, more relaxed rules and regulations having a positive impact on aspects of quality of life including self-determination and autonomy, better support and friendlier atmosphere were all aspect of hostels that compared better, whether it was the present or a previous hostel that was being referred to. The move from large-scale to small-scale hostels in Glasgow particularly, was generally perceived as positive. The features of smaller hostels that made them better included escaping from the pressures of living in an environment where drug-dealing and drug-taking were rife, moving somewhere with a “quieter atmosphere” and “superior facilities”, and importantly, where there were “more supportive staff”. In Aberdeen one respondent said:

*“You get more support here. It is easier going and a better atmosphere. In X there is a ‘no drugs’ policy. Here they are more down to earth about drugs and try to help you.”*

## **Resettlement and moving on**

2.45 Given the temporary role of hostel provision in providing for the needs of homeless people, and the underlying ethos of resettlement that in the past 10 years has become the cornerstone of what is considered as best practice, the survey focused on the help residents had been given to consider future housing and support options. In theory, resettlement implies a planned process of helping people move out of temporary homeless situations, including hostels and rough sleeping, or out of other institutions, into more settled accommodation in the community with any necessary supports put in place. Key elements include needs assessment and care or support planning, establishing appropriate accommodation and support packages, and providing advocacy. In practice, the extent of resettlement support appears to still be developing. This section examines the help residents received and their support needs and related preferences for future accommodation.

## **The help received**

2.46 Dissatisfaction with access to information and advice emerged as a very significant issue in all areas, however, dissatisfaction was higher in Glasgow. Overall, fewer Glasgow respondents were satisfied with the amount of information and advice they had been given on future housing options: 7 out of 10 people did not feel they were given enough information compared to 5 out of 10 in the other areas. Of course, not everyone relied on hostel staff to help them move on. Some people had plans to move to a different area, or their family was helping them to move out of the hostel, or they anticipated specific moves such as, “my next move will be a live-in job (as a chef)”. Although many people did not know what kind of help they needed, in general they wanted hostel staff to be more orientated towards looking at their future move out of the hostel, for example:

*“I had to go and find out for myself. Just to be given even a list of places that I could go to. I had to phone up a few places. The woman at the Homeless Section said I should have been given a list of places to stay.” (Aberdeen)*

*“Someone to ask where do you want a house. If you were seeing someone from the Housing, if you knew that you had to phone to prove yourself it’d give you a goal to aim for.” (North Ayrshire)*

2.47 A couple of people mentioned that health professionals would decide where they moved to next. There were also problems with long waiting lists for houses and flats and many people simply did not know how to go about getting accommodation, such as how to contact a Housing Officer. However, there was also a shortage of acceptable housing options in some areas, for instance one Aberdeen respondent said “we only get one offer and it’s 99% sure that it’ll be in a place we don’t want to go”. Many people needed practical support in filling in forms in order to get onto the housing waiting list. Though related to predominantly as a housing issue, some people identified that they “couldn’t run a house” and needed support to manage but did not know what was available. There was a clear need for advocacy:

*“Advice if we ask for it. Signs posted to tell us to seek advice and the confidence to seek advice.” (Glasgow)*

## PREFERENCES FOR FUTURE ACCOMMODATION OPTIONS

2.48 Respondents were asked:

1. To identify all the options they would consider when moving on from the current hostel, including that of remaining where they were.
2. To then identify what, from the options they had chosen, would be their *first choice* of acceptable future accommodation.

### Range of acceptable options

2.49 In order to meet individual needs and preferences, it is clear from the responses summarised in 2.10 below that a range of accommodation options is required throughout Scotland and that the spectrum of provision should include hostel accommodation.

**Table 2.10 Range of acceptable future accommodation options**

Accommodation option	% Of Respondents	
	Glasgow Sample	Other Areas' Sample
Own house or flat	81	89
House/flat with others	31	18
Current hostel	36	37
Another hostel	11	14
Bed and breakfast	28	14
Staying with family	26	17
In house/flat with support	55	34
Other option	1	5
TOTAL	100	100

2.50 In terms of the range of options respondents were prepared to consider, 81% of Glasgow respondents and 89% from the other 4 areas, wanted a house or flat. Further, 55% in Glasgow and 34% in the other areas identified a need for housing with staff support. In looking more broadly at options people would consider, it was interesting that 36% in Glasgow and 37% in the other areas, would consider staying in their current hostel, and that 11% in Glasgow and 14% in other areas would move to another hostel as a future accommodation option. It was not the case that all of these were staying in the large-scale hostels. Respondents indicated that the reasons for their preference of moving to another hostel were because other hostels provided greater opportunities for independence, had more relaxed rules and regulations, and were free of drugs:

*“It would have all normal people. I hate drug users. Would have cooking facilities all the time, vending machines and bigger rooms.” (Glasgow Resident)*

*“It would be a house within a house. I would have my own room, bathroom and a kitchen within the hostel.” (Glasgow Resident)*

*“Other hostels make you more independent – you buy your own food. Here everything is done for you.” (Aberdeen Resident)*

## Prioritised options

2.51 In terms of respondents' first choice of accommodation option, aspirations did not vary by location: that is, respondents wanted to live in an ordinary house or flat of their own. Table 2.11 below summarises respondents' first choice but the key points were:

- The overwhelming majority of respondents to this survey would prefer to move into their own house or flat - 67% in Glasgow and 80% in the other areas.
- Only 3% in Glasgow and the other areas wanted to share a house or flat with others as their first choice.
- In Glasgow 17% of people identified a need for staff support in mainstream housing but only 7% in the other 4 areas did.
- A significant minority identified staying in their current hostel as a first choice – that is, 11% in Glasgow and 6% of people in the other 4 areas.

**Table 2.11 Respondents' first choice of acceptable future accommodation options**

Accommodation option	% Of Respondents	
	Glasgow Sample	Other Areas Sample
House/flat on own	67	80
House/flat with staff support	17	7
Hostel – current	11	6
House/flat with others	3	3
Staying with family/relatives	2	2
Other	0	2
TOTAL	100	100

## Help people felt they needed with regard to living elsewhere

2.52 The main kind of help needed to enable people to manage a flat or house was practical 'start up' help, for example, help with buying furniture and house decorating, as well as help with deposits in the private rented sector and, for some, to settle long-standing debts. Many respondents had already sought, or planned to seek, social workers' help to access furniture grants and help with rent deposits – "social worker told me about a key fund which helps pay the deposit on accommodation". Most felt they would manage in ordinary housing as long as this practical help and support were made available initially. In other words, most people did not envisage themselves requiring long-term professional support. They had entered hostels having "nothing, no furniture, I need everything", or needed help to reclaim furniture from storage and other people's houses. In some areas such as Fife, the help of a community organisation providing just such a "starter package for a new flat" was highly valued.

2.53 A few people identified they would need someone such as a home carer coming in occasionally to check on them and to provide emotional support:

*"Someone to speak to lift my depression and get over the grieving process. I have lost a daughter and a grandchild. My other daughter is in prison, so is my son. My other grandchild is adopted and I have a build up with no-one to talk to about it." (Glasgow)*

*“Somebody that I knew who’d be there if I needed to speak to somebody about my problems. When I bottle it up that’s when I go on a drugs binge. The more I bottle up my problems the worse I get.” (Aberdeen)*

2.54 Staff at the Wayside Club day centre and the Simon Community in Glasgow had already helped some people with practical form filling and putting them in touch with the ‘right people’ in Housing. These residents valued this support and hoped that it would continue.

2.55 In the 4 other areas, help to learn the skills required for independent living was raised repeatedly, which may be due to the higher proportion of younger people than in the Glasgow sample. Typically, this meant help to “look after a house on my own”, “money management”, “somebody to dae the shopping”, and “teach me how to cook”. As one person said:

*“Probably to help with my money. If I was tae move into a flat the noo, I widnae hae a scooby-doo.” (North Ayrshire)*

2.56 Some people needed help with drug or alcohol problems specifically:

*“I need to make changes in my own life and how I live which will allow me to make the transition. I need help with my alcohol dependency before I can move on.” (Perth and Kinross)*

2.57 People with mental health problems identified the need for specialist mental health services in the community including access to psychiatrists, community psychiatric nurses (CPNs) etc. They also needed access to counselling, and social support to ensure “someone keeps an eye on me to make sure I don’t get nae weel again.” A few people had physical disabilities and they identified the need for physically accessible housing with “high up sockets because of my spondylosis”, and in suitable areas. For instance, one person had a serious heart condition but had been offered housing that was “up a really steep hill so it’s no use.” One person with epilepsy needed to know he could “pick up a phone” when he knew a fit was imminent, and support that would be there “if I take a bad turn – I basically manage myself.”

## SUMMARY AND DISCUSSION

2.58 The research sample drawn was broadly representative of hostel types and sizes, and hostel residents across Scotland. The survey found a high incidence of physical health problems, including chronic and multiple illnesses among the hostel population. The pattern of hostel use varied significantly between Glasgow and the other 4 areas. In Glasgow the hostel population was fairly static and for a sizeable minority, mainly older men, hostels had become a way of life for the past thirty or so years. In contrast, the hostel population in the other 4 areas was far more transient, suggesting that hostels in these areas have an explicit temporary accommodation function for homeless people. If this is the case, then it may also be that more priority and better support is given to resettlement and move-on accommodation options, or that these areas have a better range of available alternatives.

2.59 In common with previous research, this study found the majority of homeless people staying in hostels wanted a place of their own in mainstream housing, whilst recognising individualised needs for a range of practical and emotional support to obtain and maintain tenancies (Dane, 1999). Related to this was the demand for hostel staff who are more orientated towards helping find and keep suitable accommodation and support, though a few are clear they will never cope on their own. Further, for a sizeable minority, hostels or some form of communal living at least, remains their preferred option.

## **CHAPTER THREE RESIDENTS' VIEWS ON HOSTEL LIFE**

### **INTRODUCTION**

3.1 In spite of evidence that for some people hostels become a kind of home, surveys have indicated that age, gender, length of stay and prior hostel experience, were all associated with the search for alternatives (Ham, 1996, Falconer 1990). Moreover, while some homeless people have adopted strategies to avoid hostel living, Ham suggests that there is also "grudging acceptance" of hostels as an alternative or respite to the streets.

3.2 Overall, the research literature reports both positive and negative views of hostels by users (Van Doorn, 2000). Garside's study (1990) reported high levels of satisfaction among hostel residents about their accommodation, but this is not the case in all studies. The main concerns of residents reported in several studies are with overly restrictive rules and regulations in hostels, and the lack of security or concerns about safety. Communal living brings with it a whole host of complications, not least of which are noise, lack of privacy and the impact of other residents' behaviour (Garside et al, 1990, Ham, 1996). This study broadly mirrors these findings.

3.3 The degree to which hostels are able to meet the needs of individuals, for example of couples, people with dogs and other pets, families, those with alcohol and drug dependency or mental health problems, is variable and is recognised as a key concern with this type of provision for homeless people. Another key issue is user involvement and participation, and the research suggests that homeless people feel more positive towards their accommodation if they are involved in decisions about their home (Van Doorn, 2000). Such concerns and issues will now be examined in relation to the sample of hostel residents interviewed.

### **GENERAL VIEWS OF HOSTEL LIFE**

3.4 Living in hostels was infinitely "better than living on the street", and for some people, was a positive alternative. On the surface at least there was a high level of general satisfaction with hostels across the Scottish local authorities studied. The level of 'satisfaction' was marginally higher outside Glasgow when measured by the proportion of respondents describing hostels as a "good place to be". Respondents in Glasgow gave the following descriptions of hostels:

- 9 out of 10 respondents surveyed said the hostel was "a good place to live" or it was "alright"
- 42% of respondents thought the hostel was "a good place to live"
- 48% were of the opinion that the hostel was "OK" or "alright"
- only 11% assessed the hostel as a "bad place to be"

3.5 Respondents from the other 4 areas in Scotland gave similar replies:

- 95% were generally satisfied with the hostel
- over half (52%) described their hostel as "a good place to be"
- 43% described the hostel as "OK/alright"
- 4% said their hostel was a "bad place to be"

3.6 Explicit dissatisfaction, as measured by the description of hostels as “a bad place to be”, was commonest among residents in large and medium-scale local authority hostels in Glasgow, 2 larger local authority run hostels in Aberdeen, and a small voluntary sector emergency hostel in Perth and Kinross. In Glasgow, all but one who assessed hostels in this way, were male and all were under 40 years old thus signifying that older residents and females were perhaps more reluctant to be critical. However, in the other areas, of 4 respondents who assessed their hostel as “a bad place to be”, 2 were male and 2 female, all aged between 25-39 years. As a general rule, long-stay residents in larger hostels and those staying in specialist provision, for example young people or women, were most inclined to describe their hostel as a “good place to be”. As one 71-year-old male in a hostel in Perth and Kinross said, “It’s alright, it’s just a place. I don’t think much about it.”

### **Glasgow hostels**

3.7 One person who captured the general feeling of the majority of respondents living in Glasgow’s large-scale hostels for homeless people said:

*“It’s a roof over your head and a free breakfast in the morning.”*

3.8 Hostels were places to endure; acceptable not because they were necessarily “a good place to be”, though some were clearly qualitatively better than others. They were at least “better than sleeping outside” or some of the other alternatives. For the most part, respondents living in large-scale hostels said they provided a “roof over your head” but little else, although this was not a unanimous view.

3.9 Much of the criticism was levelled at provision in the large-scale hostels, and it should be remembered that 53% of interviews undertaken in Glasgow were with residents in hostels with over 100 beds, and that their views will have coloured the overall picture somewhat. Problems with this type of temporary accommodation are now well recognised by local planners and in the re-provisioning plans for the area.

3.10 So in common with other research findings, in the large-scale Glasgow hostels there was grudging acceptance of hostels as a place of last resort:

*“Just don’t like living in a hostel, I feel like I have nowhere to go and nobody wants me. I dislike everything, the feeling of being here and the people you have to share with from drug dealers to shoplifters.”*

3.11 In the main, the large-scale hostels were perceived as institutions, “like a jail, only you can come and go”, characterised by restrictive rules and practices. Only a handful of older men living in either large local authority or commercial hostels made such positive comments as “it’s like a home”. Whilst the physical conditions in a large commercial hostel were obviously poor, respondents placed greater value on having freedom to choose their own lifestyle - “there’s no hassle here”.

3.12 Larger hostels were both places to enjoy anonymity and as a result, a degree of privacy, but were lonely, impersonal places too. Some people hated staying in the large-scale hostels but felt they had no choice but to simply “just get on with it” and “make the best of it”. As one person said, “it’s unpleasant but when you’re depressed you accept things”

(Commercial hostel, Glasgow). By contrast, hostels with fewer than 25 beds were generally said to be more supportive, “homely”, less restrictive in terms of their rules and afforded residents greater autonomy and individual freedom.

### **Hostels in other areas**

3.13 In the other 4 areas, respondents' comments about hostels in general fell under 4 key themes: hostels provided a “roof over your head”; they were places to enjoy the company of others; some hostels supported independence; and they ensured access to suitable long-term housing. Similar to Glasgow, hostels were considered often as providing much needed physical shelter, warmth and facilities, a refuge from the streets, but they were not people's first choice. For others, communal living afforded valuable companionship and a place to belong. The privacy of single rooms was appreciated and the independence afforded by hostels, especially by younger people possibly moving away from the parental home for the first time. In others, hostels provided a supportive environment where people could explore suitable long-term accommodation options.

3.14 Hostels in Perth and Kinross appeared overall to be meeting people's physical needs, offering valued shelter, warmth and facilities. Respondents from this area frequently commented, “it's somewhere to stay, that's about it”. Several also viewed hostels as temporary, “a stepping stone back to reality”. Hostels in this area might offer “quietness and privacy”, but others found them regimented and restrictive. In Fife, where all the sample hostels had fewer than twenty places, hostels were places that supported independence and privacy - “having my own space” or “own freedom” were typical comments.

3.15 As one might expect given the range of hostel provision in Aberdeen, a variety of views were expressed. One view was that hostels were a temporary “stop gap”, to access more suitable housing. There was independence even in the largest provision, or “freedom to come and go as you please”, the privacy of single bedrooms, and “the staff are no a'ways on yer back”. These were aspects of hostel provision particularly appreciated by female hostel residents:

*“People can't contact you here by telephone, so no contact unless you wish it. Sometimes you need to dust yourself off and have your own time to make your own decisions.”*

3.16 The social life in hostels was highly valued by some residents, while for others it was the main complaint. Hostels provided a sense of belonging, of companionship with other people – “with people in the same predicament” or “you feel like you're with your family” – and staff who were friendly and supportive. On the other hand, the resident mix, that is, of men and women, young and old, and people with specific health problems including alcohol and drug dependencies and mental health problems, was the main source of dissatisfaction with hostel life. This was particularly so in the large-scale hostels with a higher resident turnover. As one person said, “I like meeting new faces, but in saying that, there's some o' them you don't want to see”.

3.17 In the paragraphs that follow, specific aspects of living in hostels will be explored from residents' perspectives. Respondents did not always comment on every facet of hostels. Not surprisingly, individuals' experiences of hostels differed, even people living in the same

hostel sometimes viewed the experience differently. It was difficult at times to generalise views and at the same time, do justice to the spectrum of opinions expressed by such a diverse range of people. Where possible, key themes and variances in views have been highlighted.

### **Residents' likes and dislikes**

3.18 Respondents comments have been analysed under 3 main headings: their views about the physical properties or features of hostels; their opinions of the extent and quality of shared facilities; and finally, opinions about social aspects of hostel life.

#### **Physical features of hostels**

3.19 Overall there was a high level of user satisfaction with physical conditions in hostels although there were some telling criticisms of particular features:

- 91% of Glasgow respondents, and 94% in other areas, thought where the hostel was situated was either “good” or “alright”
- 85% of Glasgow respondents, and 89% in other areas, thought the state of the building was “good” or “alright”
- 84% in Glasgow, and 91% in the other areas were reasonably happy with the size of the hostel
- 83% in Glasgow, and 88% in other areas thought hostel entrance areas were “good” or “alright”
- 81% of Glasgow respondents and 94% in other areas, were satisfied with their bedroom

#### *Hostel locations*

3.20 Overall, hostels that were centrally located and provided access to a range of community facilities including shops, DSS offices, public transport, or, in the case of one of the commercial hostels in Glasgow was “next door to the off-sales” were liked by residents. It was pointed out however, that homeless people staying in city centre hostels sometimes encountered prejudice – “people round about don’t like the homeless, there’s been a few punch ups”, and older residents especially didn’t like traffic noise. Several hostels were located out of town in quieter areas, and for some people this was ideal, but others felt isolated. Hostels that were in areas considered “rough” and “dangerous” or a “bit spooky” were disliked. Residents staying at a specialist hostel in Aberdeen for women, highlighted particular problems with rural locations:

*“It’s in the middle of nowhere. It’s a silly place to put a women’s refuge. If it was in the town centre where there is lighting, not on a country road would be better. We have enough problems of our own without being confronted by a strange man who’s just climbed in the window.”*

### *State of hostel buildings*

3.21 Respondents' views of the outside of some hostels, mainly the large, traditional establishments were "needs a facelift" or "could be better". Although hostel interiors were often acceptable, as one Glasgow resident put it, the exterior appearance of hostels could be "pure boggin". Rubbish piles were said to clutter the pavements in front of some Glasgow hostels and some of its buildings were felt to be in dire need of repair and renovation. One of the commercial hostels was said to have had mice and cockroaches and was cold, but it was said, "I've slept in worse places". Given the standard of physical accommodation in the commercial sector hostels in Glasgow is acknowledged to be poor (see Chapter Six), it is perhaps surprising that so few respondents criticised these conditions.

3.22 The 2 largest hostels in Perth and Kinross had recently been refurbished. Aberdeen's hostel residents consistently commented, "it's run doon", or "needs a bit of attention", apart from in the voluntary sector specialist 'wet hostel' (i.e. a hostel where controlled drinking is permitted) where one person said "I was surprised when I came in how clean it was". Other small hostels in this area were considered to be "run-down and old-fashioned." One of the local authority hostels in Fife was "clean and hygienic" if "boring", while the other was "a bit old" and needed "tidying up and painting". In short, large-scale traditional hostel buildings especially those in Glasgow, were felt to be "not nice, not horrible", with a few exceptions.

### *Hostel entrances*

3.23 Views on entrances ranged from "clean and usually tidy" to "no-go areas"; the latter occurring notably in the larger Glasgow hostels. Such entrances were seen as places where people who were drunk or were taking drugs congregated. In addition, these larger hostels typically had the most unwelcoming entrances, some being described as "like a jail" because of security procedures, or as a "bit of a shambles". However, not everyone was that concerned about hostel entrances, whatever state they were in – "I just pass through them".

3.24 Entrances to small hostels were generally felt to be "clean and safe" and "homely", though not always. A few residents in smaller hostels had front door keys though they were in the minority. The importance of procedures to unlock doors was appreciated from a security point of view, but it was also resented. Having to rely on staff to unlock doors meant "you feel like you're five, knocking on the door for your mum to let you in".

### *Hostel size*

3.25 Although not choosing to criticise the size of hostels outright, the majority who were living in the large-scale hostels made comments such as "it should be a bit wee-er", and that smaller groups would serve people's needs better. In spite of the large-scale of a commercial hostel in Glasgow, one opinion was that "it's too small for the number of people", suggesting that even in large hostels there are problems with overcrowding.

3.26 Comments concerning hostel size in respect of those staying in the smaller hostels, particularly those with under 30 places, were consistently positive, for example, residents commented that "it's ideal", or "just right for everyone", thus confirming the trend towards smaller units as characterising best practice (Fitzpatrick et al, 2000).

3.27 The main advantage of smaller hostels was that they “did not feel like an institution”, and were better, in comparison to large-scale hostel provision - “these huge places aren’t nice”. The majority of hostels in the other areas, except Aberdeen and Perth, were small-scale mainly under 20 places, with the largest hostel unit in this study outside Glasgow having 73 places split between 3 properties. Respondents’ comments on hostel size in the other 4 areas need to be understood in this context. Generally, respondents outside of Glasgow were positive about the size of their current hostel, even those staying in medium-sized hostels of 50 or more residents. Advantages were perceived to be in terms of socialising with a greater variety of people.

### *Hostel bedrooms*

3.28 An emerging trend in recent years has been to provide single bedrooms, and this was reflected in the largest of Glasgow’s hostels. Ninety nine percent of residents interviewed in Glasgow had their own bedrooms. In the other areas, there were fewer single rooms (69% had their own room) because several of these hostels were accommodating families and couples. In one survey (Ham, 1996), the provision of single rooms alongside staff attitudes was a main determinant of how residents coped with hostel life.

3.29 The predominant view in the Glasgow hostels was that despite single rooms offering valued privacy, they were “like cells”, and were often cold. Bedrooms in the large commercial hostel were described as “cubicles”. This did not of course apply to all hostels. In some of the smaller hostels, there were fitted bedrooms with amenities including a fridge, TV, and en suite shower and toilet. Outside Glasgow, single rooms could also be small and although being able to have a child with parents in the hostels was generally considered positive, it depended on the size of the room. Bedrooms shared by several family members could feel “cramped” and “stressful” because “you ain’t got no privacy from your children”. Some hostels provided adjoining rooms for the children and this was more favourable, particularly for longer staying residents.

### **Shared facilities**

3.30 Provision of different services and facilities varied considerably from hostel to hostel. Some provided meals, especially in Glasgow, or provided communal cooking facilities while some also provided laundry or leisure facilities such as TV or pool tables. The quality as well as the extent of shared facilities came in for criticism from respondents. A poor standard of physical accommodation and facilities was evident in most large-scale hostels in Glasgow, and especially in the commercial sector. This was in sharp relief to the standards of accommodation provided by smaller hostels and supported accommodation services, developed by local authorities, housing associations and voluntary agencies since the 1980’s in Glasgow and elsewhere in Scotland.

### *Cooking and the provision of meals*

3.31 There were some notable variations between the areas covered, both in residents’ opportunities for food preparation and in their views of the food provided by hostels:

- In Glasgow, half of the respondents did not have access to shared cooking facilities. Of those who had meals provided, 70% were satisfied with the food provided but a quarter said hostel food was “poor”.
- Outside Glasgow, the vast majority of people (80%) did their own cooking, and 90% of people living in hostels that provided food said it was “good” or “alright”.

3.32 A sizeable minority in both areas stated a preference to do their own cooking in hostels where shared cooking facilities were not provided. In Glasgow, 2 out of 5 people without access to shared cooking facilities preferred to cook, and while most people (80%) in the other areas did their own cooking, nearly half (47%) of those who did not said they would prefer to cook themselves.

3.33 Comments on the standards of hostel food varied. In Glasgow, although 70% were satisfied some thought it was “worse than jail grub”; it was poor quality and did not provide residents with choice, including healthy options. There was though an appreciation of the restricted budget and of staff doing their best in limited circumstances. Although eating in hostels was generally considered cheap, some people found it expensive:

*“It’s supposed to be cheap but everything is extra. You pay for potatoes, peas so it mounts up for a main meal. It’s like £4 a day which is a lot to eat.”*  
*(Glasgow)*

3.34 Outside Glasgow, the views varied between hostels. In Aberdeen for example the quality ranged from “brilliant – good presentation and very colourful” in one of the smaller hostels to “quite disgusting” in a bigger hostel. In Perth and Kinross, a small voluntary sector emergency hostel had “great cooks” and respondents commented that the food was “terrific”. In Fife and North Ayrshire, those who commented said that residents did their own cooking.

3.35 Being forced to eat in a shared dining room could be problematic for quite individual reasons:

*“I don’t like eating in front of people. I wait until everyone is out. I face the wall, it’s part of drug abuse paranoia.”* *(Aberdeen)*

3.36 Cooking facilities provided in Glasgow’s hostels were often considered inadequate both for the numbers of residents or in terms of the task – for example, in one there was a cooker but no cooking utensils and tin openers. Pots and pans had been stolen in another hostel. Some hostel kitchens were open only at specific times of the day - many were unavailable after 6 p.m. In only 2 Glasgow hostels, both with fewer than 20 residents, were cooking facilities described as adequate. Kitchens in these hostels were well equipped and open any time of the day and night. In the other areas, 2 problems were highlighted: one was about the practicalities of having to share with several other people; and secondly, that the provision of microwave ovens rather than traditional cookers did not suit everyone’s preference or skill.

### *Leisure facilities*

3.37 There were a variety of views on the leisure facilities on offer in hostels with a strong critique emerging:

- 37% of Glasgow respondents, and 35% from other areas, did not think much of the ‘leisure facilities’ provided, if any.
- Although over half (54%) thought the lounge/TV room provided in Glasgow hostels was “good” or “alright”, 26% said it was poor.
- In the other areas three-quarters thought the lounge/TV room was either “good” or “alright”, while 12% said it was “poor”.

3.38 Hostels were resource-poor in terms of meeting people’s leisure and recreational needs. Provision tended to be limited and the quality variable, nor did they cater for people with special needs such as visual impairments or hard of hearing. In the main, leisure provision didn’t stretch beyond access to a TV in communal lounges or, in some hostels, in the bedrooms. Other forms of leisure, including watching videos, reading books, playing board games or anything else, were “non-existent” in all but a few hostels. Respondents commented that pool tables were “too expensive” and equipment might be in a bad state of repair. One Glasgow hostel had a gym and a pool/snooker room. However, respondents from this hostel said the gym was “often locked”. A voluntary sector hostel for young people in Aberdeen was unique in meeting broader leisure needs:

*“There’s a TV, Playstation, computer, a bookcase full of books. They take us out. Next week we’re going to the wrestling. We’re taken out to restaurants. If we want to go to the gym, they give us money for that. It’s good ‘cos I don’t suppose they’ve much money for that.”*

3.39 Sixteen percent of Glasgow respondents and 9% in the other areas, could not access a shared lounge or TV room. Respondents were somewhat reluctant at times to use shared lounges or TV rooms for a number of reasons. Not only were shared lounges described as uncomfortable places to be, because they were either small, poorly equipped or badly furnished, they were also a hotbed of conflict where fights frequently broke out. Some found shared lounges “intimidating”, or stigmatising - “it feels like a homeless place, sittin in it” (Aberdeen resident). The alternative was to escape to the privacy of bedrooms.

3.40 Restrictions concerning eating and drinking in lounges were perceived by respondents as overly restrictive. Common rooms in the large-scale Glasgow hostels especially were places where some residents got drunk or “the junkies spoil them” and so were avoided at all costs. An Aberdeen respondent said, “If there was a better bunch of people I’d use it.” Not everyone agreed with this general picture however; one resident in a specialist ‘wet hostel’ in Aberdeen commented “The TV lounge is great. After a night oot, we might hiv a sing-song and a can o’ lager afore bed”.

### *Shower/bath and toilets*

3.41 While most were happy with the quality of shower/bath and toilet facilities, a significant proportion of respondents interviewed found these to be of poor standard:

- While three-quarters of people in Glasgow felt the shower/bath and toilet facilities were fine, a significant minority of 20% thought such facilities were “poor”.
- 88% of respondents in the other areas were happy with shower/bath and toilet facilities in the hostel, while 12% said they were poor.

3.42 In Glasgow’s 2 large local authority hostels, respondents’ found the shared washing and toilet facilities inadequate, both in number and in terms of cleanliness. Differences of opinion can be explained by the fact that there were different cleaners for each floor of the building. In one, respondents described facilities as “mingin”, and some residents even had to resort to “use bog roll to stop the water from going down”. More complaints were made about toilets, which were described as a “disgrace” in the other large-scale local authority hostel. Respondents commented on needles and dirty clothes by toilets, and vomit in sinks.

3.43 In the large commercial hostel, hot water was restricted to certain times of the day and several respondents did not use the showers but resorted to washing themselves in sinks. Facilities were inadequate to meet the needs of physically disabled people:

*“I’d like a bath – I’ve not had a bath or shower for a year. I’m scared to take a bath or shower on my own because I’m disabled.” (Commercial hostel, Glasgow)*

3.44 Medium and smaller-scale hostels in Glasgow, provided washing or bathing and toilet facilities that were more acceptable to respondents, but in the local authority hostel for women, respondents felt there was an inadequate number of baths and showers for the number of residents. Facilities in the smaller commercial hostel and voluntary sector hostels were described as clean and offered en suite facilities in some places.

3.45 In the other areas, there was a mixture of en suite and shared facilities. Any difficulties were around sharing, but in general, respondents assessed toilet and bathing facilities as clean and adequate. A particular problem was identified by several respondents from North Ayrshire in the larger housing authority run hostel regarding the water supply: “the water’s revolting, people have been getting skin infections”, and “the bath/shower is alright, it’s the water that comes oot it, it’s brown.”

### *Laundry facilities*

3.46 Both residents’ access to laundry facilities and their views on the quality of these varied between areas:

- Three-quarters of Glasgow respondents had access to laundry facilities and were generally happy (77%), but 23% said they were “poor”.
- The vast majority of respondents (95%) in the other areas had access to laundry facilities and most of these felt they were “good” or “alright”, apart from 4% who felt laundry facilities were “poor”.

3.47 A general impression was that laundry facilities in Glasgow’s large-scale hostels were woefully inadequate for the number of residents. It was reported that in one hostel, there was only one washing machine and one dryer to be shared by over 200 men. Generally, washing machines tended to be old fashioned, inefficient, and often broke down. Laundry facilities in

the commercial sector hostels appeared to be non-existent and many residents resorted to washing clothes by hand, or staff provided a laundry service. In some cases, relatives helped out, or they used external facilities such as commercial launderettes or facilities at day centres. In the other areas, and other types of hostel in Glasgow, such facilities were more widely available and well used by respondents. Respondents from smaller hostels generally had superior laundry facilities and made greater use of them.

### **Social aspects of hostels**

3.48 Most hostel residents interviewed expressed happiness with the social life in hostels:

- In Glasgow, 89% of respondents, and 85% in the other areas said they were happy with the ‘social life’ of the hostel.
- 27% in Glasgow and 19% in the other areas were not happy with the mix of residents in hostels.

3.49 Criticisms focused on the social mix in hostels. Although it was generally recognised that hostels had to cater for people “from all walks of life”, and that “you can’t pick and choose who you’re living with”, tensions created by the resident mix had a major influence on how people felt about hostels. One Glasgow respondent commented, “It’s a bit too eclectic”. Any positive comments about resident mix came mainly from those in specialist hostels for women or young people, suggesting that targeted hostels were catering better for individual needs.

3.50 Dissatisfaction with the social mix was mainly in relation to the presence of drugs takers, but was also expressed in respect of alcoholics, mixed sex groups, and mixing young and older people – “Older ones should have more care, and young ones should have more to do” (Glasgow resident). In several of the hostels in the other 4 areas, a different problem, that of “kiddies running riot, especially at night” was highlighted.

3.51 The presence of alcohol or drugs in hostels caused most friction. Older residents in particular were intolerant of younger drug users; they were “getting too old for all of this”. Younger people were equally intolerant, at times, of what they perceived the challenging behaviour of “the alkies” or older alcoholics. Even in a specialist, ‘wet hostel’ in Aberdeen, residents could be intolerant of other people:

*“It’s not nice at all. Some are drunk, some are sober, some are mental. You don’t choose who you talk to, they come and talk to you.”*

3.52 Non-drug users felt unsafe with drug users present; in the large-scale Glasgow hostels respondents spoke about discarded needles, having money stolen and being pestered for money by drug users. The overriding feeling was that they “just don’t care about anyone else but themselves” and would “steal the sugar out yer tea”. In Aberdeen and Perth and Kinross, where family groups were common in hostels, respondents were concerned about “drug addicts being on the same floor as children”. Problems caused by drug taking appeared to be endemic, but they were most concentrated, and therefore perceived to be worst, in the large-scale local authority hostels in Glasgow.

3.53 Staying in hostels reinforced social exclusion and it was virtually impossible to escape the “temptation of drink/drugs” (Glasgow respondent). The presence of drugs in hostels made it difficult, if not impossible, for those who wanted to change, as the following individuals observed:

*“I’m in and out of jails. When I’m in jail I get cleaned up but when I go back to the hostels, I always fall into my bad ways.” (Resident in large hostel, Glasgow)*

*“You’ve got heroin addicts, it’s difficult for people trying to come of it. They’re in your face. There should be separate hostels for drug users and non-users.” (Resident in specialist young people’s hostel, Aberdeen)*

3.54 Across the spectrum of respondents, but particularly strongly expressed by those staying in traditional mixed sex hostels, was a view that there should be specialist and separate provision to meet individual needs. That is, specialist provision for people with drug and alcohol problems and mental health problems, and separate provision for men and women, and young and old. Respondents commented on the inappropriateness of hostels for homeless people in trying to meet such a broad range of needs within one building:

*“I’m not sure whether the few with obvious mental problems should be in a more appropriate facility.” (Resident in voluntary sector hostel in Perth and Kinross)*

## Charges

3.55 Comments about hostel charges varied between Glasgow and the other areas: 83% of Glasgow respondents thought the charges levied by hostels were “good” or “alright”, while only 54% in the other areas were of this opinion. Nearly a fifth (17%) of the overall sample in the other areas were specifically unhappy about hostel charges, compared to 14% in Glasgow.

3.56 Asking for people’s comments on hostel charges, elicited general views on the problems of managing on Benefits overall, and a general sense that the money people had to live on in hostels was not enough:

*“They don’t seem to understand that they may leave you enough for food, but not to pay general expenses and on-going debts.” (Resident in specialist hostel for women in Aberdeen)*

3.57 Hostel charges were considered expensive if the hostel was “poor value for money”. In Aberdeen, respondents living in local authority accommodation commented that “it’s a bit much with the condition it’s in” and “you could get a 3-star hotel room for the price of this place”. Fees were paid automatically through “the Benefits Agency” or “at source” from Housing Benefit, but respondents in the other 4 areas, especially in Aberdeen, still considered charges expensive and commented that “if I was out working I wouldnae pay it (£33 a day)” (Aberdeen resident). Respondents did not consider charges of between £50-£100 a week affordable and felt it might deter some from seeking work while having to live in hostels.

3.58 The most common comment made in relation to hostel charges in Glasgow was that they were “reasonable”, but the criticism that charges were “extortionate”, “bloody expensive” or just plain “too dear”, was levelled at 3 of the large-scale hostels in Glasgow. These included 2 local authority hostels (where rents are in excess of £200 per week) and one commercial sector hostel, and a medium-sized local authority hostel. Comments in respect of a medium-sized voluntary sector hostel were most favourable. Charges in this hostel were “reasonable for what we get”, “good”, “cheap”, and “good value”.

3.59 Hostel charges, however small, that directly affected residents, were resented most when the hostel did not seem “good value”. For example, one respondent in North Ayrshire commented:

*“Don’t think you’re getting your money’s worth. It’s the cheapest own brands. Used to put out cereal and toast but that’s been cut back. If you ask for milk it’s grudged but that’s what your £7 is supposed to be for.” (Resident in Housing Association hostel)*

3.60 In another North Ayrshire hostel, respondents disliked paying for laundry facilities, although this was not mentioned by other respondents elsewhere: “I dinnae think ye should pay fir it. They should put free powder”. However, not all residents in North Ayrshire shared this view. Others said the charges were “pretty reasonable”, or “cheaper than my last place”.

## MANAGEMENT

3.61 Resident interviews covered a number of aspects of hostel management, including rules and regulations, personal safety and privacy. Eighty-five percent of Glasgow respondents, and 89% from other areas, were happy with the way the hostel they were living in was managed. However, individual aspects of management did attract some criticism, particularly the rules and regulations and the quality of relationships with staff. Most of these dissatisfied residents felt that management did not really listen to their concerns, and only if “your face fits” were staff helpful.

3.62 The quality of staff was seen to be variable and it is difficult to generalise about types of hostel or area: there were “good and bad” in all of the hostels. Managers varied from approachable and hands-on, to distant managers who “takes nothing to do with the people and feel like he turns up his nose at people” (North Ayrshire). In a large commercial hostel in Glasgow, where respondents had highlighted shortcomings in terms of physical conditions in the hostel and resident mix, the comments regarding management were overly positive, for example, “it’s run very well”. Different management styles were evident, ranging from hierarchical distant management, particularly in the large-scale hostels, to completely democratic for example, in specialist hostels for women – “it’s nae actually run”.

### Rules and regulations

3.63 All hostels impose some rules to govern the behaviour of residents, to ensure fair treatment and generally to be able to manage group living on both a large and small-scale. Many researchers have identified hostel rules and regulations as problematic and a major

source of residents' complaints (Carlisle, 1993; Ham, 1996). In this survey, just over half (53%) of Glasgow respondents, and a higher proportion (64%) from other local authority areas, said the rules of the hostel suited them, while for the remainder, the rules were unwelcome.

3.64 Curfews, rules limiting or banning alcohol, drugs or smoking, and in particular, those restricting visitors, impinged on respondents' preferred lifestyles, restricted choice and personal freedom, and ultimately undermined dignity and self-respect. One respondent commented that "the balance isn't right between rules and individual responsibility" and this "doesn't help prepare people for real life". Rules were designed to eliminate irresponsibility, and consequently, removed individual responsibility; in other words, people were disempowered by such rules. Two key aspects will be discussed in relation to rules: one concerns respondents' views on specific types of rules; and the second, inconsistencies in the application of rules.

#### *Rules about visitors*

3.65 Across the entire sample, rules banning or restricting visitors to hostels, were the least popular. Only a handful of hostels, one in North Ayrshire, a local authority hostel in Aberdeen and a smaller commercial hostel in Glasgow allowed residents to have visitors, usually same sex or family, in their own rooms, but only at certain times of the day. There were rules barring people of the opposite sex in bedrooms at night in most hostels and in some, all visitors were barred after 6 p.m.

3.66 Not all hostels allowed visitors, and where they did, residents were restricted to using public lounges, which in the respondents' opinion was an "invasion of privacy". Rules concerning visitors discriminated against couples, and acted to discourage the natural contacts with family members:

*"It's bad enough bringing them into a place like this, but to have to sit and talk in front of people – there's no privacy. Partner's brother came once and hasn't been back. We couldn't even show him the room we are living in. Partner's dad is very unwell and the lounge was full, there were kids running around screaming downstairs. We couldn't even sit on the edge of the bed and talk. We ended up going outside." (Resident in local authority accommodation units in Aberdeen)*

3.67 Often all that was wanted was a private room to meet family and close friends occasionally, either a special 'visitors room' or to be able to use their own bedrooms. The few who were able to take visitors to their bedrooms, remarked positively. Blanket bans on receiving visitors discriminated also against people with special needs:

*"I would like to have visitors because I'm agoraphobic and I can't get out. They do let them in for me now and again, but always tell them that visitors aren't allowed so that doesn't encourage them back." (Resident in local authority emergency hostel, Perth and Kinross)*

### *Curfews*

3.68 Curfews dictating when residents had to be in the hostel at night, or the number of nights away they were allowed, were perceived as “like a mini jail – clocking in and clocking out”. This impinged on people’s lifestyles and freedom of movement. As one Glasgow hostel resident commented, “you are still paying rent and should be able to stay out if you want to”. Such rules did not respect basic human rights and appeared to treat residents “like a child”. Time restrictions ranged from having to be in bedrooms by 11:30 p.m. in some Fife hostels, to having to be in the hostel by midnight in Glasgow, Aberdeen and Perth and Kinross.

### *Smoking Bans*

3.69 In Aberdeen, a quarter of respondents, all staying in the local authority accommodation units, complained about a smoking ban. While it was claimed that 90% of residents and staff smoked, there was no provision for smokers in the hostel. The only place to smoke was outside the hostel, “whatever the weather”, and at certain times this opportunity was restricted to one person at a time. This rule was variously described as “stupid”, and “understandable”. Residents understood why they were not allowed to smoke in their rooms but they wanted a “smokers’ room”.

### *Inconsistency in applying rules*

3.70 What was unpalatable to many respondents was the way some staff applied rules to some and not to others. It was perceived by respondents as favouritism and was divisive. For example, it seemed inconsistent to one person staying in a large-scale local authority hostel in Glasgow, to ban “the odd can of lager” for a social occasion when “junkies are lying in a heap at the door”. This was not only the case in Glasgow, respondents from hostels in North Ayrshire observed “rules for some people and no for others”. Rules were applied inequitably:

*“There’s favouritism. Last week one of the old women’s husbands was allowed into breakfast. If it was the younger ones, we wouldn’t be allowed. But I found it difficult especially because I don’t like to eat in front of people at the best of times, never mind a man.” (Resident in local authority hostel for women, Glasgow)*

*“They change the rules around a lot. The rules apply to one person and then not to the next person. They change them around a lot.” (Resident in Housing Association hostel, North Ayrshire)*

### **Safety and security**

3.71 People staying in hostels in the other areas appeared to feel safer, relatively speaking, than those staying in Glasgow’s hostels. More residents in the other areas felt safe “all of the time” (63% of respondents in other areas compared with 56% in Glasgow). However, more respondents in Glasgow felt safe “most of the time” (40% of Glasgow respondents compared

with 29% from other areas). A minority of residents did not feel safe any of the time: 3 people in Glasgow, 2 men living in a large local authority hostel and one woman living in a local authority hostel for women; and 8% of people in the other areas, mainly women.

3.72 The issue of safety is complex and some respondents believed it was a matter of “personal confidence” or a “state of mind”. Nevertheless, quite clearly some hostels, especially large-scale hostels in Glasgow but not exclusively, were volatile and “edgy” places to live. Even those respondents in Glasgow who said they felt safe, made comments like “you have to watch your back in this place”, and “I know the ones to stay clear of”. Other respondents spoke about “having no security in life and that makes me feel vulnerable”. They commented that they could not feel safe anywhere because of events in their past that still haunted them.

3.73 Even though residents in some hostels were not so transient, the fact that generally in hostels “you never know who’s on your landing”, made them places that were difficult to fully relax in:

*“In some ways I do feel safe, in other ways I don’t. You never know who is coming up the stairs and you never know who is outside the door at night.”*  
*(Smaller commercial hostel, Glasgow)*

*“I’ve been living with alcoholics and drug addicts – would you feel safe? I had to give information to the CID about an attempted murder case and they have put one of the men that’s accused in the room opposite me. There’s another that’s accused living here.”* (Resident in local authority emergency hostel, Perth and Kinross)

*“The first time I moved here in 1996 I got seriously assaulted in this building and I do know it might happen again. The other night when my room was broken into staff did not do a room search, that’s really out of order. It was 2 days later they did that.”* (Resident in local authority emergency hostel, Aberdeen)

3.74 Feeling safe was not a constant. The transitional nature of hostel populations called for a constant state of vigilance. Those who were new to hostels and still finding their feet tended to be less sure of themselves than more experienced residents. Threats did not always come from other hostel residents but for example, might be ex-residents or abusive partners, or debt collectors. For most people in this kind of situation it made sense, in terms of self-protection, to keep a low profile, “keep myself to myself”, which then served to perpetuate social isolation and exclusion.

3.75 Closed circuit TV cameras and the presence of staff twenty-four hours a day provided some degree of security – “takes a weight off my mind because of the cameras” (voluntary sector general hostel, Glasgow). However, CCTV only provided security if properly monitored by staff:

*“You get paranoid in here because the amount of junkies in here. Some people have been robbed but the staff just sit on their arses. They say there is nothing they can do.”* (Resident in large local authority hostel, Glasgow)

3.76 Women staying in a voluntary sector women-only hostel in Glasgow were in constant fear for their safety because of the domestic violence that had brought them to the hostel in the first place, even though they felt safe inside the hostel building. Respondents in small, specialist hostels for young people in Glasgow and elsewhere were the ones who seemed to feel safest – “we just know we’re safe” (specialist hostel, Glasgow).

3.77 Again, the theme of “can’t pick and choose who’s homeless” was highlighted when considering how to improve safety in hostels, making it a difficult issue to resolve satisfactorily. However, respondents suggested a number of measures. Moving out of hostels into a “home of my own” would increase some people’s feelings of safety and security, though it should be remembered that some people came into hostels from violent relationships and neighbourhoods. Providing specialist support for people with drug and alcohol problems and people with mental health problems could improve the safety of other residents. Similarly, banning people who had serious drug or drink problems and, linked to this, better vetting procedures to exclude violent people were proposed – “keep the troublemakers away from clean people” (large local authority hostel, Glasgow). In other areas, where families and single people were mixed, as in Perth and Kinross, it was felt there should be “more checks on people’s convictions as there was a scare about people interfering with some of the kids”.

3.78 Respondents in Glasgow and Aberdeen hostels wanted waking night staff to be more vigilant, regularly patrolling and checking landings and communal areas, and “proper” security guards at the entrances to the larger hostels, not “ones that my granny could push over” (resident in large local authority hostel, Glasgow). Others suggested locker systems for valuables, changing the combination for locks regularly, and panic or alert buttons might help.

## Privacy

3.79 Living in the majority of hostels, except smaller specialist hostels that were more like ordinary houses, was likened to “being on candid camera”, or “Big Brother”. Although 99% of respondents in Glasgow had single rooms and the majority (65%) felt they had all the privacy they needed, nearly a quarter (24%) commented that they would appreciate more and did not like “staff bursting into the room at any time”. In the other 4 areas, with fewer single rooms because of hostels generally catering for families as well as single people, the majority (68%) felt they had all the privacy they needed. The remainder sought increased privacy, especially 13% who said they “definitely didn’t have enough privacy”.

3.80 Hostel routines such as regular room checks, however necessary, invaded residents’ privacy. One voluntary sector hostel in Glasgow expected residents to vacate their rooms during the day. This, combined with regular room checks, compelled residents to “live a very public life”:

*“The room checking can deprive you of some privacy but that has to be done. The ultimate is having to be out of your room from 9:30 a.m. and having to share space and time with the others when sometimes you just want to be alone.” (Resident in medium voluntary sector hostel, Glasgow)*

3.81 One of the major complaints across the entire sample about a lack of privacy concerned the way staff conducted check-ups on residents. The primary criticism was about the way in which staff in general, or particular staff entered bedrooms, sometimes without waiting for residents to answer, and used pass keys. This “invasion of what little privacy you have” was by far the commonest complaint regarding privacy and it was endemic in the hostel sector. Consequently, people felt they lived their lives under constant surveillance, “they’re always checking on you and writing everything down”, and stripped of basic human rights:

*“There a guy (staff) with a key who comes in whenever he likes. You might be there when he comes in. He’s a bit of a freaky dude. He throws away stuff you might not want thrown away. He’s always in a bad mood. I don’t think he likes his job.”* (local authority emergency hostel, Aberdeen)

3.82 Three-quarters of Glasgow respondents and 58% of respondents from other areas did not have anywhere private to take visitors. As acknowledged above, the general lack of privacy for residents’ visitors, and strict rules about visiting times were major sources of resident dissatisfaction with hostels. Respondents from a specialist hostel for young people in Fife, complained about the lack of privacy for couples – “if you bring your girlfriend in, you have to keep the door open and everyone walks past. You only get half an hour.”

3.83 Although some preferred not to have visitors at all, and most understood why it might be problematic for staff and other residents to have strangers in the hostel, the majority wanted a private room, just “somewhere to sit down comfortably and make a cup of tea”. Even when visitors were allowed into the hostel, privacy was sorely lacking, except for the few who could use their bedrooms:

*“There’s a small part to the kitchen for visitors but people are watching TV so it’s not private. I’d like a private area to take my visitors away from residents. You don’t feel you’ve freedom of speech, you feel people are listening.”* (Resident in local authority hostel for women, Glasgow)

## SUPPORT PROVIDED

3.84 Respondents were asked to identify whether they received support, and the type of help received, both from staff within the hostel and from visiting professionals and volunteers.

### Support provided by hostel staff

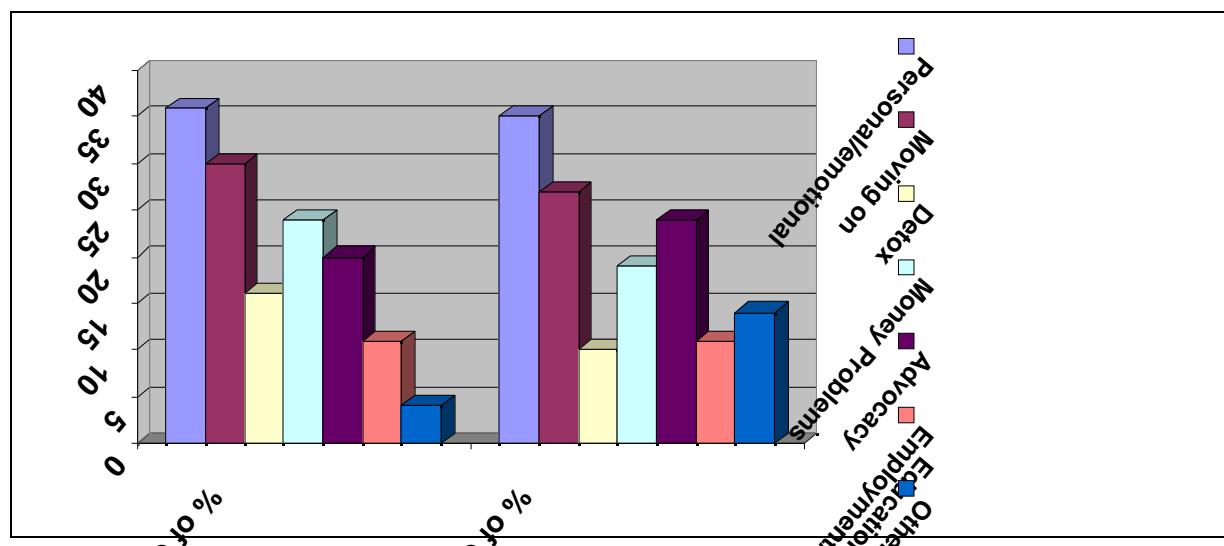
3.85 Respondents outside Glasgow were most likely to receive help from hostel staff. Forty-nine percent in Glasgow, compared to 31% in the other 4 areas where hostels tended to be smaller overall, reported that they did not get any help from hostel staff. Of those who didn’t receive help in Glasgow, 7 out of 10 were staying in one or other of the large local authority hostels. In the other areas, respondents who did not receive help were spread across 8 out of the thirteen different hostels. Of those who received help from staff, 65% in Glasgow and 68% in other areas, rated such support as either “good” or “alright”. One in 10 in Glasgow and 4% in the other areas rated staff help as “poor”. The type of support received

is shown in the table below, and a comparison between that received by Glasgow respondents and the other areas is shown in the figure.

**Table 3.1 Support provided by hostel staff in Glasgow and the Other Areas**

Type of support	% of Respondents	
	Glasgow Sample	Other Areas' Sample
Personal/emotional support	36	35
Moving on/resettlement help	30	27
Detoxification	16	10
Money Problems	24	19
Advocacy	20	24
Employment/Training/Education	11	11
Other	4	14
Don't get help	49	31

**Figure 3.1 Type of support received from hostel staff in Glasgow and Other Areas**



3.86 Of those receiving help from hostel staff, the majority in both Glasgow and elsewhere felt staff helped them with emotional and personal problems. A marginally higher proportion of respondents in Glasgow hostels received help with resettlement and drug or alcohol problems (though not in either of the commercial hostels), and money problems (apart from in one of the large local authority hostels) than elsewhere. Slightly more respondents elsewhere highlighted hostel staff acting as advocates on their behalf and other types of unspecified help. Aberdeen hostels, particularly the specialist 'wet-hostel' and young people's provision, provided most support with drug or alcohol problems. In both Glasgow and elsewhere, specialist young people's hostels gave most support with finding a job, training or education.

### Support provided by outside professionals or volunteers

3.87 Forty-nine percent in Glasgow and 55% in the other areas did not receive help from any visiting professionals or volunteers. For those who did, as the table and figure below show, the most significant professionals were general practitioners (GP's), housing

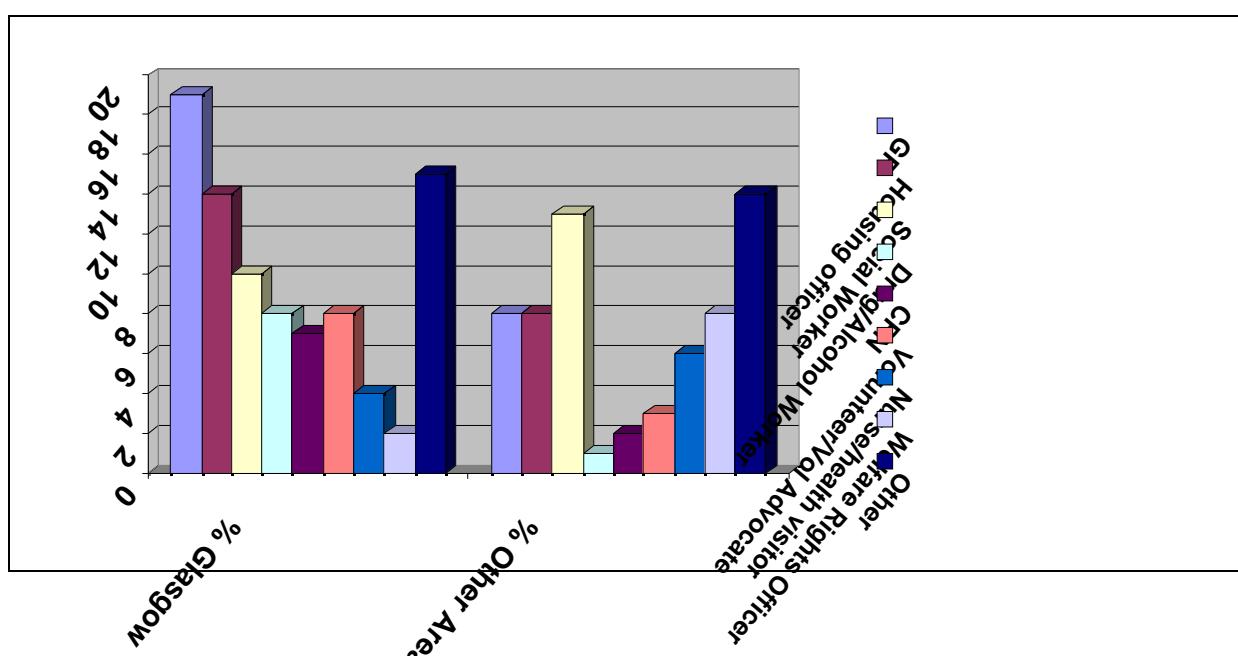
department officers, social workers, welfare rights and specialist drug/alcohol workers. The category of 'Other' included chiropodist, lawyer, psychiatrist, dentist, church, family, Rough Sleepers Initiative worker, a specified voluntary sector day centre in Glasgow, family planning, and adult literacy.

3.88 The pattern of provision in Glasgow's hostels compared to the other areas differed somewhat. Respondents from other areas were generally more likely to have seen a social worker for instance, whereas in Glasgow, specialist drug/alcohol workers visiting residents was more common. Also, despite 3 times as many respondents identifying mental health problems in the other areas, fewer residents reported having been visited by a community psychiatric nurse (CPN) than in Glasgow. There was a higher proportion, however, who reported receiving help from welfare rights workers outside Glasgow. Visiting professionals and volunteers provided very similar types of support to residents in hostels regardless of geography, although more help with detoxification was provided by outside professionals in Glasgow.

**Table 3.2 Percentage of the sample who were receiving help from different types of professionals or volunteers visiting the hostel**

Type of professional	% of Respondents	
	Glasgow Sample	Other Areas Sample
GP	19	8
Housing officer	14	8
Social Worker	10	13
Drug/Alcohol Worker	8	1
CPN	7	2
Volunteer/Vol Advocate	8	3
Nurse/health visitor	4	6
Welfare Rights Officer	2	8
Other	15	14
None of these	49	55

**Figure 3.2 Comparison of different types of professional offering help in Glasgow and other areas**



3.89 All forms of support, whoever provided it, was valuable to residents, especially interventions on their behalf with outside agencies sorting out money problems and getting help to move on. Here again, respondents emphasised the importance of “friendly and helpful staff”. The help received with drug or alcohol problems was appreciated, and one respondent in Perth and Kinross pointed up the lack of specialist skills in this area among hostel staff:

*“I must say they are very generalist. They had no note of the AA telephone number, I found it out and gave it to them. Alcoholics can be very scheming and manipulative – I’ve not been here long enough to know if they would be on to it.” (Resident in voluntary sector hostel)*

### **Additional support required**

3.90 Although many felt that hostel staff were “doing enough” and could not think of anything else they would like them to do, some respondents had specific ideas about extra kinds of support they would like. Listening to residents’ problems and generally being more empathetic was a common theme, particularly in the large local authority hostels in Glasgow, where the general impression was that “unless you ask, you don’t get” help. Secondly, the demand from residents was for direct practical help with moving on from temporary accommodation.

**Table 3.3 The type of additional support respondents wanted from hostel staff**

Type of Support Wanted	Number Of Respondents	
	Glasgow Sample	Other Areas' Sample
Listen to residents' problems	19	6
Help with moving on	11	10
Help with addiction problems	2	3
Help cook, manage budget	0	2
Physical help – e.g. to bath	2	0
To find employment	3	0

3.91 Nearly a third of people (32%) in Glasgow and 18% in other areas could identify specific services they would like to access that were not currently available to them. Many were existing services that were clearly not being made available to hostel residents including social work, housing advice, welfare rights, employment training and advice, advocacy, drug or alcohol detoxification. In the other areas, a few respondents wanted trained counsellors to talk over problems. A minority of people wanted a library service in the hostel; careers advice; help with transport to attend church; needle exchange (Glasgow); and cookery classes. Specialist services for visually impaired people were sought by one resident in a large commercial hostel in Glasgow who is registered as blind.

### **STAFF APPROACH AND ATTITUDES**

3.92 Other research has found that individuals’ experiences in hostels are influenced as much, if not more, by the attitudes of staff towards them, than poor facilities or infrastructure. Ham (1996) found that people wanted hostels where they could approach staff, communicate at a human level and gain respect back. In both Glasgow and other areas, respondents’ views about staff were mixed:

- just over half (51%) the Glasgow respondents, and 47% of those from other areas, felt staff treated them “very well”
- 39% in Glasgow, and 46% in other areas felt they were treated “alright” by staff
- in Glasgow 8%, and 4% in the other areas said staff did not treat them very well; 2% and 3% respectively did not give an opinion.

3.93 In larger hostels operating shift systems, the quality of staff was perceived to be most variable and the frequent comment was, “it depends who’s on”, but this same problem with inconsistent quality and “different staff treating you in different ways” was common across the entire sample. Some staff were described by respondents as “stand-offish”, as having an air of superiority or a distant attitude. In contrast, a manager and staff in a large commercial hostel in Glasgow were described as “first-class” and “excellent”. The most positive comments were usually about staff who treated homeless people “with respect” and were “approachable”:

*“Treat me very well. Just because they have helped me in so many ways and they come across as if you are important to them.” (Resident in specialist hostel for young people, Aberdeen)*

3.94 All respondents could identify particular hostel staff who they felt were “good”. Quite simply “when you see that they’re on duty, you know that it’s going to be a good night”. In short, “good staff” had 4 key attributes: they were approachable; warm and caring; treated people with respect and dignity; and they were fair. In addition, some respondents liked staff to have a good sense of humour and to enjoy their job. This finding broadly supports earlier research findings that key attributes were that staff were friendly, they listened and were fair and consistent with the rules (Van Doorn, 2000).

## USER INVOLVEMENT AND PARTICIPATION

3.95 Commentators highlight a need for more open communication between providers and residents of hostels. Facilitating individual and organisational growth in partnership between users and providers is perceived as a major challenge for the sector (Van Doorn, 2000). In this survey, residents were asked about the contracts and agreements underpinning their rights and responsibilities in the hostel. They were also asked whether there were regular meetings between staff and residents, and whether overall they felt they had enough say in how things were run in the hostel.

### Contracts and agreements

3.96 Seven out of 10 respondents in Glasgow and 8 out of 10 in other areas, had written agreements with their hostel. Mostly, residents spoke of signing a statement about the rules and regulations, a Residents’ Contract, or Occupancy Agreement. A few thought they had a tenancy agreement. In Glasgow, 58% of those who did not have a written contract were not interested in one, although some could see the value of having a contract in a larger hostel so that “both sides know the score” and because it would provide “safeguards for me”. In the other areas, 42% of those who did not have a written agreement thought it would be a good idea to have one.

## **Better involvement**

3.97 Regular meetings between residents and staff were a rarity, both in Glasgow and the other areas. Only a quarter of respondents in both mentioned any regular meetings taking place. Interestingly, nearly as many again (21% in Glasgow and 23% in the other areas), did not know whether such meetings took place or not.

3.98 Hostels that had regular meetings between staff and residents were the specialist voluntary sector hostels for young people or women (Glasgow, Aberdeen). In one housing association hostel in North Ayrshire, even though there were residents' meetings, albeit infrequent ones, respondents were doubtful of their impact as "the manager always seems to vanish when there's a residents meeting". A few other hostels had resident committees, mainly to arrange social outings.

3.99 Just over a half of Glasgow respondents, and 40% of respondents in other areas, felt they did not have enough say in how things were run and wanted more say. Some feared that if opinions were voiced, it would go against them. A respondent in one of Glasgow's large local authority hostels said, "you don't get a say, if you do you get booted out". On balance, however, respondents considered involvement and participation to be a desired and positive step.

3.100 Respondents wanted more information about services and the support available to them. They wanted to influence the general running of hostels including the rules about visitors, and to improve the standard of facilities provided. Others wanted to air specific grievances and complaints with the management of hostels, to discuss difficulties around safety issues for example, and to make suggestions for improving hostels. For example, in the hostel accommodation units in Aberdeen, respondents wanted to work with staff to arrive at a compromise around the smoking ban: "they could easily make a room, or part of it, smoking".

## **SUGGESTED IMPROVEMENTS TO HOSTELS**

3.101 It was difficult for some residents to envisage ways to improve the hostel they were living in, either because their view of it was so bad that "not a thing, not here" could be improved, or they had grown "so used to living in hostels". In the majority of hostels there was at least one person interviewed who felt "quite happy" and that "nothing could make it any better".

3.102 The survey did however identify user-driven recommendations for improving hostel provision and these have been categorised into one of 5 themes (not in any priority order):

1. Increasing flexibility in the management of hostels
2. Better quality physical environment and better facilities
3. Providing more specialist hostels especially to cater for people with particular needs, such as younger and older people, and those wanting detox. and rehabilitation
4. Making hostels more humane and supportive by improving staff attitudes and taking a more holistic approach to meeting residents' social needs
5. Providing better information about rights and options and support to move on

### **More flexible management**

3.103 Hostel rules and regulations imposed blanket restrictions that individuals resented, such as not having visitors at certain times or being able to invite them into their rooms, and only being allowed to prepare food at certain times. Hostels would be improved if for instance, residents were “allowed food at night – tea and toast”, times for visitors were more open, and if there was more support for couples.

### **Improve building standards and quality of facilities offered**

3.104 In many of Glasgow’s large-scale hostels the physical conditions were poor. “Home improvements” as one Aberdeen respondent said, would go a long way in some places while others had been refurbished. Improving the quality of the physical environment and facilities available would go some way to improving life in hostels for many people according to those in our survey. In the large commercial hostel in Glasgow, the one thing that would improve it was to “Get Rentokil in and get rid of the mice and cockroaches”. People wanted quality mattresses, new furniture, and access to telephones, better ventilation, a microwave oven, and more en suite facilities. As one respondent in Aberdeen said, “moving the house into the 21<sup>st</sup> century: not expensive, just up-to-date and more homely”.

### **Specialist rather than general provision**

3.105 Again, the need to have separate provision for drug takers and alcoholics was mentioned by several respondents, particularly, but not exclusively, in the 2 large local authority hostels in Glasgow. Specialist provision would enable drug users to access the support they need and for others to get the help they need. The different needs of young and older people, and of men and women should be taken into consideration.,,

### **Humane, holistic provision**

3.106 Improving relationships between residents and staff and ensuring staff treat people with dignity and respect, having “more compassionate staff”, would improve hostels and make them more humane places to be, including not walking into people’s bedrooms unannounced. Addressing people’s needs in a holistic way, for instance recognising that people need to be occupied, that they get bored and have social needs, was important. Providing more leisure activities, especially because many homeless people find going out just too expensive:

*“Better facilities like televisions. There are 2 here but no picture on them. Need a pool table, a dartboard, a public phone. They could arrange days out for us, get a video recorder or pick a video for us for a Saturday night. They could have a vote for which one to watch.” (Resident in large local authority hostel, Glasgow)*

## **Improve resettlement support**

3.107 “Getting out as quick as possible” into their own house or flat was a desire expressed and although residents in some hostels were receiving help to resettle from the hostels, this was not the case for everyone. It was no surprise therefore, that some residents identified the provision of resettlement advice and support as an important way of improving their experience of hostel living.

## **Most important changes**

3.108 When asked to identify the one most critical thing to change about the hostel, respondents in Glasgow wanted to change, (in order of priority): the physical surroundings and shared facilities including providing better food; the resident mix; overly strict rules, especially those governing visiting; bedrooms to bigger and better furnished rooms; the way residents were treated by staff; and they wanted more attention paid to people’s social life in the hostel.

3.109 In the other 4 areas, the first priority was to relax the rules around visiting and to provide visiting rooms. This was followed by improving the general conditions and facilities offered by hostels, including provision of TVs in bedrooms, en suite showers and fridges if they wanted them, and in one hostel in North Ayrshire, paying attention to the poor water supply. Thirdly, respondents wanted to change the resident mix, and fourthly to improve the decoration and general state of the hostel. Aberdeen respondents in the local authority accommodation unit wanted a smoking room.

## **SUMMARY AND DISCUSSION**

3.110 A high level of general satisfaction with hostels for homeless people was discovered in the sample hostels, but this masked a plethora of dissatisfaction about aspects of the quality of hostel life. In common with other researchers, we found that feelings about hostels ranged from a grudging acceptance of the need for a hostel place, to hostels being seen as “a lifesaver” or as a place of positive choice. In general though, hostels did not offer positive choices. Despite improvements in the physical conditions in hostels of varying sizes, including widespread provision of single rooms, and some positive views of management and support, the sector remains characterised by institutionalised practices: current rules and regulations are perceived to be overly strict, to constrain contact with family and to inhibit community and social inclusion. So hostels continue to socially exclude people and disempower people. The limitations on residents’ rights and the lack of user involvement and participation were a major focus of criticism of the hostel sector.

3.111 Service users pointed to difficulties arising from the mix of needs in generalist, large-scale hostels, including people requiring specialist mental health support, or detoxification and rehabilitation for drug or alcohol problems. Shared facilities were of variable quality, with some notable deficits in basic facilities to wash, bathe and clean clothes, for example. In one commercial hostel, some of these basic amenities were non-existent and people were living in conditions that can only be described as unfit for the 21<sup>st</sup> century. For many residents hostel life left them unoccupied during the day and their social needs were a most neglected aspect, apart from the efforts of smaller specialist provision for young people.

3.112 Staff support, both within the hostel and from visiting professionals was limited in many cases, to providing general support with emotional or personal issues. A particular focus of this research, was the future of hostels in the spectrum of housing and support provision available to homeless people. A key finding from our survey of 203 residents in 5 local authority areas in Scotland is that many people staying in hostels are not getting the information, advice and support they need to find alternatives to hostel living, to gain access to, or make informed choices about support, or to move on from hostels.

3.113 The study arrived at a number of clear user-driven recommendations for the improvement and development of hostels:

*“Hostels in general are a good idea, it’s good they have a place like this for people who are homeless. But there are little things that would make it better.” (Resident in local authority accommodation units in Aberdeen)*

3.114 Hostel users were looking for:

- more flexible management practices
- to have a say in rules and regulations governing the way hostels are run
- improvements to hostel buildings as well as improved standards of shared facilities
- staff with whom they could communicate their problems
- access to different kinds of help, including information and advice

3.115 And overall, the quality of staff and relationships between residents and staff are a key determinant of perceived quality of life in these settings.

## CHAPTER FOUR

## VIEWS ON THE NON-USE OF HOSTELS

### INTRODUCTION

4.1 As well as consulting with hostel residents, the research aimed to hear the views of homeless people who are currently outside the hostel system, whether as a matter of preference or because they have been excluded from hostels and have restricted accommodation options. Even although it was recognised that homeless people not using hostels might include people staying ‘care of’ other households, or people in bed and breakfast accommodation, it was resolved to focus on the views of people sleeping rough, given persistent concerns about rough sleeping in Scotland. To this end the research team reviewed relevant literature and conducted interviews in small groups and individually, with 18 people in Glasgow and Perth who were sleeping rough, or had slept rough recently, to find out their views on hostels. In addition, as a planned group interview with women did not take place, the research team interviewed street workers in Glasgow who are regularly in contact with women who are sleeping rough. The views of professionals were further explored in the course of interviews with policy makers and hostel managers and staff, all of whom were asked to comment on views on patterns of non-use of hostels. This chapter reports on the findings.

4.2 In 1998, the UK Government’s Social Exclusion Unit reviewed the findings of surveys of homeless people over the past decade and concluded that only around 5% of those who sleep rough do so by choice. In Scotland, a review of the impact of the Rough Sleepers Initiative (RSI) by Yanetta et al (1999) found that while just over a third of total respondents in Scotland had been banned from hostels or related services, this figure rose to 57% for respondents using Glasgow projects. Yanetta et al quote one project worker who commented:

*“the dilemma is that clients are expected to change their behaviour in order to get accommodation, rather than accommodation being provided as a base from which they could start to change their lifestyles.” (quoted in Yanetta et al, 1999)*

4.3 One recent study, however, concludes that some older people opt to sleep rough rather than enter hostels, because they are seen as dangerous places (Evans, 1999). Looking at gender patterns in homelessness, research suggests that women tend to resolve their homelessness differently from men, and that women are far less likely than men, either to sleep rough, or to use traditional hostels (Smith, 1999, Webb 1993, Anderson et al, 1993).

4.4 Turning to the people sleeping rough whose views are reported in this chapter, we found no indications that any were making a clear choice to sleep rough rather than enter hostels.

4.5 In Perth and Kinross 5 men and one 20-year-old pregnant woman participated in a focus group held in the CATH Day Centre. One of the men was aged 19 years, while 4 were in their 40’s and 50’s. One man had been on the housing waiting list for 8 years and another for one year. Another man said he had “skipped on and off for 23 years” after his marriage broke up. All described sleeping rough, variously under bridges, benches, in the bus station, in the railway station, and in doorways.

4.6 Most of the men interviewed in Perth said they had had drink problems and 3 of them had been evicted from hostels. They had all been homeless long-term and had been living on the streets and travelling around for several years. One now had a council flat. The 19-year-old man had been homeless for over a year and said he had been a gambler, which led to theft and job loss. He tried to go to college but was burgled, and that brought him "to his senses". He had been in many hostels, night shelters, and slept rough after being refused access to hostel accommodation because of his previous addiction problems. Having previously been in care, he had received some support from the Go Project and he is now in a privately rented flat, however he said the roof is leaking so he cannot put the light on. He is paying £22 per week on top of his housing benefit. He said he knew someone who had died of hypothermia.

4.7 The only young woman interviewed was 6 months' pregnant and had been living 'care of' for several months. She had stayed in hostels, but because she was female and pregnant she said the RSI accommodation could not take her and she was being asked for proof of her previous circumstances in another city before she would be rehoused. She was therefore staying 'care of' as she did not want to make contact with her previous partner. Her experience reflects patterns of early homelessness, early pregnancy and unstable accommodation, including staying 'care of' others that has been well documented elsewhere (Smith, 1999).

4.8 The Glasgow interviews were with 9 men who were all sleeping rough in Glasgow and a further 3 men, who had been sleeping rough. Two of these were currently in RSI funded temporary accommodation with the other in a drug rehabilitation service. Their ages ranged from 17 to 50 years. Five small group interviews and 1 individual interview were held in a Lodging House Mission in Glasgow on a particularly icy January morning and at Barnardos. A number of agencies assisted the researchers in making contacts - Simon Community outreach team, staff at the Mission, Barnardos Street Team and the London Road accommodation project.

4.9 Those who were currently sleeping rough in Glasgow included one young man of 19 years who had slept rough for the last 2 weeks and 4 men in their 20's. Most had been homeless for some months, although one had been homeless for longer. One man had been homeless for one month, having lived in a flat previously; another also said he had been homeless since December 2000. One 23-year-old man had been homeless for around 3 months since getting out of jail, but said he had been "on and off the streets for 5 years". Another man who was also 23 had been homeless for 8 years.

## VIEWS ON STREET LIFE

4.10 Not at all surprisingly, given the weather at the time of the Glasgow interviews, people offered vivid and distressing descriptions of street homelessness in response to a question about their current experience of homelessness. One young man of 23 years said he sleeps under a bridge. "It is hard and it is getting worse". Another said:

*"It is dreadful. I wake up every half hour or so – shivering and frozen. You have to light a fire. It gets to you if you are with your partner. You start taking it out on each other."*

4.11 People's experience of how the police treated them varied. Younger men said "the police get to know you and they often move you on if you are skippering". One said:

*"You have to be out the road from the public and the polis, such as under the bridges. We can't make Glasgow look bad."*

4.12 The older men in Glasgow said they skippered near the motorways and sometimes light a fire there to keep warm. They said "the police leave us be and the outreach workers come and check on us". Some of the men talked about the depressing and excluding impact of street living. One young man in Glasgow said: "The streets are getting me down. I even could commit suicide. I can't get a doctor 'cos I haven't got an address". One person from Perth commented: "You're frozen up, you just keep walking or you would die. There should be a night place to go to."

4.13 Other comments expressed strong feelings of exclusion:

*"We tell the truth because we're sleeping rough so they don't want to know."*

*"Get people in the housing department to understand what we're going through."*

## **HOUSING HISTORIES**

4.14 Several of those participating had previously had accommodation of their own, which they had lost for one reason or another. This reflects the findings of other surveys, with Randall and Brown, for example, finding that a quarter of rough sleepers they interviewed had been in a tenancy since their first episode of sleeping rough, but half of them had left the tenancy within a year. The most common reasons were rent arrears, money problems, or being asked to leave (Randall and Brown, 1996).

4.15 Precipitating factors in the loss of accommodation for our respondents included rent arrears, money problems and relationship breakdown, just as has been documented elsewhere (Burrows, 1999). One person said he lost a great private rented flat because he had rent arrears covering a 2-month period - "Housing benefit would not cover the full rental, so arrears built up".

4.16 Another man in his 20's said he had lived in a flat with his wife and child, but lost everything due to his drug problem. Most said they had moved around the big hostels, one young person saying he stayed in hostels, "a couple of nights at a time". A young man of 18 had been homeless since leaving home at 16 and had been in a number of places providing for young people. He had also had a recent spell in prison. One person in Perth described his experience in the private rented sector:

*"I've stayed at (an HMO in the private sector) - it's a pure dump. Four single beds, 1 room, bouffin'. The toilet doesn't work. You only get a wee breakfast and a wee tea."*

## **Excluded from hostels**

4.17 Other research has highlighted the significance of hostel exclusions in rough sleeping, with one study reporting that over half of those who had ever been refused entry to direct access hostels were rejected because of drug or alcohol-related issues (Ham, 1996). A study of hostels in Birmingham reported that hostels often do not know where people who leave go to, and that the hostels participating in a one-night snapshot study estimated that around 7% left the hostels to sleep rough. The Birmingham research also found major variations between hostels in the number of permanent exclusions from 7 direct access hostels, from 20 per bedspace to 0.04 per bedspace (Wadhams et al, 1997).

4.18 All those interviewed in Glasgow who were sleeping rough, were banned from hostels for a range of reasons, with most banned from the local authority hostels. One person said he had been banned from a housing association managed hostel, while the other men had been banned from the City Council hostels. The reasons for exclusions included violence, alleged theft and debt. In Glasgow more than half the men said that they had been barred due to violence, then found that they could not get back in to any hostel. Two men in one group commented:

*“If you are banned from one hostel you are banned from them all. ...the staff take a stand and that is it.”*

*“I would go back in to get off the streets, but I got very upset after I lost my flat. I hit one of the staff. I am now DNA (do not admit) and it says I am violent on the computer.”*

4.19 On the reasons for bans or exclusions, one man in his 40's said he had been in and out of hostels and prison. He was barred from a voluntary sector hostel because the staff said he had hit someone on the head, but “I did not do it”. Four others said they were barred because of fighting with other residents or a violent incident. One person said he was originally banned for swearing at the staff. He has tried unsuccessfully to get the ban changed and said the ban is because staff said he was violent. On the issue of barring, 3 of the men in the Perth group had been barred from the hostels. Most of them were sleeping rough and had used hostels in the past. One younger man said he was charged with robbing 2 people in ‘X’ Hostel and then ended up in Barlinnie prison for 9 weeks. The Court dropped the case but he is still barred. He does not think he should be.

4.20 A young person in his 20's who said he was banned because of rent arrears: “I blew my rent money and have had no chance to pay it up”. He also indicated he needed help or advocacy to gain access to accommodation.

*“I would like to go back to the ‘X’ hostel but don’t want to talk with the manager myself. I stutter and some people do not understand me. Maybe I will ask people at the Mission to speak for me.”*

4.21 Another said he cannot return to a city council hostel because of debts and moneylending. He had not tried anywhere other than the Council. “The street worker has tried to help, but they got nowhere.”

4.22 Two men said they had tried unsuccessfully to get places in 2 large housing association hostels. One person said he had gone to stay in a large hostel in Edinburgh, and reported that the hostel contacted the Hamish Allan Centre and then refused him access when they learnt of the previous violence. “We had to skipper in a graveyard, but we went to the Cowgate (day centre).”

4.23 One man in the Perth group described how he saw a “65-year-old guy sent away to sleep rough on the street. It was freezing cold, I said to bring him in but they wouldn’t.” Another said, “They turn away some drunks, others get in who are drunker.” And one person commented “There should be a place for old people.”

## VIEWS ON THE HOSTELS

4.24 Those who had experience of hostel living were asked to comment on their likes and dislikes in relation to the hostels they had been in.

### Positive things

4.25 Most of the men in Glasgow perceived hostels as very large-scale accommodation. Overall they had little very good to say about them, and positive comments mainly related to their role in providing respite, shelter, security, food and some staff support. Comments included: “You get your breakfast every day. ...you get shelter”; “you can talk to some of the staff and some are helpful” and “many people don’t want a house. They feel secure in hostels”.

4.26 Some mentioned that “you don’t pay any rent in the hostels” as a positive feature, indicating possibly that service users do not appreciate the structure of rent charges. For unemployed hostel residents (as the majority are) the rent is covered in the main by housing benefits, so that there is only the service charge for breakfast 7 days a week to meet.

4.27 Just as for current hostel residents, the role of staff was perceived variably by those sleeping rough. Some said hostel staff in the large hostels are not there to advise and support you, but that support varies between the hostels. “You can get a lot of help from staff at “A” Street. Not so much at ‘B’ Street.” But overall there was ambivalence about the hostels, with most saying they would go back in to hostels if they could – “just to get off the streets.”

4.28 One man in Perth said, “There’s a lot of good hostels round here now but not always the folk working in them. The staff should be supportive.” Another said: “The Salvation Army is a really good place. I wanted to stay there, there was an empty single room but they said it was booked.” And another commented:

*“There should be an undercover person in hostels to see what they’re really like.”*

## **Negative views**

4.29 These were more frequently expressed. Some said that it was now more difficult to get in to a hostel than in the past. Comments from Perth included: “They’re like the prison system” and “We’re still in the 1940’s, man!” Two older men said: “It’s not so easy to get in. I had a one-hour interview at ‘X’. You need to be nominated now,” and “We used to pay 16 shillings, get in and get a key. Now it’s all classified.”

4.30 In Glasgow, some people said they would not go back to particular hostels. One man in his 20’s said: “I would not go in to ‘X’ (a commercial hostel) – there are cockroaches and rats there. The older guys are ‘alkies’. ...I wouldn’t pay them.” Another said he cannot return to the local authority hostel where he has been offered a place because “I have enemies there who I owe money to”, so reflecting the patterns of informal and illegal moneylending that are prevalent in the hostels (Burrows, 1999).

4.31 That entering a hostel would require a split from a partner was also mentioned as a problem, both in Glasgow and in Perth. Two older men with partners said that they did not want to go in to hostels because it would mean, “splitting up with my wife”, while a younger man wanted to be “with my girlfriend who is in “X” Street. One young man said he did not want to separate from his girl friend for 6 years and they “skipped together”. “We could not get a house unless she was pregnant. We had to separate – “I don’t want her to die”.

## **Rules, regulation and systems**

4.32 Just as emerged as an issue for current hostel residents in this study and has been found in other research (Social Exclusion Unit, 1998), our respondents who were sleeping rough or who were former hostel residents, similarly expressed considerable dissatisfaction with systems, regulation and inconsistencies. Some emphasised that rules in the hostels can be too restrictive and infringe privacy too far. Others felt there was not always consistency in how the rules are applied. One said: “It is second best to a jail”. Another likened a hostel to “an open prison. They check you first thing in the morning. It’s called a ‘dead check’.” Some spoke of unfairness in the system: “If your face fits... ...people try and help. ...If one hostel gets a bad picture of you, then you have had it”. The others in his group agreed. Another said: “If your face doesn’t fit, it doesn’t fit. Some staff are just ready to jump on you. You can be victimised.”

4.33 However, some people expressed mixed feelings about hostel life and regretted being excluded. One man in his 30’s said:

*“One big hostel run by (a housing association) is beautiful. It’s a tremendous standard and they help you move on to get a house. I was compliant with the rules for 8 months. I did not like the way staff came in to your room in the morning and checked the fridge while you were in bed. After 8 months I complained about it and left. I was gutted and knew I had done the wrong thing. I was positive I would not get in after making a complaint.”*

4.34 Those interviewed in Perth also had comments to make about hostel rules and the power exercised by hostel staff, such as “There’s no consistency in the rules” or “If you disagree they throw you out.” Other comments included: “Hostels are more regimented now than 20 years ago”, or “I’m 48, and I’ve to be in by 11pm. If a person wants to go out, have a boyfriend, it’s not on”, or “The staff think they’re it cos they’re the staff.”

### **Views on the mix of residents’ needs and related support issues**

4.35 Problems with sharing have been identified through other research (Evans, 1991) and in our survey of hostel residents reported in earlier Chapters. Other problems identified relate to the undifferentiated social mix in hostels (Wadham et al, 1997). Age, gender, race, disability and sexuality may all be factors stimulating tensions in generalist hostels. The indications are that young and older homeless people may not mix well and that women, those who are lesbian/gay and minority ethnic groups may find hostel living intimidating. People with disabilities find hostels unable to cope with their needs (Ham, 1996). These issues and their implications for services will be considered further in Chapter Five.

4.36 Both in Perth and in Glasgow there was agreement that the mix of people’s needs creates problems for residents and staff. Comments stressed that people with different needs should not all be in one place and ranged from, “They should separate the drunkards from the druggies”, to “There should be a separate place for drug addicts. Drinkers won’t steal off each other.” One older man said:

*“It’s a different story now - You’re up all night, don’t get sleep. When you’re getting old you don’t like to challenge them. ...they might pull a knife out and stab you. I’m getting too old to cope.”*

4.37 As highlighted elsewhere, the environment in large-scale hostels was found to encourage and perpetuate problematic substance dependence (Glasgow Street Homelessness Review Team Report, 2000). The problems of large-scale hostel living for those trying to get off or stay off drugs was mentioned by one young man in his 20’s who said that he had been off drugs for 7 months before going into one of the large hostels in Glasgow. He said that he had started using again within a few days of going into the hostel because: “everybody else was using and it was the only way I could handle things”. He further reported that after he had been in the hostel for a couple of days he knew what was likely to happen and went to the dedicated Social Work homeless team to see if he could get help and whether he could be moved to other accommodation. He said that a CPN had been sent out to see him who said that they would get back to him but he heard nothing else. He now has an appointment to see a dedicated drugs worker.

4.38 Another man said that hostels are not addressing the needs of some groups of people at all. He stated:

*“People with drink, drug and mental health problems are not getting help. It’s as if they are saying you have made your bed and now you can lie in it.”*

4.39 In Glasgow, some people said that staff are not trained to address the range of needs in the hostels; nor do they have the time to talk to people. One man said:

*“The way I look on it is that staff in the hostels are only in a job because of us being homeless. But there are all sorts in the big hostels – from murderers to rapists, or drug addicts, or alcoholics. The hostel staff are not trained to help people. It’s not their job.”*

4.40 Some said they saw the system as unforgiving and that people should be allowed second chances. They also suggested the “time has to be right to accept help”. One 18-year-old stated that he had been offered help in accommodation for young people but that, “I wasn’t ready to take it”. Another, referring to his current specialist accommodation said that if he had been offered it a few years ago, “I would probably have messed it up.” However, he was finally getting the chance he needed and felt he was ready to take it:

*“I’m getting another bite at the cherry. I have burnt so many bridges through taking drink and drugs but now I am getting another chance and I am so grateful.”*

### **Accommodation and resettlement**

4.41 Randall and Brown’s study of rough sleepers found that at least two thirds of people sleeping rough need practical help with moving in to a home, for example with furniture and benefits. In addition, 30% felt they would need help with depression, nerves and anxiety and 18% with drink problems (Randall and Brown, 1996). Similar views emerged in this research amongst our hostel non-users.

4.42 Just as for the current residents of hostels interviewed, most non-users said they wanted their own place – “my own space” – or to share accommodation with their girlfriends. Everyone in Perth said they just wanted a small flat in a suitable area. In Glasgow, 2 young men said they would take a temporary furnished flat until they got their own place. They were prepared to share if this was necessary, but it would matter who this was with. It was important to find a place where they could live with their girlfriends. One young man said, “I need help with a deposit to get a flat”. Another said:

*“I’ve got the future worked out ...I’ll live in a house with my wife, wean, dug and hamster and a tiger round the back. ...the only help I’ll need would be getting the place and some furniture. I could keep it respectable.”*

4.43 In Perth one man said he was on the waiting list for a house, but because he was homeless they could not get in contact with him and took him off the list which he’d been on for a year. Another person said he had been on the list for 12 years as No Fixed Abode (NFA), but does not qualify for a house. And another man said the housing staff: “think they can tell you what to do cause you’re homeless.” The view was expressed that “NFA’s don’t get anything” and that “incomers get first class houses.” All said there was little choice in where they would be considered for rehousing. “One area only.” They all said the homelessness legislation was a key barrier to getting help, as highlighted by (Evans, 1999) and a factor promoting social exclusion (Anderson, 1999).

*“Why are there all these sections and reasons? It forces you to have kids to get housed. There’s no option. They put the thought there, then you’re stuck with a wean.”*

4.44 Some people felt that additional support or detoxification would be needed before they could move on to places of their own. One young man said he would consider supported accommodation after detoxification, because he realised that he needed help. He said he had been clean for one and a half years and had a methadone script, a flat and a job. “This time I think I need more help”. Another younger man who was planning to move into a shared flat from his current specialist provision said, in the longer-term he would also be keen on a shared flat because, “it stops you getting lonely”.

4.45 While most said they wanted their own place, they also wanted accommodation now, or a roof to get off the streets. Although most Glasgow respondents were critical of the large-scale hostels and did not expect to get back in to them, they also said they would take a hostel place if they could get it. One person in Perth said:

*“There are 3 prisons empty - open them up and give them to the homeless, even if only as overnight accommodation.”*

4.46 Several had rent arrears or debts and one said that he accumulated £4000 arrears when he was in jail for 4 years.

*“I had someone staying in my flat, but they did not pay rent. I have been on a waiting list for 2 years and I am number 71 on a housing association waiting list.”*

4.47 Another young man reported he owed £650.00 in arrears. He said he had stayed in 2 different hostels – one 2 days and the other 3 days, but ended up owing for more. He said when you are homeless at first you just do not know how the housing benefit system works.

4.48 As well as the obvious need for money advice, respondents suggested a range of kinds of help are needed, including:

*“Handouts can help when you are on the streets. They help here and at the Wayside with food and other things. They give you advice too.”*

*“Help with furniture – practical help.”*

4.49 Positive views were expressed about a number of voluntary sector/charitable services providing different kinds of help, for example:

- necessities such as food, clothes and sleeping bags
- advice and access to telephones
- advocacy to try to secure accommodation and address issues like arrears.

*“You get great help from the (mission). They are there for you every day. You can get clothes. They will help you make an important phone call. If they can do something for you they will do it.”*

4.50 Comment on practical help gained, included: “The Wayside helps too with food and clothes and Barnardos helped my girlfriend get in to a hostel.”

4.51 In Perth, people commented on the help received from the CATH Day Centre: “it’s clean, and you get help.” One person said they were “the only people who have helped me in my lifetime - I respect them for it. Here they feed me”.

4.52 On the need for advocacy, one young man said he needed help in speaking with agencies. Another said Barnardos is trying to help him tackle his arrears and get accommodation. And another said:

*“Simon Community staff try and help when you are on the streets. They give you sleeping bags. They give advice and try and phone the hostels. But if they won’t let you in, what can they do?”*

4.53 None of the respondents mentioned currently receiving help from social work. Just as reported elsewhere (SWSI Part B, 1996, SYHN, 2000), some younger people said they did not want contact with or help from social work, either because they had previously been taken in to care, or because their relationship with a social worker had broken down. One young man said he had lost trust in social work.

*“I had a social worker for 8 years but now he has washed his hands of me. I am supposed to be allocated another one.”*

4.54 Another 23-year-old man volunteered:

*“I would not go near social work. They took me away from my family and put me in care from when I was 9 to when I was 16 years old. I could not trust them.”*

4.55 On the other hand it was evident that some specialist support services were valued, and particularly those that were seen to offer practical help.

## **Health related issues**

4.56 The health problems of people sleeping rough are known to be extreme with access to health services problematic (Bines, 1997, Pleace 1997). While most respondents said they were registered with GP's, a few indicated that they had no GP and thought they could not register because they are No Fixed Abode. Some used a GP at a day centre. Some men said that sleeping rough has affected their health and one said, “Its been freezing and I got a right bad cough.”

4.57 Most mentioned they had drink or drugs problems (or both) and some said they needed other kinds of help to get out of their current situation.

*“I am just dying on the streets. I am Hep C positive and I am on methadone. I just can’t handle the streets much longer. I will have to try and get myself picked up and put in jail just to get off the streets.”*

4.58 One man in Perth had suffered from mental ill health since childhood, and said, “The staff are meant to be there to help homeless people and get them health help too”.

4.59 At least 2 younger men were currently engaged with a drugs project. A number of others also said they were drug users, while one young man stressed this was not a problem for him.

*"I am sitting and begging all day and night to keep my habit. I have never had a drug worker because I don't need one. "I can take heroine – I have for 2 years and I don't rattle. Some people can't take it. It gets to them. It makes me strong enough to live in this kind of world."*

4.60 One young man said he had come off drugs for a year, during which he went back to live with his parent and he is now waiting to go in to a detoxification service. Another man currently in RSI funded short-term accommodation was also waiting for a place in detox and said he had experienced difficulties in getting a GP and in getting a methadone script. He said that his last GP had struck him off his list 3 weeks ago when he went to ask for a script. He said he was told by the GP that the methadone programme was full and that his records would be sent back to the Health Board. He also had concerns that he would not be able to secure a place in a detox. facility before having to leave the time-limited accommodation in which he was currently staying.

4.61 One young man said he needed to go in to a drug rehabilitation service, but that 3 weeks in Turning Points was not enough, although, "Turning Points was just great. But you need to get away from the scene for a year." Another said he had been in Turning Points last winter and that it can be hard - "living with 12 addicts all coming off and experiencing the same symptoms and agony. Even the fruit is searched". Another said "I used to be with the East End Drug Initiative, but its funding stopped and that was the end of that."

4.62 Drink problems were also mentioned in the course of the interviews. The older men who said they were drinkers all said they needed to come off the drinking. One said he had had the chance of Greenock and Aberdeen dry units but preferred to drink at the time. In the Perth group it was agreed, "There should be a drink and drug rehabilitation service".

4.63 As highlighted earlier, depression was a common experience and was mentioned by participants in 2 of the groups. On support needs generally, one person said:

*"Some need help to sort out their mental health. Some need counselling and others need help with learning."*

4.64 Additionally, one young man reported that he would like help to "manage his anger" and was going to talk to his key worker about this.

## **THE FUTURE OF HOSTELS**

4.65 While the plans to close the big city hostels in Glasgow were not publicised at the time of the interviews with hostel residents, there had been high profile reportage before the interviews with hostel non-users. Views on this were expressed in the following comments:

*"I don't think the hostels will be taken down – the council earns too much from them."*

*“When they pull down the hostels a lot of people could be on the streets.*

*“They should shut ‘X’ hostel down. The staff mix the stories. It is difficult for the people in there.”*

4.66 Finally, the stigma of homelessness and rough sleeping came through intensely, implying that future planning should address this, as illustrated in the following quotes.

*“Naebody listens to us. We’re just trash.”*

*“Too many people think you are just trash. It gets to you.”*

*“Society at the end of the day has turned its back on us. We are the scum.”*

*“People just have to look at how you are dressed.”*

*“The only thing left is to help yourself. You have to try harder; go again to the Hamish Allan Centre and see if you can get in to a different hostel. You have to try and get an address.”*

## **PROFESSIONALS’ PERCEPTIONS OF REASONS FOR HOSTEL NON-USE**

4.67 As stated in the introduction, the views of policy makers, managers and hostel staff were also sought on the reasons for hostel non-use. In many ways their views were consistent with those expressed by people sleeping rough. Some care and supported accommodation providers for example, suggested that given prior experiences, certain homeless people may opt to sleep rough, or to extend a stay in hospital or an offenders’ establishment, rather than enter the large hostels. Overall, the reasons identified by professionals for the non-use of hostels included:

- Exclusions or evictions from hostels, usually for reasons of violent incidents or drug-related behaviour.
- Homeless people’s experience of intimidation in the hostels, including verbal abuse, physical violence or intimidation by moneylenders or thefts.
- People’s knowledge that they would not be able to stay off drugs or alcohol in a hostel.
- That people perceive a lack of respect. They become demoralised, lonely - even isolated - and depressed. One social worker said his homeless clients describe hostel living as “soul-destroying and brain numbing.”
- Some homeless people choose not to stay in hostels registered with Social Work, where they are only left with a personal allowance of some £15 weekly. This was mentioned as a key factor in Aberdeen where a high proportion of the provision is registered.
- Hostel use may require someone to split from a partner.
- Hostels do not accommodate people with animals.

4.68 Research and agency experience also indicates there are particular safety issues for homeless women and that a significant proportion of homeless young women have experienced sexual abuse and are very vulnerable (Hendessi, 1992). Hostel living can bring

the risk of further intimidation or risk of sexual assault for women hostel residents. Recent research at Base 75 suggests that women entering hostels may be encouraged to engage in drug use and prostitution by living in certain hostels where the majority of women are ‘using’ and ‘working’ (Stewart, A, 2000).

4.69 Given the lack of opportunity to meet with female non-hostel users, the researchers consulted street workers involved with homeless women. They made some very telling comments on why some women who are on the streets do not use hostels.

- Some homeless women report that in the women’s hostels there is encouragement to prostitute. If they befriend some of the other older women they may be encouraged by them as well as by the potential to earn money.
- Some young women report that they will not go into a mixed hostel because of an expectation that they will enter into a relationship. In many cases it may be an exploitative one. One mixed hostel in Glasgow is sometimes referred to as the “love boat”.
- Some young women report bad treatment from staff in hostels if they are known to be involved in prostitution, such as that comments have been made over a tannoy system and that male staff make comments directly at times.

## CONCLUSION

4.70 The views and experiences of homeless people who have been sleeping rough represented in this chapter, highlight the starker exclusion from opportunities. Exclusion from hostels for this group was experienced as rejection for behaviours which were acknowledged to be disruptive, with the net effect of further marginalisation or disconnection from mainstream economic, social and health opportunities. The range and depth of the experience highlighted in the interviews indicates that

- Without the help of voluntary sector support and outreach services people sleeping rough would be totally disconnected from opportunities taken for granted in mainstream society.
- While wary of hostel living and sharing, many people sleeping rough would accept a hostel place, however most current non-users would really prefer a place of their own or to share with a partner.
- Health issues and health risks are very significant for people sleeping rough, and particularly so in relation to substance misuse and mental ill-health. Access to health-related support is crucial, just as has been recognised in the recent draft guidance on health and homelessness. (Scottish Executive, 2001)
- Matters such as education, training and work do not seem to be part of the frame of reference.
- A broad range of practical advice and assistance is required to enable opportunities for social inclusion. There are indications that this needs to be on offer over an extended timescale to enable trust to develop and to accept that people change.

## **CHAPTER FIVE**           **STAFF VIEWS ON THE HOSTELS**

### **INTRODUCTION**

5.1 This Chapter reports on the research team's interviews with the professionals who are key stakeholders in the system of homelessness provision and who include policy makers, hostel managers, other hostel staff, and related support and health professionals in the five districts. Comment was sought on the current purposes and the changing role of hostels in responding to client needs, on hostel management, systems and regulation, on matters relating to access and exclusions, on joint work and on future directions. The interviews explored some key problem areas as well as suggestions for improvements.

5.2 Just as in other research, this study uncovered different interpretations of what constitutes a hostel. Sometimes this was reflected in the terminology used by different personnel within the same agency who defined particular services differently. In some instances it appeared that a service that had been called a hostel some years previously, was now defined differently. Definitional inconsistency seemed to reflect that hostels are increasingly viewed as a stigmatised form of provision. Some agencies chose not to use the term at all, while others used it for funding purposes (such as Hostel Deficit Grant), but not in practice, so defining hostel-type services as 'temporary accommodation units', 'projects' or 'supported accommodation'.

### **THE PURPOSES OF HOSTELS**

5.3 Overall, hostel managers and staff described the purposes of hostels for homeless people as being to provide good quality, temporary, safe accommodation and an alternative to bed and breakfast for homeless people. Most commonly stressed were the functions of respite and the temporary or transitional role of hostels, with key objectives identified as being: "Safe accommodation – away from any threat"; "A stop-gap", and "A stepping stone to the next stage of permanent housing". It was pointed out however, that some homeless people, for one reason or another, lived in hostels long-term. Some professionals emphasised that hostels may be a key resource to local authorities in discharging their homelessness responsibilities under the law, in providing temporary accommodation, particularly for vulnerable single homeless people, but also for families in some areas.

5.4 There were indications that the hostels covered in this research had multiple purposes and Appendix One to this report reviews the purposes and functions of hostels. The staff interview programme emphasised that the broad range of hostel purposes and functions at times generated competing demands on management and staff. This was very apparent in the largest, mainly local authority managed, hostels in Glasgow, which provide 975 places in four establishments, alongside a commercial hostel which provides approximately 120 places. In the larger establishments, objectives include property management and maintenance to sustain physical standards and security in the building, staff management responsibilities, such as managing rotas, staff supervision and ensuring the safety of staff and residents. Managers may also be involved in individual casework with residents and this may include offering move-on assistance and linking with other agencies as appropriate.

5.5 The unique, large local authority establishments were known to be the focus of a major and impending closure and replacement strategy (See Appendix Four), which was a source of uncertainty to staff and residents alike. There was evidence of considerable support for the closure strategy, with comments ranging across, “the large hostels are part of Glasgow’s current homelessness problem - they perpetuate homelessness”, “they are human warehouses”, “open prisons”, or they “offer less rights and security than sleeping rough”. Overall in the larger hostels, managers and staff found that individual or person-centred objectives competed with more administrative and systems-oriented demands and with responding to crises that emerged from time to time.

5.6 On the other hand it was acknowledged that even in the largest hostels, social solidarity, informal support and communal co-exist alongside negative features of the institutional environment. Some staff stressed that a number of hostel residents have been deskilled socially and practically, perhaps due to a mix of life experiences, personal traumas or health issues and disabilities and homelessness. Some residents were seen to have gained from the services within the hostels – including access to advice and support, cleaning services and substantial breakfasts. Support professionals and hostel staff alike stressed that food was particularly important to people who are abusing alcohol, with breakfast sometimes being the only meal eaten in the day.

5.7 For smaller supportive and specialist hostels, many of which target particular needs, person-centred objectives were more strongly highlighted. Functions included providing information and advice, systematic assessment of the needs of individuals, a planned approach to addressing people’s support needs, including linking in with other specialist services, harm minimisation strategies and a planned approach to moving on and resettlement. Whereas the vast majority of smaller services saw their role as a temporary or transitional one, a small number of supported hostels saw themselves as providing a permanent home. Their primary purpose was to provide a homely and positive alternative to long-term homelessness, whether reflected in histories of rough sleeping and a transient or disconnected lifestyle, or of many years of living in a large, institutional hostel.

## **CHANGES AFFECTING ACCESS TO HOSTELS**

5.8 Those managers and staff who had been connected with homelessness for some time pointed to some key trends reflected in changes in the hostels during the 1990’s and these included:

*A reduction in large-scale provision across sectors.* In larger districts there had been a movement towards upgrading and downsizing of hostels in the 1980’s and 1990’s. Some respondents were concerned that a contracting hostel sector at time of growth in homelessness may be a factor reflected in protracted rooflessness.

*Increasingly managed access to hostel provision.* From the perspective of local authorities, central ‘gate-keeping’ of access to emergency accommodation strengthens the role of hostels in assisting the housing department meet its legal duties, it aims to increase equity and to prioritise needs better. The central gate-keeping trend is more widely represented in the movement in the 1990’s towards housing allocations based on Single or Common Housing Registers (CHR’s) and Clearing House approaches, with the Scottish Executive currently promoting CHR’s, and recently appointing a

Co-ordinator to develop these. While the logic of prioritising need was recognised by hostel providers, many suggested that access arrangements should also involve dialogue about the mix of current residents, between the referral/nominating agency and the hostel manager, particularly when there are concentrations of highly vulnerable people. Where central gate-keeping was highly developed, some support and advice providers reflected the views of people sleeping rough, in stressing that managed access contradicts with direct access (See Appendix 3 (B)). One recent development which may be relevant to the issue of central gate-keeping, is the movement towards housing allocations that emphasise choice as well as need, an approach that is being piloted in Edinburgh and has been evaluated in some English local authority areas.

*Diversification:* The research highlighted a number of examples of hostels providing for families with children and single people. In parallel, across districts, hostels have increasingly targeted particular needs. There has also been a growing role for voluntary and charitable agencies and housing associations, both in developing specialist, supportive hostels and in providing practical assistance and support to enable move-on from hostels and resettlement.

*A changing client group:* Whereas the traditional hostel population was mobile working men, or people seeking low-cost accommodation temporarily, most current residents are unemployed and there are increasing proportions of young people, including people under 18 years, and people who are vulnerable for different reasons. Clients in general were poor and often lacked income, a problem made worse by delays in arranging benefits. Moreover, many staff commented on the fact that clients had low confidence and very low self-esteem and low expectations. Young people were also often seen to lack motivation and goals.

*The resident mix:* In larger generalist hostels the client group is very mixed and this can make for unease and difficulties. The interviews with residents highlighted that the mix can be volatile and that older people can feel threatened and this was reflected in staff comment. There has been an increasing attempt to separate out common areas and in some larger establishments, to segregate floors, for younger and older people.

*Unplanned institutional discharges to hostels:* Hostel staff indicated the persistence of an old thorny issue, that in spite of repeated good practice guidance and protocols, there are at times unplanned or inappropriate discharges from institutions - such as care homes, acute hospital wards and prisons - to hostels. Staff in some areas reported that care planning is lacking and on occasions there is no advance notice of homeless applicants coming from hospital (mainly acute sector discharges). In one rural area a hostel manager reported that: "People simply arrive on the doorstep".

*Health issues:* Hostel staff reported that physical ill health and disabilities are very significant for the hostel population, as has been identified in other research (ONS, 2000). It should be noted however, that the high level of concern staff held about health problems was not broadly reflected in the residents' interview programme. From the staff perspective, for example, both physical and mental health problems were identified as significant. Some respondents believe there is a further hidden support need, stemming from the fact that a number of homeless people with a

learning disability (perhaps undiagnosed), have been homeless and become hostel residents.

*Challenging behaviour:* Whereas in the 1980's the key problem beyond homelessness was alcohol misuse, drug misuse has emerged as a key issue reflected in a range of challenging behaviours. However, hostel managers and staff in some agencies in Glasgow and Aberdeen reported that alcohol misuse persists as a key problem that receives less attention than drugs.

*Changing expectations of physical standards:* There is a thrust towards the continual improvement of building and design standards in hostels, with hostel management aiming to replace any remaining shared bedrooms with singles. Many hostels had been through recent improvement or redesign programmes, and for others, improvements were intended. Smaller hostels generally aim to maximise a non-institutional, homely building style, with opportunities for privacy and communal activities for residents. Yet even newly built or converted hostels cannot avoid some institutional features, such as a staff office (at times with a screen), safety features, including alarms or increasingly, CCTV. Larger new build or improved hostels offer better access, more space and privacy and better communal facilities than unimproved traditional hostels, such as in the commercial sector. However the scale of hostel buildings and their common areas in larger provision means that they almost always present themselves as traditional hostels.

*Disabled access:* Even for some providers that have purpose-designed hostels with wheelchair access to the building and usually one accessible bedroom (for example, Victoria House managed by Cunningham Housing Association and the Ardrossan Hostel (both in North Ayrshire) and Simon Community's Women's Project in Glasgow, hostel buildings are usually only partly accessible. In Fife, both voluntary sector services for homeless young people reported it would be problematic to accommodate a young person in a wheelchair. Managers of the large-scale hostels in Glasgow were also concerned about the unsuitability of their accommodation for wheelchair users, or even where this is feasible, as in some of the large hostels in Glasgow, there were concerns about fire risks. On the issue of the sensitivity of standards to particular needs, this study came across the unique example of Victoria House mentioned above, which has 2 rooms with flashing lights for people with hearing difficulties.

*Regulation of physical and service standards:* Hostel provision is increasingly becoming subject to the scrutiny of physical standards through the impact of mandatory licensing schemes introduced in October 2000 under the Civic Government (Scotland) Act 1982. Where accommodation is registered with Social Work Authorities, accommodation standards are subject to scrutiny under section 62 of the Social Work (Scotland) Act 1986 and are therefore exempt from HMO licensing. It appears that at least one local authority may be applying both regulatory systems, so increasing the administrative demands on hostel management.

## **HOSTEL FUNCTIONS AND CHARACTERISTICS**

5.9 Overall, hostels were seen as being here to stay, and as playing a necessary role in the system of temporary accommodation for homeless people, and in providing respite and resettlement services. Even although there was no consistency in the definition of what is a hostel, the most common defining characteristics mentioned were that:

- hostel accommodation is not self-contained
- hostel residents have limited or no rights
- hostels mainly have a temporary or transitional accommodation function, although they may also provide long-term accommodation for a number of people, often by default rather than intent
- they provide staff supervision and support

5.10 One service that offered supported and long-stay, rather than transitional, accommodation made the point that the provision was defined as a hostel because “17 people living together is not a home”. This contrasted with the reality that some residents in the largest hostels in this study have lived there since they opened over 25 years ago, and that for some these hostels were regarded as a kind of home.

5.11 Some staff emphasised the need to recognise differences between types of hostels and between hostels/supported accommodation and more flexible housing and support arrangements, with the key dimensions being:

- large, institutional provision as compared with specialist supported units in ordinary, homely, or at least smaller housing settings
- accommodation tied to support services, compared with the more flexible and dynamic model where housing and support provision is separate, as in the case of floating support

5.12 On the nature of support provision in hostels, the interview programme highlighted significant variations in the levels and types of assessment and support provided and this reflected characteristics such as hostel objectives, hostel ethos and staff/resident ratios. For example, the primary role for staff in larger and generalist hostels is a care-taking one to manage and maintain the accommodation to ensure the security of the building and its residents. Other practical advice and assistance may be on offer, either by staff or through other local authority staff, such as welfare rights, and through case work and linking with other agencies to meet residents personal support needs and resettlement. By contrast in smaller, supportive hostels, whether these catered for a mixed or special client group, the remit of staff teams was often to provide structured key working, assessment and support, as illustrated below.

5.13 Small, specialist supportive hostels in different areas and for different client groups commonly strive for a person-centred and holistic approach to individual needs and to promote independent living. In some services covered in this study, for example for young homeless people or homeless women, staff use a structured model of assessment in the first weeks of a person’s stay - such as in a youth homelessness service - to assess literacy, budgeting, shopping, personal/self care and interaction with peers. Models of individual support planning and group-work are undertaken. Staff aim to develop a positive working relationship with individuals and to address the emotional and social reasons for their

homelessness. Regular meetings are arranged with individuals to plan for and review housing and support needs. Additionally, group or house meetings or activities are common. The length of stay may be time-limited by a service's transitional objectives, such as for Stopovers or Simon Community's Women's project, or it may vary according to assessed needs.

5.14 Two additional points are relevant here on hostel functions. First, it appears that joint work is not commonly identified as an official function of hostel staff, for example in job descriptions. However, later in this chapter it will be seen that staff in all types of hostels are routinely engaged in a broad spectrum of joint work - such as to address the needs of vulnerable homeless people, those with health problems, or to enable move-on for hostel residents. Secondly, in larger-scale hostels, in addition to official staff functions, there were indications from the interviews that hostel staff regularly provide informal emotional support to hostel residents.

## **ACCESS, GATE-KEEPING AND ADMISSIONS TO HOSTELS**

5.15 Most hostel managers interviewed, whether local authority or voluntary sector, were broadly satisfied that the admissions criteria used in their hostels reflected policy intent and targeted clients appropriately. In some agencies, admissions criteria had been the subject of recent reviews. There were indications that monitoring and reviews of the Rough Sleepers Initiative, by highlighting the impact of hostels evictions on rough sleeping, have led both to a greater prioritising of access for rough sleepers, and to considerations about how evictions could be reduced. In Fife for example, following a review, sleeping rough became an automatic trigger for admission to local authority accommodation, following which the person's needs are assessed by the RSI team. Hostel staff can offer vacant accommodation for up to 28 days to people who are roofless, or homeless but not in priority need. If no vacancy exists, then bed and breakfast accommodation or a flat can be secured for up to 28 days. If no local provision is available then people may be sent to Glasgow or Edinburgh. The only category of person who would be automatically excluded from the local authority provision is someone who has committed a crime against a minor, who would still be offered accommodation in, for example, bed and breakfast.

### **The case of Glasgow**

5.16 In Glasgow, just as in areas like London where clearing-house systems have been implemented, there is a complex system of gate-keeping access to hostel accommodation. The term gate-keeping is used in this research in a neutral sense, to refer to agencies and functions that influence access to services, including referral and assessment and systems for prioritising or excluding certain groups. Key gate-keepers in Glasgow include staff from different agencies such as:

- homeless case workers and managers at the Hamish Allan Centre
- depute hostel managers – City Council
- hostel managers – other agencies
- social workers
- small specialist hostel managers/project team

In addition, housing advice and advocacy agencies influence access opportunities.

5.17 Staff in the local authority hostels saw the role of the case workers at the Hamish Allan Centre as a filtering one. They welcomed this role as they believed that unmanaged direct access could be very disruptive to staff and residents alike. Without the co-ordinating role of the case workers, someone who had been very violent in another hostel could be accommodated without the staff being aware of potential danger to themselves or other residents. When respondents were asked how effective they considered local systems of access and admissions to be, some questioned whether staff conducting assessments had the appropriate skills or a comprehensive knowledge of specialist services. Some support providers felt this could lead to very vulnerable people being inappropriately placed in the very large hostels. On the other hand, from the perspective of local authority hostel staff, housing department hostels were seen to admit many people with complex needs, partly because of the legal homelessness duty to accommodate. By contrast, voluntary sector providers were at times seen to ‘cherry pick’, with the result it can take months to find appropriate move-on for someone with a drug problem, for example. In addition, local authority hostel staff felt that at times voluntary sector providers relied on the ‘catch all’ role of the large hostels to accommodate people they had evicted.

### **Other areas**

5.18 Blocks to access to hostels are clearly connected with ease of access to move-on accommodation. Access difficulties also follow inevitably from a low hostel vacancy rate (Fife, Aberdeen, Perth and Kinross and North Ayrshire), with services in all these areas indicating a very high demand for hostel places, just as has been reported in Edinburgh (Edinburgh Streetwork Team, 2001). Access problems appear to be greatest for people who are particularly vulnerable and may require intensive support services, in all districts, or whose behaviour is challenging - so reflecting the comments in Chapter Four of people sleeping rough.

5.19 For all districts, problems of access to hostels are related to problems of access to move-on accommodation, and particularly so for people with complex or multiple needs. In Aberdeen for example, it was reported that a social work managed reception unit was intended to operate a maximum stay of 28 days, with suitable move-on accommodation being secured for residents within this period. The reality has been that move-on is often difficult to obtain resulting in some people staying in excess of the maximum period, or sometimes leaving to go back into insecure housing options. The accommodation is full most nights. The question raised was: “a reception into what?”

## **COMPLEX AND MULTIPLE NEEDS**

5.20 For homeless people with complex or multiple needs, access was reported to be problematic or delayed at times in some areas, partly as a result of assessment and funding systems operated by social work, and usually where the accommodation is registered. For voluntary sector or housing association hostel providers, delays in access and extended vacancies occurred during a drawn-out process of assessing individual needs and financial circumstances. Such delays had inevitable implications for the revenue funding of hostels, or for the timescale in which new services were opened. In some areas like Aberdeen however,

the assessment function is delegated to the hostel staff in registered accommodation and this appears to speed up the process.

5.21 As already highlighted, several respondents referred to inappropriate discharges, usually back to the hostels from general or psychiatric hospitals - so indicating that assessment was problematic in such cases. A further difficulty highlighted was that many people go through multiple assessments, and one respondent commented: "people are assessed to death". Moreover, some respondents suggested the services 'gate' may be closed, or only part open, when people are identified as having complex needs, or a history of difficult behaviour.

5.22 In most districts, hostel staff found it particularly difficult to achieve appropriate move-on within planned timescales for people with mental health problems, for people requiring access to detoxification facilities, or for people who continue to use drink or drugs. On the other hand the staff in one specialist 'wet' hostel emphasised that "the problems of running such a hostel are not as great as people think".

5.23 Finally, as was highlighted by research on direct access hostels in Birmingham, two further groups were identified as often being excluded from access to hostels - namely, homeless couples and people with dogs. The Birmingham study indicated that such gaps are being addressed in parts of England, and a pilot initiative to cater for people with dogs has taken place in Bristol, London and Cambridge (Wadham et al, 1997). One hostel consulted in this study in North Ayrshire reported that it can kennel dogs.

## **REGULATION, HOSTEL ETHOS AND DISCRETION**

5.24 In the residents' interviews, although the need for rules was not questioned, it was apparent that specific rules, or the way in which a system of rules is implemented, can generate strong feelings. For staff, hostel rules were broadly seen as ways of balancing majority interests, such as the residents' group as a whole, with the interests of individuals. A further primary function of rules is to regulate behaviour to meet legal requirements; to maintain order, safety and security in the accommodation and to protect residents and staff from harm or disruption.

5.25 By the ethos of a service we are referring to the body of principles underpinning the approach of a service, as is most likely to be reflected in its culture, value system and 'house-style'. Looking at the views of hostel residents, non-residents and hostel staff overall, there were indications that regulation and rule implementation in hostels often reflect the value base of a service, such as whether a service leans towards person-centred considerations or towards systems. It was also suggested in the staff interviews that pro-active interventions to prevent crises emerging in hostels, flexible responses and person-centredness in the approach of staff, are patterns which are strongly influenced by staff resource levels, training and management support.

## **Staff comment on rules**

5.26 Virtually all hostels had some form of written rules; the most common relating to:

- residents' responsibilities for maintaining their rooms
- bans on drug and alcohol use
- bans on threats or violence to residents or staff.

5.27 There was, however, some notable scope for staff discretion and flexibility, between hostels and over time within them. It is not surprising therefore that this is the area where hostel staff are seen to exercise power over outcomes, both for residents and for those excluded. One point highlighted by some respondents was that *all* hostel staff exercise power and discretion, so that cleaners, for example, have the scope to respect or to infringe residents' privacy, or to play a supportive or non-supportive role.

5.28 Looking further at areas of discretion, one commercial hostel manager reported that there were no written rules and only few evictions, which were mainly for reasons of violence. As already identified in the residents' interviews (Chapter Three), the example emerged of a local authority hostel where smoking was banned, there are smoke detectors in all the rooms and tampering with these is a ground for summary eviction. Staff in the hostel reported that women were outside, "in their gownies", at 2 a.m. in the morning having a cigarette. Although staff had enquired about designating a smoking room, this was ruled out as against council policy. In another other local authority area, a compromise was resolved through an informal arrangement allowing residents to smoke in a staff kitchen.

5.29 Still on the theme of varying scope for discretion in the enforcement of rules, the staff interviews indicate that not all rules are treated as equally serious, so that all breaches did not automatically lead towards eviction. Tensions arose for staff between the need to sustain a minimal level of consistency in their application, while also avoiding a high rate of warnings and evictions. One said: "rules can be a burden to staff as well as residents". Moreover, particular rules were identified in some hostels as being difficult to sustain systematically. Those in this category included one on smoking only in bedrooms and another that requires residents to pay for breakages. Also relevant here are rules on no drugs and no alcohol use.

5.30 Some staff pointed to the irony of mixed messages given by stated rules and practice. One telling example was that although drug use in hostels is banned, where there have been instances of inappropriate disposal of needles, this has in some cases led managers to install sharp bins as a safety measure.

5.31 In one hostel in North Ayrshire, the policy is for rules to be reviewed regularly with opportunity for discussion at residents' meetings. Some rules have been changed in the light of experience, such as limitations on children's access to the communal areas and children being required to be in their rooms by 9 p.m. Times of access for visitors to the building have also been revised and restricted, however staff in local service for homeless women reported that some women find the rules too restrictive or too strictly enforced.

5.32 Restrictions on visiting times were a particular focus for dissatisfaction, and this has been reflected in other hostels in other districts and through other research (SYHN, 2000). Such visiting restrictions are established for reasons including lack of space, or the mix of residents in a hostel at a point in time. However, it is important to note the evidence from the

residents' interviews, that being able to have visitors is important, particularly for women separated from their children, or young people from their families. Overall, the fact of differing approaches to such systems and rules across hostels and over time would suggest that in certain hostels greater flexibility may be feasible in the future.

5.33 In the larger hostels and in transitional, short-stay accommodation, residents did not generally have the opportunity to review or influence the rules. In some smaller, specialist hostels, including those that saw themselves as 'homes', residents were involved in discussing and reviewing the rules and in influencing changes in these, including one shared house in Glasgow, where alcohol could be consumed in the house. In another shared house, with a male group covering a wide age span, the residents proposed that there should be drug testing to rule out uncertainties. In others, rules had not been reviewed for some years.

5.34 One pattern emerging from the residents' interviews was that the ethos of a service, its management style and staff attitudes, are all important influences on user satisfaction, to the extent that positive experiences of hostel staff appear to override dissatisfaction in other areas, such as with the state of buildings. Both current residents and those homeless people interviewed who were excluded from the hostels, perceived some anomalies and unfairness in the ways that rules are applied, and they also responded very positively where they experienced being treated as individuals with kindness and consideration by staff. In fact some very positive comments about staff emerged in some of the poorest quality provision covered in the study - this human dimension having been highlighted similarly in other research (Ham, 1996, Wadham et al, 1997).

### **Managing at the margins**

5.35 Wadham et al's interesting study of direct access hostels in Birmingham described staff as "managing at the margins", and suggests that many hostel staff in all districts feel they are struggling to contain problems, including threatening behaviour, violence and health risks (Wadham et al, 1997, Ham, 1996). The Glasgow Review Team report stated:

*"In the City Council hostels, in the year up to February 1999, there were 9 suicides, 19 attempted suicides, 6 drug overdose fatalities, 76 non-fatal drug overdoses" (p.14).*

5.36 Staff comment on safety in large hostels mirrored some views expressed by residents:

*"We must not underestimate the volatility of the large-scale hostels, or of safety issues within them. These are very dangerous places, particularly for young people. There have been various stories of collusive behaviour, violence and bullying and of sexual harassment and prostitution. Lack of safety is a reason for some people choosing to sleep out, particularly in the warmer months. For older people the lack of peace and quiet is a real problem. ...I would hate to live in a hostel".*

5.37 Overall, in considering the views of staff and residents interviewed, there was greater concern expressed about security and safety by staff than by residents.

5.38 Hostel managers and support providers suggested it is impossible to know and to meet the needs of residents sensitively in the larger, institutional hostels. Constraints working against a person-centred approach were identified as being low staffing levels and a hostel social environment conducive to exploitation and intimidation, for reasons including moneylending or drugs or alcohol-related behaviours. A common concern expressed in the interviews was that large-scale hostel managers are pressured by day-to-day demands - including administering systems, monitoring behaviour and responding to crises in the hostel. All of these inevitably compete with time for "talking to people" and for structured work in assessing needs and helping people gear towards resettlement.

5.39 Two changes that hostel staff believe would make a real difference to both management and the support offered to residents, are more opportunities for *relevant training* and *an increase in the staff/resident ratio* – both of which were identified as measures that should help reduce evictions. Those who had had training in managing violence or in mental health issues said that often such training contributed to their effectiveness in doing the job and in recognising and responding to complex needs. However, some hostel workers stressed that it is important for training to be relevant to particular hostel environments and that this was not always the case in their experience. Hostel staff also indicated that there is a need for more comprehensive information about the health and support needs of hostel residents and about the services on offer to them. This mirrored the fact that the residents' interviews did not demonstrate awareness or experience of the long-standing social work and health services that have played a role, for example within Glasgow's large-scale hostels.

5.40 In the large hostels managers and staff said there is little time to talk to people, or to provide a casework rehousing service. There were indications from the residents interviews that access to help is uneven, although many residents referred positively to the help they received in these same hostels. Both hostel workers and support staff working with hostel residents believed that increasing the staff complement would create opportunities for a more positive staff presence, for better communications with residents, for improved and more casework and for better joint work.

5.41 More training is also seen as essential to enable staff to develop more effective strategies for working with individuals, to prevent and deal with difficult situations and behaviours and to improve joint work to find better and more sensitive ways of responding to the needs of homeless people. In smaller hostels (including specialist hostels), increasing staff levels was similarly seen as a key route to service improvements.

5.42 While some researchers offer the reminder that service providers usually emphasise the need to expand the role of professional support (Hutson and Liddiard, 1994), our agency interview programme highlighted some specific reasons why increased staff complements may improve outcomes:

- to provide an alternative to having security staff manage the hostel at nights (Ardrossan)
- to increase safety and prevention of crises by avoiding only one member of staff being left on at nights (high turnover service with vulnerable client group).
- to increase staff capacity for providing information and advice (large-scale hostels, Glasgow)
- to enable staff to spend time on promoting user involvement (specialist and generalist)

- to free up time on rotas to enable structured staff development and training (specialist and generalist).

5.43 Most staff also stressed however, that for hostels to play a more effective and positive temporary accommodation role, external matters need to be addressed, such as access to decent accommodation, follow on support services and the benefits system.

### **User rights and participation**

5.44 Overall, the staff interviews confirmed the viewpoint of residents and non-users that both user rights and opportunities for participation are minimal in the large-scale hostels and commercial sector, where there are often no written contracts or structures for resident consultation. Some hostel staff suggested that a resident's contract would be inappropriate given the temporary accommodation function of hostels. Advocacy and support providers, on the other hand, were generally of the view that while full tenancy agreements may be inappropriate in short-stay hostel accommodation, there should at least be formalised and contractual statements of user rights in hostels. It should be noted, however, that in specialist smaller services residents' contracts were more commonplace.

5.45 The interviews explored user involvement and participation both at the individual level and at the more collective level. In smaller specialist hostels, user involvement was commonly promoted through key working and care planning at the individual level. As for involving hostel residents collectively in influencing hostel systems and procedures however, there was little evidence of such participation opportunities for residents in large hostels. In smaller or specialist establishments we found evidence of participation strategies and some structured opportunities for resident consultation and participation, such as in meeting to discuss house rules, events or relationships in the life of the hostel. Victoria House in North Ayrshire for example, has fortnightly residents meetings and other services such as the Simon Community and the Cyrenians held regular house meetings. It appeared that a very small minority of agencies consulted had any representation of service users on their management committees - this being the case for only two voluntary agencies in Glasgow, for example.

5.46 Some hostels that had attempted to involve residents in management decisions about the service reported this had proved difficult to sustain. Other research suggests this may be because hostel residents are demoralised and have low expectations and mistrust of authority. Organisational reasons may be that user participation is a relatively low priority in management terms and that staff in residential services are often over-stretched (Bain et al, 1998 and Simons, 1997). In Ardrossan and elsewhere, staffing levels were identified as a factor limiting time on promoting user involvement. Some respondents stressed that it is necessary to focus and target staff energies and resources over time to increase opportunities for user involvement in a meaningful way.

5.47 One recent development on this front is that the Homeless Task Force has put in to practice its stated commitment to consult with homeless people, and in December 2000 a meeting was held with homeless people involved with the Big Issue and the Simon Community in Glasgow. Both service users and professional attending this meeting felt it was a useful opportunity for homeless people's voices to be heard. Moreover, it must be remembered that the central drive for this research has been to enable the views of hostel residents to be heard.

## **EXCLUSIONS AND EVICTIONS**

5.48 Exclusions and evictions clearly have an impact on rough sleeping. Hostel staff emphasised that these were not carried out lightly and that, in the main, a system of warnings is implemented. However, summary eviction (without warning) is used across a wide range of hostels. Reasons for summary eviction include:

- use of drugs in the hostel
- use of alcohol where this is prohibited by the rules
- unacceptable violence against either staff members or other residents

5.49 Evictions are a regular occurrence in urban and rural settings. Although in our case study areas it appeared that different eviction rates prevailed between agencies, there was no consistent statistical monitoring or recording available to make systematic comparisons. A number of agencies reported few but regular evictions. In one rural area, the managers of two services said that young people who have been evicted, for reasons such as alcohol or drug use or violence, are able to re-apply and each application is treated on its own merit. “We always give them the benefit of doubt as they may have changed”.

5.50 Evictions were a focus of concern for local authority planners and advocacy agencies in Glasgow. One advocacy manager suggested that even where there are appropriate policies and protocols, such as the need to refer the case of an excluded vulnerable young person to a senior homelessness manager, the protocol is not always applied.

*“There are indications that the system is failing people. It is clear that some people may be very difficult to assist and that some may be threatening, but it is questionable whether the response is appropriate in the large-scale hostel sector. There is a real issue of how far people are respected and trusted.”*

5.51 Those homeless people reported by hostel managers, support providers and advocates, to be commonly excluded from access to hostel accommodation include:

- couples - this seemed particularly notable in Glasgow
- people with mental health problems, addictions and complex support needs
- vulnerable homeless people who have pets
- people noted in connection with previous violent incidents or the threat of these
- people with rent arrears.

5.52 In relation to eviction for arrears or violence in Glasgow, where these occur in local authority provision, an alert is identified on the centralised computer. The alert is the spark to closing the gate to local authority provision and this was related to three main concerns in respect of homeless people’s rights and opportunities. First, some support providers were concerned that no written notification may be given to individuals about the assessment of their homelessness status. Second, they were concerned that the person’s vulnerability or mental ill health, and their related entitlement to accommodation may not be recognised. Third, consultations with support workers and with people sleeping rough suggested that an ‘alert’ for rent arrears, or a noted historic incident involving a fight or violence, can lead to people being excluded across the sectors. It was also reported that hostel providers may check people’s histories with the Hamish Allan Centre before allocating a hostel place. The outcome appears to be that support providers spend much time advocating on behalf of

clients, or a referral is made to the advocacy agency – and particularly so, where the initial problem which caused the alert is denied. One support provider commented:

*“Sometimes there are alerts because someone has broken a deal made a long time previously, such as to address a drugs or alcohol problem with a counsellor. If someone is on the streets they are not likely to be able to sustain this. Or it may not be recognised that the reason someone has a cleanliness problem is because of Korsakoff’s syndrome<sup>5</sup>. ”*

5.53 While there are smaller numbers accommodated in specialist hostels, such as those for homeless women and young people, these services may accommodate people who have slept rough, or who have been in the large-scale hostels and who have a range of intense or complex needs. These smaller hostels have a diversity of aims, funding and staffing arrangements; they generally provide targeted support and collaborate with a wider network of support services to address particular health and support needs. Just like the larger hostels, they at times may evict people because of addiction-related behaviours or violence. For a minority of residents, and particularly in short-stay accommodation, ‘move-on’ arrangements may involve moving from temporary accommodation to the streets, or into direct access poor quality commercial provision, or re-entering what they know to be an abusive situation. In some smaller districts, like North Ayrshire, if vulnerable people are evicted and represent to the local authority, they would normally be accommodated in bed and breakfast under the continuing duty to accommodate. Practices here may vary by local authority area.

5.54 Taking a broad view of staff and residents’ views, there were indications that a number of variables impact on eviction rates and these include:

- the ethos and culture of a service, such as the extent to which it recognises the power of staff, and promotes flexibility and humanity as far as possible
- legal constraints, particularly in relation to concerns about drug use, and the implications of the Wintercomfort/Cambridge case in 1999, which resulted in custodial sentences for 2 Day Centre managers
- the appropriateness of rules for particular client groups
- the rigidity with which rules are applied without consideration of circumstances
- staff levels
- staff training
- information, advice and advocacy
- joint work in prevention and finding alternatives to hostels
- move-on resources.

5.55 Clearly some of these variables may be outside the control of hostel providers (such as the law and move-on opportunities), while others are within it (such as reviewing the rules and the scope for flexibility). It was telling, for example, that Wernham House, a ‘wet house’ for people who are long-term drinkers has only had one eviction over 18 years. Low eviction rates were also reported for some smaller-scale, specialist hostels for other vulnerable client groups.

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<sup>5</sup> “Korsakoff’s syndrome” refers to alcohol-related brain disease, with symptoms including short-term memory loss masked by story-telling

## A rotation tendency

5.56 Many staff expressed concerns about one long-standing pattern connected with the large hostels in Glasgow - namely a tendency of 'rotation and re-entry', as was highlighted by earlier research (Falconer, 1990) and, more recently, by the Glasgow Street Homelessness Team Review Report (2000). Different reasons can be identified for the rotation pattern, ranging across eviction and re-entry, or the experience of threats to safety, or having somewhere to return to if a move-on arrangement fails. This feature of rotation was echoed in Aberdeen and to some extent in Fife, in relation to young people who were described as being on the 'circuit' or involved in a 'cycle' of admission, eviction and re-application to the different services.

## THE STIGMA OF HOSTELS

5.57 Most professionals, like the non-hostel residents interviewed, were concerned about the stigma associated with hostels, and particularly so in regard to older, larger, poorer quality and segregated provision. Yet it became clear that stigma was not just a factor of the size of hostels. Stigma was identified as an issue for smaller and newer provision - hence the use of alternative labels to describe the service. Stigmatised hostel provision was seen to compound the stigma of homelessness itself. One care worker commented:

*"Access to services may be denied because of stigma – or because homeless peoples' self-presentation may lead to services excluding them. There is even a hierarchy of stigma. Doctors often don't like coming in to (the big) hostels. Staff see homeless people as feckless or as 'druggies' or addicts. Older homeless people may see young homeless people as 'druggies'. Staff can increase stigma by their language they use."*

5.58 Some hostel managers and staff described how the stigma associated with hostels is reflected in tensions and prejudice within local communities. Hostel residents may be wrongly blamed for incidents involving local residents, or in some instances, local opposition has caused delays in the development of new hostels. Some hostel staff in the large-scale hostels in Glasgow reported that they have experienced prejudice themselves in the way the general public views their job and the client group. One said that people say: "It's not a job for a woman". A group of hostel staff who participated in a focus group agreed that the public sees the role of the large hostels as "a dumping ground for down-and-outs". Confirming the prevalence of stigma, the manager of a commercial hostel in Glasgow reported the following incident:

*"A local councillor complained about street drinking outside the hostel. I invited the councillor to the hostel and we went to the street corner, and sure enough there was a crowd of people drinking there. It turned out that around 12 were local residents and around 5 were from the hostel."*

5.59 This commercial hostel is largely recognised by professionals and service users as accommodation of the last resort, and in the words of the manager:

*"This is the bottom rung of the ladder of provision... A high proportion of our residents are excluded elsewhere and are 'persona non grata'. This can*

*be for many reasons, including personal hygiene, behavioural issues, including outbursts caused by excessive alcohol use."*

5.60 As already highlighted, to counteract stigma, some service providers have chosen not to use the term 'hostel', calling the service 'a project' or 'supported accommodation' or 'a house'. Some staff reported however that some homeless people prefer to use the term hostel, particularly if they have had histories of care.

5.61 Some respondents commented that even although there has been dialogue between homelessness agencies and the police and Benefits Agency, hostel residents continue to report poor treatment of homeless people by these agencies. Examples quoted were of aggression to people begging and arrests by the police, and a lack of sympathy and consideration by the Benefits Agency. This view was confirmed in interviews with people currently sleeping rough in Glasgow.

## **SUPPORT AND HEALTH NEEDS AND SERVICES**

5.62 Overall, staff emphasised health and support needs to a greater extent than emerged from the residents' interviews. Staff commented that often when a very vulnerable homeless person moved in to a hostel, support workers who had been involved with them previously sometimes reduced or closed off contact. Some said support and health providers did not always respond positively when individuals were in crisis. Some emphasised that some very vulnerable hostel residents may live for years in the poorest quality large-scale hostels, with unmet needs and no access to support, yet they may regard the hostel as their home. Others referred to personal tragedies that were part of the hostel experience.

5.63 In the unique situation of the last-remaining large and poor quality commercial hostel in Glasgow, which accommodates up to 135 men on 3 floors (with the fourth closed after a fire), some of the key problems for residents were identified as being alcohol dependence, loneliness and demoralisation. The hostel manager reported that many residents have high support needs and disabilities, although the hostel is inappropriate for wheelchair users (there is no lift). While at one stage social work provided an ongoing outreach support service at the hostel, more recently the hostel employs 2 care workers to support some older and very vulnerable residents. The support workers link with the hostel cleaners and other agencies to meet their needs, ranging from help in accessing benefits through appointeeship, to assistance with bathing and incontinence. The care workers employed by the hostel are seen as providing an essential service in helping residents register with local health care co-operatives and with CPN's. "But only the surface of needs is being scratched at the present time". The manager would like to see this care service expanded to meet pressing needs of the men in the hostel.

5.64 Many hostel staff reported difficulties in ensuring an adequate response by health services to residents needs. In Aberdeen, a retired GP has been funded to provide a surgery for one hour daily. While this is seen as helpful, some respondents were concerned that the specialist service could make it more difficult for hostel residents to take up mainstream services. An example was given of someone who arrived from London and went to see his old GP. He was told that as he was now living in a hostel, he should go to see the GP for homeless people. Moreover as the GP can only register people on a temporary basis he cannot access their full case histories and this makes it difficult to link with relevant

professionals, such as care managers or a drugs counselling service. This led to the comment that:

*“The service is okay for emergencies, for a quick fix, but in the longer-term it may further exclude and marginalise homeless people” (support provider).*

5.65 In spite of concerns about dependence on specialist services, most professionals felt that specialist health services often played an essential role in responding to the needs of some vulnerable hostel residents in the short-term. Some hostel staff suggested health professionals (apart from those specialising in homelessness) may hold a stigmatised view of large-scale hostel residents and of people sleeping rough, and that some health care professionals discriminate against homeless people in general, and those known to have addiction problems in particular. While access to registration with GP's was seldom described as problematic in Glasgow, it was pointed out that, even after registration, people could be struck off because they were viewed as a nuisance or were too expensive to treat.

*“A and E Departments sometimes write off symptoms because of assessments of drink or mental health problems. GP's vary with some being judgmental and others being more open-minded, supportive and recognise that people aren't just ‘having it on’” (hostel manager).*

5.66 Several respondents highlighted the need for services geared to promoting social opportunities and training and employment opportunities for hostel residents. Unlike older men entering the hostels in the past, most of whom had been in employment, including in the armed forces, many young people entering the hostels have never worked. Managers in The Big Issue reported however, that a recent survey conducted in two local authority hostels, indicated the skill levels of hostel residents may be higher than many may have supposed. In their experience, hostel residents place considerable importance on being able to get a job. However, the impact of training and employment on housing benefit levels can create a benefit trap for hostel residents and therefore a disincentive to employment.

5.67 A further key issue highlighted by hostel staff in an urban-rural area was that some very young people (aged 16 years) are entering homeless accommodation directly from residential care homes. Hostel staff stressed that better supported pathways, involving joint planning and joint work, are essential for young people leaving care.

## **JOINT WORK**

5.68 Since the mid-1970's guidance on homelessness and on housing's role in community care has emphasised that joint work and collaboration and integrated services are essential in tackling homelessness<sup>6</sup>. The staff interview programme overall confirmed an ever-increasing need for liaison and joint work to respond to particular needs in the hostels, but also indicated that operational joint work is uneven. Problems were identified in relation to accessing appropriate health and care services, or delays in assessments. Some hostel staff reported

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<sup>6</sup> The key guidance has included: Morris Committee, 1975, *Housing and Social Work: A Joint Approach*, The Scottish Office; *Housing Scotland Act 1987*, s.38 and 39; *The Code of Guidance on Homelessness* (1997) (para 4.3); *Children (Scotland) Act*, 1995, (Regulations and Guidance Volume 2 Chapter 7); Scottish Executive, 1999, *Modernising community care: An action plan*, 1999 (para 4.3).

instances when support, which had been planned and expected, did not materialise. Social work was viewed as under-resourced and overstretched. Repeated comments were that: “we do not receive all the information we need to know about residents moving into the hostels” or “they promise an input but it doesn’t take place”. In regard to social work support however, hostel staff recognised that this is a two-way phenomenon, requiring the co-operation and interest of service users to be a positive force. As indicated above, there were also accounts of a poor response from GP’s to homeless people’s needs.

5.69 A continuing area of frustration in joint work related to delays in finding appropriate housing and delays in community care assessments, sometimes apparently reflecting “a problematic interface” between local authority housing and social work homelessness services and their area (social work) and neighbourhood (housing) offices. Some pointed to the impact on slow move-on for individuals and in terms of revenue cash flow problems for services. One manager said:

*“This prevents meeting timescales that are critical for homeless people and for development planning cycles. You see some personal tragedies resulting from other agencies being far too stretched. For people with complex needs whose behaviour is difficult, it can take some years to reach agreement about moving on, or to gain access to a community care assessment which would enable access to residential care. There is something wrong with the system to get to that.”*

5.70 On a more positive note, there were some notable reports of excellent joint work and collaboration emerging in the case studies, and particularly in relation to youth homelessness or addressing health issues. The Talbot Association, for example, appears to have forged positive joint work arrangements between its hostels and local GP’s in Glasgow, and its Director stressed they have always managed to achieve a positive working relationship with local health providers. Where specialist social work homelessness-related services existed, these were valued by hostel staff, although there were some concerns that such services increasingly had to prioritise their statutory obligations in relation to child care and mental health.

5.71 The range of agencies with which hostel staff link includes:

- Housing departments’ homelessness services and local offices
- Housing advice and advocacy agencies
- RSI funded rent guarantee schemes (Aberdeen, Glasgow), increasingly used to help people who are excluded from Council provision because of arrears. The policy is that they will be barred from consideration for a year if arrears have accrued.
- Support workers employed by the central office of the hostel provider (Cyrenians)
- Social Work Department Teams, including specialist Homeless Teams (Glasgow)
- Social Work Home Support Team re resettlement
- Community Psychiatric Nurses
- Day services for homeless people
- Support teams for care leavers
- The Benefits Agency
- Local Health Care Co-operatives and dedicated GP’s working in homelessness
- Health Trust managed Homelessness Health Care Teams (for example, Glasgow)
- Volunteers, including those running activity sessions in the commercial sector
- Employment and Training services

- Drugs Education Agencies and Drugs and Alcohol Counselling/Advisory Services
- Multi-disciplinary project to build up employment skills (Fife)
- Body Positive Support
- Sexwise
- Abuse Survivors' Services and Women's Aid
- Counselling Services
- The Police.

5.72 Other positive examples of joint services cited in interviews included rent deposit schemes, such as those in Glasgow and Aberdeen, the joint work developed through the RSI and health outreach services to day centres and hostels. In addition it appeared in Glasgow for example, that there had been improvements following local authority re-organisation resulting from the development of joint protocols.

5.73 Overall, productive links with health services were reported by managers of community-based housing and support services, as compared with the experience in large hostels based in non-residential areas. Moreover there were indications that where hostel managers are pro-active in developing links with local health care co-operatives, then residents are more likely to get better health services, including access to methadone substitution programmes.

5.74 In all districts it was suggested that joint protocols and joint training across the sectors would make a difference. There was recognition that accommodation providers needed to learn from social care specialists, for example about mental health needs, while social care providers could learn much from housing colleagues, for example their knowledge of localities/neighbourhoods and their housing management experience.

5.75 In light of the emergent reprovisioning strategy in Glasgow, a number of respondents emphasised that new and proposed joint service initiatives and the £12.5 million allocated to reprovisioning, should make a real difference to improving joint work and outcomes for hostel residents. New inter-agency approaches and services under development in Glasgow, include: a new framework for needs assessment, a more integrated approach to health and care through a joint health and addiction team, increased and better targeted resettlement assistance and improved access to move-on accommodation (See Appendix Four).

5.76 Also highlighted in interviews with policy makers and managers in all districts was the scope for joint work to generate better access to advice and information for homeless people, and to promote better opportunities for consultation. In Glasgow, where the local authority's hostels have become a long-term home to a number of older residents - with one resident having recently proudly reported having celebrated being in one for over 25 years - many stressed the importance of approaching the hostel replacement programme sensitively and collaboratively. Just as in area renewal where planned physical improvements lead to displacement of local residents, or just as in the case of hospital reprovisioning, effectively resourced information and consultation strategies will be essential to minimise disruption and to promote peoples' rights in the change process. Joint work will continue to be critical to sustaining move-on accommodation and to preventing homelessness. It is also important to recognise that the initial options pursued may not work out for some, as has been the case in other reprovisioning experience.

## **POSITIVE AND NEGATIVE ASPECTS OF HOSTELS**

5.77 Just as in the residents' interviews, the agency/staff interview programme asked for comment on the positive and negative features of hostel living. Many of those identified below mirrored the views of residents (See Chapters 3 and 4).

### **Positive and negative aspects of hostels identified by hostels and support staff**

*Positive features* identified by staff included:

- central location
- access to basic services - safe and secure accommodation, food
- opportunity for anonymity in large-scale hostels
- layout enables opportunities for both privacy and company
- some like being in a mixed client group
- access to support - "staff are good at dealing with people"
- financial arrangements - accommodation costs met by housing benefit and cheap food

*Problematic issues and concerns* highlighted about hostels included:

- anonymity and loneliness
- the design and management arrangements together provided reasons for non-use
- some people did not want support, shared facilities or rules such as the curfew
- concerns about safety because of the resident mix and the risk of crime and drug use, particularly for those seeking to come off drugs
- concerns about location, for example:
  - women fleeing violence locally worry that their location may become known, particularly in small communities
  - some young people may be unwilling to live outwith their area for safety reasons.
- "communal living is not always suitable or liked"
- institutionalism - including rules restricting residents lifestyles
- some single people do not want to share with families and vice versa; others prefer single sex accommodation
- lack of support workers in some hostels means that individuals' particular needs are not being met
- lack of awareness of information about move-on options, or about access to advocacy
- blocks to move-on accommodation
- the stigma of hostel living

## **COMMENT ON RESIDENTS' INCOME AND POVERTY TRAPS**

5.78 Some hostel staff saw the interaction of poverty with the social security system as creating incentives for hostel residents to remain in hostels. For example in the large-scale hostels, housing benefit may cover relatively high rent costs, and there is a small personal charge for breakfast and heating to be met through income support. Research by Money Advice Scotland (Burrows, 1999) indicates that after deductions for rent, previous rent arrears and Social Fund repayments, residents may be left with around £60.00 every fortnight. By contrast, in registered supported accommodation or smaller, specialist hostels, residents would only have a personal allowance of around £15.00 per week. On the issue of hostel rent levels, while some support staff suggested that these were high, in the large-scale hostels for example, the residents' interviews raised little negative comment about rent levels, whereas these were mentioned negatively in the interviews with non-users.

5.79 A different poverty trap highlighted for hostel residents, including those resettling in ordinary housing, is that the take-up of employment opportunities may mean the loss of some housing benefit entitlement. This creates the likelihood of rent arrears and debt problems and the potential for the loss of tenancies or hostel accommodation.

5.80 Another key problem highlighted was that hostel residents are often unable to obtain legitimate credit while they are in a hostel, or when moving in to a tenancy, so "the majority of residents use loansharks if they need money", with consequences for long-term further debt (Burrows, 1999). Money Advice Scotland's study found that although 92% of hostel residents were in some form of debt, less than 14% had contacted the lender directly, or sought advice, when it became clear that they could not afford agreed payments. To break this cycle in Glasgow, over the past decade various initiatives have attempted to address the deficit in financial services on offer to homeless people; one such attempt was to develop a Credit Union. There has been some very recent progress on this front. The Big Issue has developed a scheme in partnership with the Bank of Scotland (called 'Move On') to enable homeless people to open bank accounts and to access advice on money management. One positive outcome of Money Advice Scotland's research is that the Scottish Council Foundation, with the support of State Street, has allocated £150,000 funding from June 2001 over 3 years, to innovative approaches that help homeless people and those in temporary accommodation in Glasgow to gain access to financial advice and assistance. The Chief Executive of the Foundation described the aim of this initiative as being to promote partnerships with banks to end "the financial exclusion of the homeless"<sup>7</sup>

## **ALTERNATIVES TO HOSTELS**

5.81 In the 5 areas covered in this research and from the information gathered in the inventory (See Appendix Four), it was evident that most homelessness agencies were either developing, providing or linking with a broad range of services that aim to provide positive alternatives to hostels or institutional provision, as highlighted in Chapter One. Such alternatives were developed and managed by local authorities, housing associations and voluntary agencies, independently or in partnership, and in many cases they have been progressed with the support of local networks of homelessness services or through homelessness planning groups (as in Aberdeen, Glasgow, Edinburgh and Inverness for

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<sup>7</sup> Alan Hobbett, Chief Executive of The Scottish Community Foundation, quoted in The Herald, 8 January 2001

example). Moreover, the service gaps identified through the interview programme indicate the case for a strategic approach to meeting needs, significantly through the development of alternatives to hostels.

## SUMMARY OF GAPS IDENTIFIED IN SERVICES

5.82 The interviews with hostel managers, hostel staff and senior planners involved in homelessness highlighted a number of service gaps and issues to address including:

- Many felt that much of current large-scale hostel accommodation is inappropriate, that physical standards could be improved and that in the future communal aspects should be restricted, although support should be available.
- There should be a range of models, including access to small, shared, good quality and supportive living arrangements. There were indications of particular gaps and difficulties facing rural areas and smaller areas, with a more restricted service infrastructure. In one rural area, key gaps identified included more direct access accommodation, which is safe and warm, in every town in the district. Also required were specialist services for very young people leaving care, for young people with complex problems already on the ‘circuit’, for young and older people using drugs, for people leaving psychiatric hospital and for older people (usually men) needing minimal support. A similar spectrum of unmet needs was identified in other areas.
- On the issue of access to hostels, it was stressed that providers must find ways of enabling homeless couples to access hostel provision, people who form relationships in accommodation and groups of 2 or 3 young people (including siblings) who want to stay together. Providers should also enable women to have access to their children. Access for people with animals is also an issue.
- There is a need for supportive move-on accommodation from transitional or temporary accommodation to meet the needs of vulnerable homeless people, including people who have been in institutions, people with a mental health problem, people with addictions, people with a learning disability, older vulnerable people, people with HIV/Aids and people with multiple needs, such as a physical disability and a mental health problem.
- For residents affected by reprovisioning programmes there is a need for good quality and targeted information and advice about housing and related support options. Such programmes also demand an increased role for integrated, resettlement support services. Effective resettlement requires targeted and adequately resourced assessment and case work services, as well as good quality housing in receptive areas for move-on accommodation.
- Quicker community care assessments are needed to enable access to residential care and specialist support services as appropriate. The need was also identified for more responsive and better-targeted health services, such as for people wanting to give up or to substitute drugs. Detoxification facilities are difficult to obtain, as

are services for people with alcohol-related disease such as Korsakoff's syndrome. Move-on from such services was reported to be problematic.

- Access to services is required for people who are not ready or able to give up alcohol or drugs – such as ‘high’ and ‘wet’ houses that maximise damage limitation - a thorny issue related to access to services to minimise harm for people who are currently using drugs. Obviously access to accommodation is critical, but the Wintercomfort/Cambridge court case has left accommodation providers feeling very vulnerable.
- Provision for people with complex and multiple needs. It seems to be particularly difficult for people with mental health problems to access services if they also have problems associated with drug or alcohol misuse. The need was identified for more mental health services responsive to young homeless people. The case was made for more targeted services for older homeless people whose needs may have been missed partly because of the high profile of youth homelessness and the targeting of services responses to their needs.
- A key shortfall was identified in access to training and employment opportunities. Some agencies, like the Cyrenians and the Simon Community, were addressing this as part of a strategy to develop a ‘continuum of services’ to meet the needs of homeless people. There were also some innovative services under development, such as by Emmaus in Glasgow.

## **CONCLUSION**

5.83 This chapter identifies a complex picture of hostel provision for homeless people in Scotland from the perspective of professionals, including planners, managers and staff and agencies providing health and support services. While there was evidence of different perspectives on a range of matters, overall the views of the professionals support the planning momentum towards smaller, specialised hostel provision, and away from generalist and undifferentiated provision. Moreover, they emphasise the need for hostels to prioritise their temporary or transitional function and to link with the network of homelessness and community care services to develop positive alternatives to hostels.

5.84 Finally, a number of opportunities for improvements in hostels and related services were identified. Overall the research indicated considerable potential to increase and formalise residents' rights and participation, to improve the quality of hostels and related services, and to promote alternatives to hostels to meet homeless people's needs better. Some pointers were identified for future reprovisioning and these will be explored in the final chapter.

## **CHAPTER SIX THE FUTURE OF HOSTELS**

### **INTRODUCTION**

6.1 In this final chapter we draw conclusions from the research and make recommendations. These recommendations focus on the future role and directions for hostels and related services and our aim is to identify the agencies and stakeholders for whom recommendations are relevant. Overall, this research has stressed the need for a strategic, inter-agency and integrated approach at local authority level, along with operational joint work in preventing and resolving homelessness. Most key issues and recommendations are therefore not agency-specific; rather they have a broad relevance to all agencies concerned with homelessness.

#### **A continuing but ambivalent role for hostels**

6.2 While many would like a future without the need for hostels for homeless people, this study indicates that hostels will continue to play some role in responding to homelessness in Scotland in the foreseeable future. Overall we found that service users on the one hand, and housing and care professionals, on the other, are ambivalent about the current and the future role of hostels in Scotland. Hostel residents overall, expressed a high level of general satisfaction with hostels for homeless people, but this masked a plethora of dissatisfaction about aspects of the quality of hostel life. Feelings about hostels ranged from a grudging acceptance of the need for a hostel place, to hostels being seen as 'a lifesaver' or as a place of positive choice. In general, however, hostels did not offer a positive choice. Despite improvements in the physical conditions in hostels of varying sizes, including widespread provision of single rooms, and some positive views expressed about management and support, service users often see hostels as institutional. Rules and regulations are often perceived to be overly strict, to constrain contact with family and to inhibit community and social inclusion. Additionally, the lack of opportunities for user involvement and participation was a major criticism of the hostel sector. So hostel living for many is excluding and disempowering.

6.3 From the professionals' viewpoint, hostel provision of appropriate standard, size and type, is seen to offer one appropriate policy and practice response to rising homelessness, partly by providing an alternative to other forms of temporary accommodation to meet the range of homeless people's needs and preferences. Hostels are considered to be able to offer accessible temporary accommodation, a range of services and facilities and access to varying levels of professional and communal support, although there were many suggestions for achieving improvements in existing hostels. That hostels are seen as having a current, relevant role to play has recently been indicated by the considerations and plans of some local authorities to provide additional hostel places in preparation for the extended duty to provide temporary accommodation in Scotland under the current Housing Bill. On the other hand it is evident that many professionals are strongly critical of large-scale, traditional and generalist hostels, which are seen as providing standards inappropriate for the 21<sup>st</sup> century and as perpetuating problems of homelessness. Most professionals felt that the key aim must be to develop longer-term ordinary and integrated housing solutions for homeless people, so that access to housing and community-based support is critical.

6.4 This research confirms that independent housing is the preferred choice for the vast majority of hotel residents, and it is notable that the strength of this preference is stronger than identified in some earlier studies (Falconer, 1990, Wylie and Court, 1992). To meet the range of individual needs and preferences identified in this research however, a range of options will be needed. This would include for some, living in accommodation that is shared or communal, rather than self-contained, and that may or may not have support provided, with hostel provision forming one option.

6.5 In relation to future hostel provision this research indicates there is the scope both to improve service standards in existing hostels and to address identified gaps and shortfalls in services. In light of this, we conclude by making a series of recommendations addressed to local authorities and local homelessness planning networks, to the providers of hostels and related services (including support and health providers), to those concerned with the major reprovisioning agenda in Glasgow, and finally, to government agencies.

## **RECOMMENDATIONS**

### **For local authorities and homelessness planning networks**

#### *A clearer role and more explicit objectives for hostels in local planning*

6.6 A multiplicity of purposes and roles of hostel provision emerged in this research. These include the role of hostels in providing:

- direct access or managed access temporary accommodation, mainly for single homeless people, but also sometimes families
- transitional supported accommodation for particular vulnerable groups
- long-stay accommodation, sometimes by intent, but more commonly by default - with some people having lived in hostels for over 20 years in accommodation intended as temporary.

6.7 Overall, hostels varied in the extent to which they saw support or resettlement services as part of their remit.

6.8 There is no doubt that local policy and planning should clarify the role of hostels better, primarily as one type of temporary accommodation, with the main other forms being private sector bed and breakfast accommodation, local authority and housing association furnished and unfurnished lets and transitional supported accommodation. Additionally the current Housing Bill's requirements for homelessness planning will be a critical thrust in ensuring that hostels are viewed as part of the wider provision of emergency, temporary and move-on accommodation. This will be essential to ensure that hostel closures do not exacerbate rough sleeping or repeat homelessness, and the research suggests that future problems could arise if replacement services are delayed, if they are unable to meet emergency accommodation needs, if they are not appropriate or flexible enough in meeting particular needs, or if there are blocks to appropriate move-on accommodation and support.

### *Hostels as part of comprehensive local homelessness strategies*

6.9 It is therefore important that the role of hostels is addressed more explicitly within the context of homelessness policy and strategy, partly to enable the objectives of hostels and related services to be clarified better at local level. The dominant thrust of this research leads us to argue that hostels in the future should more clearly emphasise their temporary function and that they should stress 3 of the 4 dominant purposes of hostels, as have emerged in this and other research – namely, to provide emergency and direct access temporary accommodation, to provide supervision and support, and to enable rehousing and resettlement through joint work (Falconer, 1990). A fourth key historical role has been to provide a long-term lodging house or home for some people. This study has highlighted that the current situation in hostel provision denies appropriate rights to those who use the hostel as their long-term home, and often does not offer standards of accommodation or a service ethos that affords people the opportunities for dignity and privacy that most of us would wish or expect in our homes. If the first three functions are to be pursued actively by hostels, then staffing resources will need to be increased and targeted, as will their revenue funding. Meeting revenue costs will require access to increased levels of interim housing benefit in the immediate future, to Supporting People Grant in 2003 and to community care funding to meet special needs. Local homelessness planning will be the focal point for identifying cost implications.

6.10 If hostels for homeless people are only one resource in the local system of temporary accommodation provision, then in meeting their objectives hostel providers must recognise their interdependence with other services. This research indicates that the assistance on offer to homeless people varies between hostel settings, with smaller specialist hostels and interim supported accommodation often better resourced and able to collaborate with relevant services to meet individual needs and to actively promote resettlement. The net effect is that it should not be too surprising that some homeless people have lived long-term in hostel provision that is unsuitable, large-scale, and of relatively poor standard and amenity.

### *Prevention and settlement*

6.11 Drawing on the issues highlighted by service users and agencies in the report, in addressing homelessness prevention and settlement issues local homelessness planning networks might usefully address the following matters, while consolidating on local experience in tackling homelessness and current good practice:

*The lack of direct access accommodation:* It must be noted that in some districts, where there is very limited access to social housing, access to the private sector and to bed and breakfast arrangements may be critical. Emergency accommodation for people who are sleeping rough, coupled with support appropriate to particular needs, is an increasingly recognised gap

*Targeting new and existing services to provide:*

- accessible and pro-active information and advice about housing and support options and access to advocacy

- access to activities and support for people in hostels, including training opportunities and employment options, preferably in flexible rather than institutionalised models
- alcohol and drug detoxification facilities and related move-on
- services responding to the needs of people with Korsakoff's syndrome, or brain disorder due to alcohol, recognising that many people may continue drinking
- support services to meet mental health problems
- support services responsive to the needs of people with mild or previously undetected learning disabilities, some of whom may have experienced abuse in group homes
- support and related advice and assistance which is sensitive to the needs of abused women, some of whom may be at risk of re-entering abusive relationships, particularly as abusers may be the only people known to the individual
- facilities to allow those with access to children but not living with them to meet up
- support services to meet complex and multiple needs, including some people who may be very difficult to place, "but must be given a chance" - for example, a person with a history of fire-raising.

*Access to permanent tenancies.* There needs to be a creative and flexible approach to move-on. Positive developments include that some providers, like Turning Points Midway Houses transfer occupancy agreements to a tenancy agreement, so enabling people to stay long term in their temporary accommodation if it is suitable. Glasgow City Council has also transferred temporary arrangements to permanent lets, such as when asylum seekers are granted status and become refugees. There is, however, a need for accommodation providers to review one of the key blocks to access, which is that current policies on rent arrears or past eviction or abandonment may debar some homeless people from access to tenancies

*Information and advice:* Pro-active and accessible housing information and advice will be critical to ensuring that hostel residents are properly informed about accommodation and support options to hostel living and to ensuring more effective and inclusive gate-keeping by all agencies. This is consistent with the Scottish Executive's intent to strengthen local authorities' advice duties in the proposed Housing Bill (section 5.10). Moreover, just as in hospital reprovisioning programmes, consideration must be given to the need for hostel residents' access to advocacy, particularly recognising that for some older and longer-term residents the hostel is their home.

*Resettlement and outreach:* Some re-assessment of the role and capacity of outreach and resettlement services may be productive, recognising there has been a significant growth in resettlement support services under the momentum of the Rough Sleepers Initiative. In addition, in a number of areas there has been a growth in pro-active and intensive outreach or floating support services, reflecting recognition both that crises arise for people in ordinary housing and that health needs are significant for homeless people. While this research emphasised the value of such services, it also emphasises the need for joint work and resource pooling to minimise service duplication, for example in assessment, and to ensure effectiveness

*Positive partnerships* between local authority departments and between local authorities, housing associations and co-operatives and voluntary agencies are critical to the effectiveness of move-on, and such partnerships have multiplied significantly in the 1990's throughout Scotland. Partnership agreements, in relation to funding, development and management, will become even more critical in the context of stock transfers, such as that planned in Glasgow

*Integrating and improving support services:* The research suggests the potential to extend and to target support services and inter-agency collaboration better, to prevent homelessness and repeat homelessness, and particularly given the growth and variety of housing-related support services assisting homeless people to resettle and to sustain independent housing. The providers of such support services include local authorities, health and voluntary agencies and some examples of very imaginative and flexible services emerged in the course of this research. These included day and night centres/services managed by voluntary agencies (Perth, Edinburgh, Glasgow), and support services provided either by Housing Department support workers, Social Work specialist teams or voluntary agencies, such as Turning Points, local Associations for Mental Health, and alcohol and drugs counselling services. While providers stressed the need for all hostels and supported accommodation services to have effective links with a range of crisis, detoxification and move-on services, they also stressed the need for homeless people to have the opportunity to re-enter services

*The role of health and related services:* The research highlighted an increased movement by Health Boards and Trusts to develop targeted outreach services to address the health needs of homeless people, such as the services funded by the Scottish Executive in South Lanarkshire and by the Health Board and Health Trust in Glasgow. The capacity of such services to prevent prolonged or repeated homelessness will depend on the extent to which they facilitate access to community-based, mainstream and primary care services in the longer term. A further issue indicated by this study was that there might be a need for more comprehensive information about the range of support and health services on offer to homeless people - both for hostel staff and for hostel residents.

*The issues of loneliness, isolation and boredom* that many people experience after being rehoused was strongly emphasised in this research, as was highlighted by the fact that around 50% of the users of day and night services, such as those provided by the Wayside in Glasgow, are people who have been rehoused in tenancies or supported accommodation. A number of approaches have emerged to address these issues, such as training, activity and employment initiatives, including:

- accommodation linked with training and/or employment services - including Foyers as in Aberdeen, the Emmaus initiative in Glasgow and a planned service in North Ayrshire
- the role of the Big Issue newspaper
- Simon Community, Wayside and Cyrenians' personal and group development and training-related services.

*Integrated, community-based approaches* to developing move-on accommodation and support are increasingly tried models and examples include:

- Housing allocations in partnership with support services, whereby respecting individual rights means that neighbour consultation is inappropriate. One such example is Glasgow City Council's partnership approach to allocations and support, whereby mainstream accommodation is let to former hostel residents or single homeless people and support is provided by local authority or voluntary sector support teams, such as the youth housing strategy teams, the Social Work Homeless Team, Glasgow Association for Mental Health and Addiction or HIV teams.
- Small-scale shared supported accommodation, or housing and support services in ordinary housing, such as that managed by a variety of voluntary organisations and housing associations across districts in Scotland. One example of innovation and integration is that of Loretto Housing Association's new build model of around 24 grouped, independent houses or flats, which includes accommodation for around 8 people with support needs, alongside a staff base and common facilities, such as a shared lounge and kitchen.

*Addressing financial issues and constraints:* This research indicates a number of financial blocks to effective ordinary housing and support solutions that could be addressed at local level.

- In some areas homelessness was seen to be perpetuated by the fact that some people are debarred from access to social rented housing because of rent arrears.
- At times the pace of social work assessments, as the route to access to registered care services, appears to slow down access, thus creating voids and potential revenue deficits. This can be exacerbated by payment systems.
- The capacity of Transitional Housing Benefit to meet development intentions must be clarified by the Joint Supporting People Unit. This will be a key issue for the reprovisioning programme in Glasgow.
- For historic funding reasons, such as a hostel opening at a time when the use of housing benefit was restricted for support services, there are indications that some projects may be struggling with current staff levels.

6.12 This research generated a variety of suggestions for service improvements, including for example that rent arrears could be prevented or redressed by rent direct systems, and that strategies on rent arrears could potentially be modified in some areas. An important next stage therefore, will be for interested parties to review strategic and development priorities and to assess their cost implications.

6.13 Overall, if hostels are to help people make a successful transition from homelessness, what is needed is a strategic and pro-active approach to meeting service users' support needs while in hostels, to accessing move-on accommodation, resettlement assistance and services that promote social inclusion. This means that hostels with their primarily temporary function must be integrated with a mosaic of housing and support services.

6.14 As part of wider homelessness strategies it will be useful for local authorities and other services to develop a temporary accommodation strategy, the foundation of which is outlined below. It will be important for such a strategy to be part of wider Homelessness Planning, and linked effectively with Rough Sleepers' Initiative (RSI) and related planning (Children's Services and Community Care). It should be noted that a sub-group of the

Homelessness Task Force is working to produce the framework for homelessness strategy guidance (Note of 9<sup>th</sup> Homelessness Task Force Meeting, 23 May 2000).

### **Temporary accommodation strategies**

- Stocktake and audit current provision of relevant housing and support services
- Identify local needs and gaps and shortfalls in services for particular groups
- Identify key blocks to access and move-on accommodation
- Consider whether changes and improvements are required to current policies and services
  - for example in policies on matters such as rent arrears, direct access, service ethos and purposes, physical standards and accessibility, access systems, staff levels and skills, user involvement and participation strategies, and training and joint work to promote resettlement and inclusion
- Assess whether new services and systems are required?
  - In what types - hostels, furnished accommodation, bed and breakfast/Private Rented Sector (PRS)
  - In what locations and in what sectors is provision required
  - What physical standards are preferred
  - How will new services avoid stigma
  - How will access routes and systems operate, such as referrals and assessment
  - How will access to appropriate move-on be maximised and blockages avoided
  - What range and types of provision are needed to meet different accommodation and support needs
  - What are resettlement needs, providers and systems
  - How will effective joint work systems be developed and operate - for example with social work and voluntary agencies
  - What systems will be employed for the monitoring and audit of needs and services, including patterns of admissions and evictions, and how will future services be evaluated to assist future planning?

### **Recommendations for the providers of hostels and related services**

6.15 The research indicates that local systems of homelessness services may benefit from developing a shared and consistent ethos and approach. The movement towards more integrated local planning on homelessness offers an opportunity to address the ethos and approach of all homelessness services to improvements. This research indicates some strong pointers to potential improvements.

#### *Service standards*

6.16 Suggested improvements to existing hostels included:

- better standards in physical environment and internal facilities
- making hostels more human in scale and humane in approach, partly by increasing flexibility in the management of hostels, such as by reviewing the use of rules
- ensuring access to support whether provided by hostels or related agencies
- enabling access to settlement, personal development and community integration

- providing better information about rights and options and enabling access to advocacy

### *Size and institutionalism*

6.17 We have suggested that size matters and we found it is useful to distinguish between different sizes and types of hostels, including:

- large-scale traditional hostels that offer direct access
  - large-scale hostels with managed access
  - specialist hostels providing support to address particular needs and that offer direct access
  - smaller, specialist hostels with managed access
- (See Appendix One)

6.18 Within these categories there are size distinctions to be drawn and in this study hostels were classified as under 25 bedspaces, 25-49, 50-99, 100+. In light of the research findings we would go further here. We would argue that any hostel over 50 places is a very large hostel and those of 100+ are extra large. Our size category of 25-49 is also large in terms of good practice in providing supported accommodation services. Moreover the research suggests it is hard for accommodation that is not ordinary in scale to suppress institutionalism or stigmatisation, although design can make a difference. Even recognising that service developments are significantly cost driven, we would stress that ideally in terms of future developments the aim should be not to provide even temporary hostel provision with more than 15 places. Where services cater for more than 15, grouped or core and cluster provision should be the aim. It must be recognised that revenue funding implications, rather than good practice principles, have historically driven the scale of developments, with economies of size being pursued. This means that revenue funding is a serious matter to address.

6.19 Overall however, smaller hostels represent an expanding group and they are increasingly and better described as supported accommodation, whether characterised by the intended combination of housing and support under the same management in the same establishment, or by some separation of housing and support services. It is important to note that small size does not preclude institutionalism in the form of rules and regulations and infringements on privacy. Nor does small size automatically imply that service users will be involved in influencing qualitative aspects of the service, or low eviction rates, for example. Such matters are influenced by service ethos and by the way in which staff exercise their positional power. There were some indications from this research that the ethos and management style of hostels may be more important in influencing user satisfaction than size or physical conditions, and this will be addressed later in this chapter.

### *User rights and involvement*

6.20 There should be increased attention across providers to user rights and involvement and consultation at both individual and collective levels. On user rights at the very least there should be a minimum period of notice of eviction. This raises issues for the management of hostels and the capacity of agencies to resource this will require some attention, and particularly in light of the Executive's plan to introduce minimum rights for people living in hostels through secondary legislation (Housing Bill, sections 5, 17, 18.). Also on the issue of

user rights, this research has highlighted that service users', and sometimes professionals also, believed that the system of governance and rules in hostels could be onerous, intrusive and institutional. Starting from the premise that hostels are people's homes while they live there, it would seem that reviewing the system of rules could generate some significant improvements in the quality of hostel living.

6.21 There is unlimited potential to borrow ideas applied in other reprovisioning and resettlement programmes (such as learning disability, mental health and physical disability). These include targeting resources to advocacy services to promote rights and involvement for service users and to develop opportunities for user involvement in management structures and in service monitoring and evaluation. Looking at the research and guidance on tenant and user participation, there are indications that a change in service culture may be required if rights and participation opportunities are to be meaningfully promoted for disadvantaged groups (Bain et al, TPAS Scotland, 1998, Simons, 1997).

#### *The role of joint work and support in developing alternatives to hostels*

6.22 Co-ordination and gate-keeping of access will be necessary to prioritise appropriate access to services for vulnerable people, including those with complex needs. Gate-keeping and managed access should however be balanced with opportunities for direct and emergency access. Approaches to assessment and resettlement will be critical to developing effective alternatives to hostels. Moreover, how assessment and resettlement services respond to particular needs, including health, support and people's life-style needs and preferences, will in turn be critical to opportunities for positive settlement for individuals. In some areas better-targeted assessment and resettlement services may require more and better trained staff.

6.23 This research emphasises that strategic, creative and flexible support services are needed to address particular needs, to link people in to appropriate services and to respond to people's needs over time. Promoting social inclusion may require a service culture change that crosses inter-agency divides and takes a holistic view of people's needs across health care, support, training and employment opportunities, income and housing sustainability. Resettlement or settlement services could cover all these aspects, and there are indications from this and other research that the approach to resettlement should be less time-limited and should draw both on person-centred planning and community developmental approaches.

#### *Monitoring of the use and management of hostels*

6.24 This should make a very useful contribution to future service planning. Monitoring should focus on particular needs and should address gender issues, as currently information about homelessness needs and trends is gender neutral and does not clarify any differences in the needs and preferences of homeless men and women. Monitoring should also assist in clarifying and addressing the particular reasons for exclusion from emergency accommodation, or for blocks to access to it. In London, for example, when a housing association took over the management of a large resettlement unit for conversion, some emergency provision was made accessible to couples, and kennels were added.

### *Staff training needs*

6.25 The research indicates that training needs are significant and that hostel staff often experience problems in accessing training, partly because of rota requirements and costs and partly because of the lack of targeted training, appropriate to the environments in which they work. Further training and support will be essential to increase the effectiveness of advice and assistance and joint work, and particularly to improve services for the relatively small group of hostel residents with complex or multiple needs, such as substance abuse coupled with mental health problems and/or learning disabilities. Consideration should be given to ways in which people who have experienced homelessness and hostel living can inform the content of training and guidance, or at least communicate their own experience to staff.

### *Service ethos and culture*

6.26 Many of the views of service users and professionals in this research suggest there may be an advantage in local homelessness networks aiming towards a shared value base or service ethos, just as has been pursued in community care and health services. While some agencies have actively promoted a change in their organisational and service culture, it is suggested here that seeking a shared ethos among local homelessness services may make sense, particularly given the increased interdependence of services. Moreover, we saw in Chapters Two to Four of this report that the hostel residents and homeless people consulted had much to say about their experience of hostels. Drawing on their preferences and the good practice highlighted by professionals, we take the liberty here of positing the foundations for a positive shared ethos or value base. There is one rider, however, this being that there is no intent to imply below that most homeless people or hostel residents have continuing support and care needs; rather the aim is to promote service users' rights and opportunities, supported by a common approach amongst professionals working with homeless people.

### *A constructive ethos for local homelessness networks and services*

6.27 The service ethos would be driven by values of normalisation, inclusion and empowerment and it would seek to ensure service integration and a holistic approach, just as has been identified by European-wide reviews of good practice in homelessness and resettlement (Harvey, 1999, Edgar et al, 1999)

- Person-centred, constructive and imaginative in helping people find positive pathways out of homelessness.
- Preventative of future homelessness at locality and centralised service levels and driven by a long-term perspective involving commitment to maximise access to information about options, to enable access to appropriate support and to follow through, even if initial solutions fail.
- Flexible about the roles of providers and systems, and recognising that peoples' needs may be complex and may change over time.
- Accepting that it can take time to develop the trust required for a working relationship with people who have been in crisis and who may have underlying problems. Moreover, recognising that intended pathways may not work out and

that people make mistakes, there needs to be tolerance of ‘failure’ or backsliding. As one provider said, “people must know that we are here for them regardless”.

- Oriented to promoting and ensuring dignity and respect – recognising that people may be traumatised, demoralised and have very low self-esteem.
- Holistic and aiming towards social inclusion, recognising that homeless people’s needs go beyond housing and professional support, that they may need help in linking with their family and neighbourhoods and that education, training and employment, or at the very least some form of meaningful activity, are critical to future settlement - just as has been pursued for other disadvantaged groups affected by reprovisioning and resettlement plans
- Committed to ensuring that staff are trained and resourced to ensure safety for staff and residents in residential services and to carry out key functions, such as assessment.
- Committed to promoting user rights and involvement in a variety of ways.
- Linked up with other local services and collaborative to address needs effectively.
- co-ordinated and with maximum delegation of functions such as assessment, to prevent duplication and over-assessment

6.28 Finally, the research methodology required us to produce a framework for reviewing the role and effectiveness of hostels and this is to be found in Appendix Two.

### **Reprovisioning and implications for Glasgow**

6.29 While much of this concluding chapter has broad relevance to planning for hostel reprovisioning and resettlement, we now consider some further implications for hostel reprovisioning, particularly in Glasgow, as this research has paralleled the development of a major reprovisioning programme in that city. It should be noted that the changing role of hostels and the background to reprovisioning in Glasgow was addressed specifically in the course of this research<sup>8</sup> and that the pattern of continuous movement towards improving homelessness services in Glasgow and across Scotland is illustrated in Appendix 4 to this report.

6.30 Turning now to Glasgow, it must be recognised that the Glasgow programme is unique and its scale is very extensive. Not surprisingly, the timing of this research highlighted huge uncertainties faced by hostel residents and staff alike at this juncture. Impending announcements about hostel closures, meant it would have been inappropriate and insensitive to explore the perceived impact of closure plans in the individual interviews with hostel residents in Glasgow (at early December 2000), particularly at a time when no information had been communicated to them. However, by the stage that focus groups were held in December, it was clear that concerns were emerging about the potential impact of closures. Hostel staff were concerned about both the future of services and future employment, while homeless people were concerned about the impact on opportunities to resolve homelessness. As publicity about the closure programme has been quite extensive since December, it is probable that concerns and uncertainty have increased for hostel residents.

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<sup>8</sup> Interim Report - The Changing Role of Hostels in Glasgow, January 2001

6.31 On the opportunities presented by this major Glasgow initiative, there is no doubt that it offers the challenge and the scope to transform homelessness and move-on services, given the historic reliance on large-scale provision in the city. There is a real opportunity to be imaginative and holistic, recognising that decommissioning hostels has the potential to create new opportunities for access to housing in ordinary neighbourhoods, and to redress the reasons that people may have been excluded from opportunities, simply because they are homeless or hostel residents. These would include health, support, continuing education, training and employment opportunities, as have been facilitated to some extent through reprovisioning and resettlement programmes for other client groups in Glasgow and elsewhere.

6.32 The experience of hospital reprovisioning suggests that the needs of vulnerable people may be met in ordinary housing with appropriate support packages and structured, but flexible joint work arrangements, provided that adequate and flexible funding and resource packages are available. Comprehensive reviews of resettlement emphasise how good practice seeks to maximise opportunities for normalisation, empowerment and integration (Edgar et al, 1999). Harvey's review (1999) compares three approaches to resettlement, concluding that the first is most effective. The 'normalisation' approach emphasises homeless people's abilities for independent living and their rights to access permanent accommodation; the 'tiered' approach is similar, but stresses the need for transitional accommodation, and the 'staircase' approach is even less optimistic, stressing the need for a staged movement towards permanent accommodation. The approach to needs assessment will be critical in determining which approach is pursued for homeless people in Glasgow. In parallel, funding opportunities will influence the feasibility and viability of independent living for people with complex or multiple needs - just as has occurred in hospital resettlement programmes (Petch et al, 2000).

6.33 This study emphasises that effective rehousing for people with high support needs requires joint needs assessment, sensitive and intensive care planning and care management, flexible joint work on resettlement and longer-term support, as well as realistic funding opportunities. On the issue of joint work, in some respects this research, just like recent good practice guidance, suggests that it is less important as to 'which agency or professional does what', than that the required tasks are carried out reliably and appropriately. On the other hand, the research highlighted an unevenness in joint work between areas and sometimes over time, alongside a growing strategic recognition that more appropriate specialist services require to be targeted to meet the needs of hostel residents and homeless people better. Recent developments to promote improvements in access to health services are therefore timely and welcome. These include the Scottish Executive's appointment of a Health and Homelessness Co-ordinator, the guidance being produced in this area and the increasing involvement of Health Boards, with Greater Glasgow Health Board and the Health Trust for example, which are increasingly seen to play a positive role in joint homelessness planning.

6.34 On the issues of equalising opportunities and empowerment, and promoting normalisation and inclusion, there are precedents and models on which to draw, building on other reprovisioning experience and developments (Petch et al, 2000). Some services developed have sought to promote new opportunities for constructive activity and training and employment, such as Clubhouses and Day Services. The ongoing review of services required to plan the hostel replacement programme presents a useful opportunity in Glasgow to review the existing stock of training and employment-related services, such as those managed by The Big Issue and the Simon Community. This should take account of the

experience of traditional Foyers as well as of more flexible models where training and employment opportunities are not tied to accommodation, such as those developed under the New Futures Initiative.

6.35 It would also be relevant to explore structured opportunities developed to promote user participation and consultation across the field of community care, for example on the mental health front in Glasgow. Two developments which may have some relevance to homelessness services are Allies for Change, a Scottish Executive funded national training and development programme which aimed to transform the professional service culture, and the 'Challenge for Change' initiative in Glasgow, similarly funded by the Scottish Executive, led by a multi-agency partnership. Key partners in the latter initiative were the Greater Glasgow Health Board, the Glasgow Community and Mental Health Trust, Glasgow City Council Social Work Department and the Glasgow and Scottish Associations for Mental Health. Outcomes have included a movement towards a more user-centred and participative service culture, more structured and better-resourced opportunities for service user involvement and the piloting of a system for involving service users in evaluating a number of services in Glasgow.

6.36 The research found that while many large-scale hostel residents in Glasgow will be happy to consider a wide range of move-on options and alternatives, a small but significant group of hostel residents would prefer to remain in their current accommodation, just as has been highlighted by earlier research. There is therefore, just as for other forms of reprovisioning, a tension to be resolved between the thrust of planning service improvements and reprovisioning and residents' current preferences based on their experience, accommodation histories and information about alternatives. The professionals we interviewed recognised that a number of large-scale hostel residents may prefer to live in low-cost hostel provision or in shared living arrangements and, preferably in city central locations. We also found some consensus amongst professionals and service users that small, specialist supported hostels or supported accommodation can offer a relevant resource for some groups, and for some time periods, to enable a positive transition from homelessness to settlement - just as was concluded by Neale (1997). This research suggests that hostel living may be of most value to homeless people, or those threatened with homelessness:

- who require a period of respite and re-orientation
- who require practical advice and resettlement assistance
- who need structured assistance and support in addressing a problem, such as drug dependence
- who gain from being in a sharing or communal environment

6.37 This study indicated some significant information and participation deficits for hostel residents in Glasgow notably, but also more widely. Given that many hostel residents felt they had received little or no information or advice about housing and support options, it follows that they are unlikely to be informed about the range of potential alternatives to large-scale hostel living. Moreover, it was apparent that both hostel residents and hostel staff felt excluded from the planning process. There is therefore a key role in the next stage of Glasgow's complex reprovisioning programme for, on the one hand, *an information and advice strategy* and, on the other hand, *a consultation and involvement strategy*. If Glasgow's longer-term hostel residents are to receive similar opportunities to other groups affected by reprovisioning in the field of mental health, learning disability and physical disability, then consideration should also be given to the model of advocacy to be pursued.

6.38 Finally, on reprovisioning and resettlement in Glasgow, there is a clear need to clarify the potential role and contribution of registered social landlords and of local communities, particularly in light of the potential major stock transfer in the city. Partnerships between the local authority, the new Glasgow Housing Association, other registered social landlords and voluntary agencies are likely to become increasingly critical, particularly if the stock transfer proposal is successful, in ensuring the prevention of homelessness, local housing solutions and positive alternatives to hostels. Strategic co-ordination will be critical in the future, and the appointment of the Joint Programme Manager for the hostel reprovisioning programme is therefore very timely.

### **Strategic issues for the homelessness task force and government agencies**

6.39 This research highlights that strategic consideration is required across policy divides within the Scottish Executive and UK Government (on reserved matters). While the research was not briefed to cost the implications of proposed service improvements and good practice recommendations, there is no doubt there will be implications for revenue budgets, including Supporting People Grant and other housing and community care revenue resources, as well as for capital funding. If government is to promote normalisation, inclusion and empowerment for homeless people, then consideration is required of the following:

- The impact of funding (particularly revenue) on the development and sustainability of hostels and supported accommodation, including some more costly housing support packages – whether floating or tenancy-based support - for the most vulnerable homeless people who, for one reason or another, are better living alone.
- The cost implications of the additional responsibilities on local authorities for housing advice, planning and temporary accommodation under the new Housing Bill. Recently £27 million was allocated over a 3-year period for these new responsibilities. There is however the telling comparison that almost a decade earlier, the Scottish Executive allocated £29 million additional capital, over 6 bidding rounds between 1991 and 1993, to temporary accommodation in Scotland (Currie and Pawson, 1996).
- The implication of training and employment for people's income and for housing access and sustainability, particularly given the constraints and disincentives associated with the housing benefits system and its 'poverty trap' implications.
- The development and monitoring of quality standards relevant to hostels, for example through the Supporting People framework. National Standards should also be developed in relation to hostels for homeless people and these should include a code of practice and minimum or baseline management standards, which would establish a framework for maximising residents' rights, consultation and involvement and respect for the individual. There may also be a key role in monitoring quality for the new Scottish Executive Agency, which will replace the regulatory functions of Scottish Homes at some point in the future.
- The potential for targeted financial assistance, both to independent advocacy and to agencies or networks that aim to promote participatory opportunities for service

users, including people who have experienced homelessness in the past, to have more of a collective say in influencing quality in the development and management of hostels and related support services.

- The potential for a more flexible approach in working with people using drugs, particularly in light of the current legal constraints. Further good practice guidance on how the health and community care needs of homeless people and hostel residents can best be addressed would assist here.
- Further research, first on temporary accommodation to update Shelter Scotland's 1996 study, and second on the purposes and functions of other alternatives to hostel provision, including supported accommodation and housing support services for homeless people. This research has focused on hostels, rather than on the role of services designed to substitute for their role, which may be seen to offer complementary and more constructive ways of preventing and resolving homelessness. This research highlights that a broad range of services have been developed since the 1980's in Scotland, both through hostel reprovisioning and through planning to address the interface between homelessness and community care needs. The Homelessness Task Force's plans to commission research in this area will therefore be timely and helpful to future planning and service development. This research could usefully build on the body of research on supported accommodation and housing support services and related good practice guidance.

## **DEFINITIONAL MATTERS AND RIGHTS**

6.40 We have mentioned that the uncertainties and inconsistencies surrounding the definition of what constitutes a hostel for homeless people are currently under discussion by a Scottish Executive Working Party on Subordinate Legislation. The Working Party's aim of arriving at an agreed and inclusive definition is a challenging one. This research grappled at the beginning with the problem of defining hostels exactly. Our definition covered the role of hostels in providing temporary accommodation communal facilities, supervision and staff support and the absence of statutory, and sometimes contractual rights. On the matter of the size of hostels, we opted for research purposes to cover a broad spectrum of types and sizes of provision, with the aim of highlighting commonalities and differences, so including provision of 6 bed spaces and over. Our aim was to recognise the varied functions of hostels and that some people may live in accommodation labelled 'hostels' for long periods of time, while their accommodation may or may not resemble the image of traditional, large-scale, institutional hostels.

6.41 We would suggest that whatever the definition arrived at by law there will be some continuing 'grey areas' and these include:

- whether a service will be defined as a hostel or as supported accommodation
- whether a service may be defined as a hostel or temporary accommodation, such as Foyers or furnished accommodation
- whether voluntary agencies or housing associations providing transitional supported accommodation, such as Stopovers or refuges are exempt from any new

obligations to follow due process, as they have been under the Housing (Scotland) Act, 1988

6.42 We started this research assuming we would end it by proposing a new framework for redefinition. However, at this concluding stage we are even more convinced about the definitional difficulties and persistent grey areas. We would now argue that the only good reason for attempting legal re-definition, is to develop an agreed framework to increase the rights of hostel residents and to prevent homelessness, particularly as a result of eviction. We therefore suggest it may be most productive to develop a framework of rights and good practice through other means such as:

- the guidance on standards in HMO's
- National Care Standards
- the development of new National Standards for hostels

6.43 In addition, there should be a 'floor of rights' on eviction and due process that are enshrined in statute. On this critical issue of service users' rights we have stressed that homeless people should have the same rights as vulnerable people with community care needs. Within the broad policy context of community care and supported accommodation, good practice guidance stresses that written agreements should always be provided and that tenancy rights should be granted whenever possible, in accordance with the principles of normalisation, empowerment and independent living. The guidance also states that residents' rights should only be restricted in the case of short-stay or emergency accommodation and in transitional accommodation (where formal occupancy agreements should apply), or in leasing arrangements/partnerships, where a short assured tenancy would apply (Scottish Executive, (1999) *Modernising Community Care - The Housing Contribution*). Any future guidance for homelessness service providers should emphasise the same principles.

## THE FUTURE ROLE OF HOSTELS

6.44 In spite of planning uncertainties, including the potential impact of stock transfers on housing access and development opportunities for homeless people, the indications overall are that the future of hostels in Glasgow, as elsewhere, should be, and will strive towards being:

- mainly temporary and transitional in ethos and objectives
- smaller, non-institutional and human in scale and design
- of better internal amenity and standard, including disabled access and circulation
- systematic in defining users' rights and inform service users of these
- more professionalised, with pro-active links and networking with a variety of housing, support and health services to respond better to individual needs and circumstances
- better staffed, with more staff undergoing appropriate training
- charged at a cost which neither presents a disincentive to moving on to other accommodation or taking up work or training opportunity, nor restricts dignity by leaving residents with a very low level of disposable income
- enabling of opportunities and activities, including through links with other agencies and volunteers
- more encouraging of user involvement and participation and positive about enabling access to advocacy

- better integrated with mainstream services and positive about working with a range of housing and support services to enable alternatives to hostels.

6.45 Current plans and recent developments suggest the picture of hostels will be dynamic and there will be continual improvement in physical standards, with hostels designed or re-structured and contracted to improve quality. Indications are that longer-term shared and supported provision will be called ‘supported accommodation’ rather than ‘hostels’ and its design will maximise homeliness, ordinary housing models, outreach and flexible or floating support, and social and economic integration.

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## **APPENDIX ONE: DEFINING AND CLASSIFYING HOSTELS**

### **DEFINING HOSTELS**

A1.1 One key research task at the start of this research was to define a ‘hostel’. As outlined in Chapter One, drawing on the literature, the definition of hostel applied in this study covers:

- temporary or transitional accommodation primarily for *single homeless people*
- either or both, board or shared facilities for the preparation of food<sup>9</sup>
- accommodation for a minimum of six residents<sup>10</sup>
- staff services, ranging from supervision to housing advice and support services
- service users do not have a tenancy agreement but some other form of contractual arrangement such as an occupancy contract (or possibly no written contract at all).

A1.2 In arriving at this definition, reference was made to the legal definition of hostel and to the definition of supported accommodation, the meaning of which at times overlaps with hostels. These are discussed below.

#### **The legal definition of ‘hostel’**

A1.3 According to the Housing (Scotland) Act 1987 the term ‘hostel’ means:

- (a) in relation to a building provided or converted before 3 July 1962, a building which is provided, for persons generally or for any class or classes of persons, residential accommodation (otherwise than in separate and self-contained dwellings) and board
- (b) in relation to a building provided or converted after 3 July 1962, a building in which is provided, for persons generally or for any class or classes of persons, residential accommodation (otherwise than in houses) and either board or common facilities for the preparation of food adequate to the needs of those persons or both.

A1.4 While this definition refers to accommodation that most people would not regard as ‘ordinary’ housing, the legal definition can be seen to apply to a wider range of types of accommodation than traditional hostels, including housing where support is also provided, for example to meet community care needs. This has led to suggestions that the:

*“legal definition of hostel is outdated and muddles rather than clarifies the appropriateness of its use in supported accommodation” (Edgar and Mina-Coull 1999).*

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<sup>9</sup> Housing Scotland Act 1987 Part One (5)

<sup>10</sup> As per Scotspen criteria for supported hostels

## **Hostels as temporary accommodation**

A1.5 This research, building on the approach of some key studies, has emphasised the role of hostels in providing non self-contained, temporary accommodation. The definition of hostel applied in two relevant studies emphasised that hostels:

*“had to provide accommodation which was essentially temporary in nature (accepting that some people may effectively have become ‘permanent’ residents by default). That is, occupation was on the basis of a licence, rather than a tenancy. For specialist accommodation, occupation had to be principally on the basis of being homeless, rather than on some other characteristic such as being young, female, an ex-offender or someone with an alcohol problem.” (Anderson et al 1993 p.117)*

*“had to provide accommodation which was non self-contained.” (Currie and Pawson, 1996)*

A1.6 The interim evaluation of the RSI in Scotland, in considering the extent to which RSI projects had assisted with ‘accommodation moves’ also implicitly defined ‘hostel’ as short-stay accommodation. Three types of moves identified were:

- hostel/other short stay accommodation
- medium-stay moves
- long-term or permanent accommodation (Yanetta et al 1999)

## **Definitions emphasising the multiple purposes of hostels**

A1.7 There is no universal agreement that hostels for homeless people only provide short-term accommodation. One interesting study of the role of hostels in contributing to strategies to address homelessness (Neale, 1997) highlights the role of hostels in providing long-stay accommodation. Moreover, some key homelessness providers, such as St Mungo’s in London, and Simon Community in Scotland, manage provision that may be termed hostels, and that provide long-term accommodation for groups of homeless people. The definition of ‘supported hostel’ applied in the SCOTSPEN database, also covered hostel accommodation not primarily intended for short-stay use. A ‘supported hostel’ is one where the following requirements are met:

<i>Sharing</i>	it is a building designed to house 6 or more persons in either single or shared rooms, but not in self contained accommodation units
<i>Support</i>	it has 24-hour support from staff based in the building, and would normally have provision for meals.

A1.8 SCOTSPEN made a further distinction between a ‘supported hostel’, which requires 24-hour support from staff based in the building and ‘supported accommodation’. The latter is defined as “housing designated for the specific purpose of accommodating individuals who need some form of support in order to live independently in the community”.

A1.9 As highlighted in this report, confirming the experience of other recent Scottish research (Mina-Coull, 1997, Currie and Pawson, 1996), this study found considerable ambiguity surrounding the term 'hostel'. In the main, for large, traditional hostels the use of the term was never in question, but otherwise consistent definition was lacking and at times different definitions were used within the same agency. The interest of this research in both generalist and specialist hostel provision meant that overlaps arose, on the one hand, between hostels and supported accommodation, and on the other, between hostels and different forms of temporary accommodation for homeless people. While some local authorities and voluntary providers described bed-sit accommodation, or a block of flats used for emergency and temporary accommodation as a hostel, others defined it as supported or temporary accommodation. Another definitional overlap related to emergency or temporary accommodation in grouped but self-contained flats or bedsits, which involved some sharing. Sometimes agencies viewed these as hostels, whereas the definition of hostel in this research treated them as shared or supported accommodation rather than as hostels.

## **CLASSIFYING HOSTELS**

A1.10 Another initial research task was to develop a framework for clarifying the role and functions of hostels. In the literature on single homelessness, classifications are broadly structured either by client group or by the role and purpose of the accommodation.

### **Classifying hostels by client groups**

A1.11 Both the National Homeless Alliance (NHA) and Klinker and Fitzpatrick (2000) highlight a wide range of client groups for whom hostels and homelessness services are provided. The NHA identifies the following main groups for whom specialist hostels are provided:

- young people
- women who have experienced abuse
- people from black and ethnic minority groups
- people who misuse drugs
- people who are alcohol dependent
- people with mental health problems
- ex offenders
- people who are HIV positive

A1.12 In similar vein Klinker and Fitzpatrick's comprehensive bibliography identifies the particular needs which may be addressed by homelessness services. The clients of targeted homelessness services are described as 'broadly speaking', people whose life experiences may act as a 'trigger' precipitating homelessness and may result in particular support needs to which services require to respond. Homelessness services may be targeted at asylum seekers and immigrants, care leavers, ethnicity/ethnic minorities, ex-prisoners, ex-service personnel, gender, hidden homeless, migrants, older people, owner occupiers, rough sleepers, runaways, homeless people in rural/coastal areas, survivors of sexual abuse, women or young people.

A1.13 What is missed by such lists is the issue that people often have multiple or complex needs – a pattern that has increasingly emerged in other research (Bevan, 2000) and has

required addressing in this study. In her recent study of young homeless people using the London Connection, Lyn Watson highlights how young people may fall between legal and agency responsibilities - for example between the Children Act and the NHS and Community Care Act and between the eligibility criteria for services, so that:

*“they are not only homeless in the literal sense, many of them are also homeless in social policy terms” (Watson, 1999).*

A1.14 The implications for housing and support services and for homelessness strategies were highlighted in this report.

### **Classification by types of provision**

A1.15 Klinker and Fitzpatrick approach hostels as one of six ‘responses to homelessness’ involving the provision of accommodation – the others being bed and breakfast, emergency shelters, foyers, furnished flats and temporary accommodation (Klinker and Fitzpatrick, 2000). On their web pages The National Homelessness Alliance report that hostels are often the only accommodation available for single homeless people and classify hostels and related access systems as follows:

- Direct access hostels where people can obtain a bed for that night without an agency referral provided that beds are available.
- Non direct access hostels where a bed can sometimes be obtained immediately but where there are sometimes waiting lists. This could include hostel places where access is governed by eligibility criteria, for example the need to be assessed as in priority need under homelessness legislation, as for some local authority managed hostels.
- Specialist hostels that may be transitional or longer-stay and may include direct access.

A1.16 Within these broad definitions, hostels may vary in size from the very large scale, where support from hostel staff is generally restricted to caretaking and management, to small hostels providing a more homely atmosphere for homeless people with additional support or health care needs.

### **Classifying hostels by aims and purpose**

A1.17 Building on our literature review and the inventory we have classified hostels for the purpose of this research, first by aims and purposes (Table A1.1) and then by functions (Table A1.2). This typology highlights some key differences between the characteristics of individual hostels, however in practice any hostel may operate with a range of aims and purposes and access criteria.

**Table A1.1 Aims and Purposes of Hostels**

Classification of type of hostel		Aims And Purposes
Type of provision	Access criteria	
Traditional type of hostel providing for general needs accommodation for homeless people	Emergency or direct access hostels	To provide a direct route to a bed for the night for homeless people, including those who may be excluded from access to other accommodation, for example because of life-style issues.  Provides transitional accommodation for varying levels of time in generally poor quality accommodation
Traditional generalist	Non direct access hostel	To provide accommodation to people on a planned entry criteria or where access may be dependent on referral from another agency or on assessment by homelessness caseworkers. This would include hostels that have an explicit aim of providing temporary accommodation for priority groups  Purpose of accommodation is transitional although some people may be long-term residents through lack of alternatives.
Specialist hostel provision	Emergency access	Generally to provide accommodation and support for particular groups of homeless people, including: <ul style="list-style-type: none"><li>• Young people</li><li>• People who misuse drugs or alcohol</li><li>• Older people</li><li>• Women</li></ul> While the accommodation is intended to be temporary only, the service may emphasise the transitional objectives of the accommodation and support in enabling access to positive move-on arrangements and/or independent living. Support provided can vary from 24-hour staff cover to visiting workers
Specialist hostel provision (increasingly termed supported accommodation)	Planned access	As above but with expectation that accommodation will be provided on a more permanent basis.

### Classification by hostel functions

A1.18 While all the hostels of interest to this research play a role in addressing homelessness as indicated above, we have stressed that the diversity of their forms, functions and approach is remarkable. Wide variations prevail in building layout and standards and the social life within them would seem to reflect a mix of hostel functions and access arrangements, management ethos and style, building design and the characteristics of service users.

A1.19 Variations in hostel functions ranged across:

- Accommodation coupled with access to communal living and services, with limited staff support focused on maintaining security and the property.
- Temporary hostel accommodation provided by local authorities to enable assessment of vulnerability and priority need.

- Transitional accommodation with support, aiming to provide opportunities for rehabilitation or integration, usually for particular groups such as young people.
- Support services may or may not be on offer and may range across support provided by hostel workers, targeted outreach support provided by other agencies, and assistance with moving on and resettlement.

A1.20 As indicated above, either direct access or managed access arrangements may be a feature of any hostel type. There are indications that alongside a general decline in the numbers of hostel places for homeless people, there has been a decline in traditional forms of direct access, whereby hostel beds can be accessed at any time without referral (Wadhams et al, 1996, Ham, 1996). More recently, direct access has been redefined to cover situations where a vacancy is offered at least weekly and to take account of the increasing co-ordination of access and the parallel growth of agency referrals, particularly given the role of the Rough Sleepers Initiative (Van Doorn, 2000).

A1.21 Regarding accommodation standards, while good practice guidance increasingly stresses the value of privacy and individual rooms, the use of shared bedrooms persists in some provision, either reflecting agencies' preferred strategies, or that upgrading has not been feasible.

A1.22 Overall, a key trend in hostel provision, as well as in the wider network of homelessness services, is towards targeted provision to meet particular needs (Neale, 1996, Fitzpatrick et al, 2000). The net effect is that many of today's hostels do not conform to the traditional Victorian image of a very large institutionalised building (Neale, 1997). Although these trends are evident in Scotland, this research found some particularly stark differences in the size of hostels, most notably between smaller, specialist hostels which accommodate people with particular or special needs and the larger-scale, more generalist hostels. Some of these may have survived from Victorian times, while some have been developed more recently.

A1.23 Such larger-scale hostels have been the subject of extensive earlier research on hostels and single homelessness in Glasgow with one study profiling the multi-purpose character and competing functions of this provision (GCSH, 1990; Wylie and Court, 1992). Given that these large-scale hostels play a unique and dominant role in the system of homelessness provision in Glasgow and that they are at the centre of a major reprovisioning strategy, their characteristics are highlighted below.

**Table A1.2 The multi-purpose character of large-scale traditional hostels**

<b>Four Competing Functions</b>	<b>Description</b>
LODGING HOUSE OR LONG-STAY (40-50% residents in 1989 survey)	<ul style="list-style-type: none"> <li>• Initially catered for mobile workers</li> <li>• Low rent</li> <li>• Bottom end of market</li> <li>• Commercial sector in past</li> <li>• Now mainly managed by the local authority or voluntary organisations</li> </ul>
REHOUSING (30% of residents in 1989 survey)	<ul style="list-style-type: none"> <li>• Temporary or interim accommodation</li> <li>• For people awaiting rehousing</li> </ul>
EMERGENCY OR DIRECT ACCESS	<ul style="list-style-type: none"> <li>• Immediate access for homeless people</li> </ul>
CARE AND SUPPORT (GCSH, 1983 and 1989 surveys and ONS Survey, June 2000)	<ul style="list-style-type: none"> <li>• Accommodates people with acute needs</li> <li>• Without access to appropriate support and health services</li> </ul>

Source: GCSH, 1990, Single Homelessness & Housing Need in Glasgow, pp 35-36

A1.24 The complexities and uncertainties surrounding the definition of what constitutes a hostel are currently under discussion by a Scottish Executive Working Party on Subsidiary Legislation. The good reason for attempting to establish a common understanding of 'what is a hostel' is to develop a framework for increasing the rights of hostel residents. It will be important, however, for any attempt at reclassification to recognise the varied functions of hostels and that some people may live in accommodation labelled 'hostels' for long periods of time, while their accommodation may or may not resemble the image of traditional, large-scale, institutional hostels.

## APPENDIX TWO:      ROLE AND EFFECTIVENESS OF HOSTELS

### PROMOTING INCLUSION FOR SINGLE HOMELESS PEOPLE

<b>Purposes</b>	<b>Related Hostel Functions</b>	<b>Impacts</b>
<b>Access To Accommodation</b>		
1. To alleviate homelessness crisis and to prevent rough sleeping, while maximising choice	Direct access	Numbers admitted; Homelessness history before admission; Number evictions and reasons Users stated reasons and preferences
To assist LA discharge homelessness and Community care responsibilities	Access through referral agreements	Monitoring information re who gains access, including reasons for not accepting referrals
2. To meet crisis needs for a specified time-frame	Temporary or transitional accommodation	Monitoring information re length of stay and blocked move-on
3. To facilitate informed access to appropriate move-on – housing and support	Information and advice	Reviewing role of hostel staff or of joint work other support providers Audits of information Staff training and networks
<b>Access To Support</b>		
4. To meet residents support needs - as per hostel aims	Support provision	Reviewing role of hostel staff and joint work with support providers. Reviewing staff role, key working, person-centred planning, etc
5. To protect residents' health and well-being	Links with health services	Reviewing role of hostel staff and joint work with health providers
6. To maximise quality of shared living in the hostel, to ensure equal opportunities and to protect residents' safety	Implementing framework of hostel rules	Reviewing systems and supervision; Monitoring of breaches and how these are handled
To assist residents to access education, training and employment opportunities	Support, advice and information services	Reviewing role of hostel staff and joint work with other services. Reviewing staff role, key working, person-centred planning, etc
7. To enable access to other relevant services, such as: Counselling Interpretation Debt advice	Links with relevant services	Reviewing links and appropriate networks, referral systems. Monitoring needs through key work, residents and staff meetings
8. To increase morale of homeless people	Promoting social activities	Reviewing role of hostel staff and joint work with voluntary agencies or volunteers
<b>Access To Participation</b>		
9. To empower hostel residents and to maximise their involvement in the running of the hostel	Resident rights, participation and involvement	Written residents' contract with clearly specified rights and responsibilities Reviewing access to advocacy Systems for participation such as residents' meetings Audits of involvement/participation

<b>Opportunities For Resettlement</b>		
10. To facilitate appropriate and effective move-on to independence	Resettlement services	Reviewing role of hostel staff and joint work with resettlement providers. Monitoring of outcomes
11. To maximise opportunities for Independent living or access to appropriate supported accommodation if required	Enabling access to longer-term support as appropriate	Move-on planning ensures links with appropriate longer-term services. Monitoring follow on contact
<b>Accommodation Standards</b>		
12. To provide safe, secure accommodation	Supervision of property	Audits of incident prevention and incident handling
13. To maintain or improve physical standards	Property maintenance/ improvements	Monitoring and audit of standards, such as decoration, cleaning to major repairs and improvements
14. To restructure or reprovision accommodation to meet support needs better	Planning and Development partnership activity	Monitoring of progress and outcomes

## APPENDIX THREE (A): THE PATTERN OF HOSTEL PROVISION ACROSS SCOTLAND

<b>Local authority</b>	<b>Type of area</b>	<b>No of eligible hostels</b>	<b>No. of places*</b>
Glasgow City Council	Urban	28	1733
North Lanarkshire Council	Urban	9	276
City of Edinburgh Council	Urban	11	252
Aberdeen City Council	Urban	10	211
Dundee City Council	Urban	8	168
South Lanarkshire Council	Mixed U/R	6	113
Inverclyde Council	Mixed U/R	5	113
Perth and Kinross Council	Rural	4	103
North Ayrshire Council	Mixed U/R	2	91
East Ayrshire Council	Mixed U/R	3	80
South Ayrshire Council	Mixed U/R	3	70
Fife Council	Mixed U/R	6	65
The Highland Council	Rural	3	56
Falkirk Council	Urban	3	56
Scottish Borders Council	Rural	6	54
The Moray Council	Mixed U/R	4	51
Dumfries & Galloway Council	Rural	5	44
West Lothian Council	Mixed U/R	3	42
Shetland Island Council	Rural	1	34
Aberdeenshire Council	Rural	1	30
Stirling Council	Mixed U/R	1	24
Renfrewshire Council	Urban	1	21
West Dunbartonshire Council	Urban	1	12
Clackmannanshire Council	Mixed U/R	1	8
Argyll & Bute Council	Rural	1	0
East Lothian Council	Mixed U/R	No hostels	No hostels
Midlothian Council	Mixed U/R	No hostels	No hostels
East Dunbartonshire Council	Urban	No hostels	No hostels
East Renfrewshire Council	Mixed U/R	No hostels	No hostels
Angus Council	Mixed U/R	No hostels	No hostels
Orkney Islands Council	Rural	No hostels	No hostels
Comhairle Nan Eilean Siar	Rural	No hostels	No hostels
<b>TOTAL</b>		<b>126</b>	<b>3707</b>

\*Note-best estimate using information from both forms completed by local authorities and those completed by individual hostels

## APPENDIX THREE (B): ACCESS SYSTEMS IN THE 5 AREAS

A3B.1 People in different districts get hostel places through different routes. The table below summarises the different ways of accessing a hostel place in the five study areas.

### Criteria for accessing hostels in the 5 areas studied by classification of type of hostel

Area	Traditional type of hostel providing for generalist needs and mainly for single people		Specialist hostel provision providing mainly for single people		Designated provision to temporarily accommodate homeless applicants-families and single people
	Direct access	Non direct access	Direct access	Non direct access	
Aberdeen	Yes - main generalist provision for <i>single homeless people</i> is direct access.	None	Yes	Not in hostels surveyed	Access is dependent on assessment of priority need status. Encompasses households with children and single people.
Glasgow	Very few with direct access. The voluntary, private sector and a housing association manage some with direct access?	For the majority of places, access is secured by assessment at the Hamish Allan Centre, a centralised local authority service for homeless people.	Some	Some dependant on social work assessment to fund stay	Not designated as hostel accommodation
Fife	None	None	Some for young people	Some places for young people dependent on referral by local authority homelessness officers	Access depends on assessment by caseworkers of priority need. This encompasses households with children and single people. People without priority need might be temporarily accommodated if had been sleeping rough.
North Ayrshire	None	None	None	None	Access via the local authority. Accommodates people assessed as in priority need or awaiting assessment
Perth and Kinross	None	None	Yes	Yes	Access via the local authority. Accommodates people assessed as in priority need or awaiting assessment

## **APPENDIX 4 (A): REPROVISIONING SERVICES IN GLASGOW**

A4A.1 Appendix Four focuses on hostel reprovisioning and related service developments in Glasgow (Appendix 4A) and in other districts (Appendix 4B). In view of the scale of the reprovisioning programme in Glasgow, it first considers the recent history of hostel reprovisioning in the city.

### **LARGE-SCALE HOSTEL CLOSURES IN GLASGOW IN THE 1990'S**

A4A.2 Two large, poor quality facilities - the Great Eastern Hotel and the Bishopbriggs Resettlement Centre - persisted in providing direct access accommodation in the city until very recently. Both offered 'accommodation of the last resort' for men only, often after personal crises and relationship breakdown, eviction from other accommodation, or after leaving different kinds of institutions. The complex needs and vulnerability and histories of exclusion characterising the residents in these hostels were well recognised by the network of homelessness services, and by the early 1990's a two-pronged strategy had emerged. On one hand, outreach health and social work services were targeted increasingly to assist service users of these facilities; on the other, the policy thrust was towards closure and resettlement.

A4A.3 The privately owned **Great Eastern Hotel** in the East End of Glasgow, with its large and imposing Victorian façade, accommodated over 300 men in cubicle type provision in the 1980's, many of whom, for one reason or another, were unable to gain access to decent or appropriate accommodation. In 1994, the Great Eastern Hotel became the focus of a partnership reprovisioning strategy. The hostel was brought into social ownership and management by two housing associations – Loretto Housing Association as management and development agency and Milbank Housing Association, as landlord. Given its long-standing reputation the hostel was named 400 Duke Street, but interestingly it has continued to be called 'the Great Eastern'<sup>11</sup>. A variety of statutory and voluntary agencies and housing associations have played a role in the closure process. These included Scottish Homes and the local authority, both of which allocated funding; housing associations and the local authority in letting houses, and social work, health and voluntary agencies by providing support and health services, including access to residential care for older residents. It was initially assumed that the closure of the Great Eastern would take effect in 1998, with good quality, small-scale integrated replacement housing units developed by Loretto to meet the needs of 60 vulnerable residents.

A4A.4 Loretto's model is one of integrated units of around 24 grouped, independent houses or flats, with accommodation for approximately 8 people with support needs. Each development provides an office base and overnight accommodation for staff and a shared lounge and kitchen. Managing the Great Eastern and the resettlement programme required Loretto to employ over 40 staff working on 3 shifts, and not surprisingly, the Great Eastern project dominated Loretto's work for a number of years. There were inevitably major management problems, ranging from maintenance issues and phasing a major repair programme over 4-5 months (rewiring, replumbing and fire-proofing), with the men in situ but decanted in the building in groups of 10. Finding alternative accommodation proved to be more difficult than expected: "No one would take these guys".

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<sup>11</sup> Interview with Director of Loretto Housing Association, December 2001.

A4A.5 Loretto's staff found that the needs of Great Eastern residents were at times greater than those of people resettled from long-term psychiatric care and this had implications for revenue costs and particularly for staffing levels of replacement services. Like other homelessness agencies which had also developed community-based resources in response to hospital reprovisioning programmes, it became evident that the resources available for hostel reprovisioning were less favourable by comparison.

A4A.6 Some development delays and contingencies affected the programme and included:

- Finding appropriate sites in well-established communities open to the resettlement of homeless people, particularly as there was a preference not to develop new resources in outlying areas of housing schemes with few facilities and poor transport
- One project was subject to unpredictable, lengthy and unavoidable delays when a contractor went into liquidation
- Rehousing was slower than expected with delays in access to appropriate houses

A4A.7 The closure of the Great Eastern is now expected in the summer of 2001, some 3 years later than initially planned.

A4A.8 Turning to the closure of the **Bishopbriggs Resettlement Unit**, this similarly took longer than initially expected, with the closure implemented in 1996, some two years later than had been planned. The Resettlement Unit accommodated approximately 75 men in the early 1990's, and was the focus of the last phase of the Resettlement Agency's national closure and replacement programme. The closure was proposed initially in the mid-1980's by the Department of Social Security's Resettlement Agency, but there was strong local political and trade union opposition. Once the closure was agreed in 1994 the reprovisioning strategy was locally-co-ordinated and inter-agency in approach. The main replacement services in Glasgow were developed and managed by the Talbot Association, including the conversion of the Kingston Halls, a former night shelter, which now accommodates 67 homeless people in single rooms, apart from a small reception unit. Talbot provides six other specialist residential services for homeless people, a number of which are registered with social work, with one other recent development funded as part of the Bishopbriggs Replacement package. This is a hostel for young homeless people in a former hospital which was developed in partnership with Govanhill Housing Association. The Simon Community also contributed to the replacement package by developing a temporary supported accommodation unit for 15 vulnerable homeless women in partnership with Govanhill Housing Association.

A4A.9 Other notable changes in homelessness services over the past decade are illustrated by the development of some of the key voluntary sector agencies. For example, the Simon Community has sustained its traditional role in providing small-scale, participative communal living for longer-term single homeless people in four projects, but has also linked with the network of homelessness services to meet pressing needs in the 1990's. It also manages resettlement and training services funded through the Rough Sleepers Initiative. The Talbot Association continues to work with its traditional client group of people who have long been homeless, but it has also developed specialist and supportive accommodation for younger homeless people, many of whom have a drug problem.

A4A.10 Whereas in the 1980's and 1990's Talbot for example, worked with a majority of older homeless people - by contrast in the year 2000, around 75 to 80% of residents at the Kingston Halls are young people under 25 years. The Director described how all Talbot services develop close links with local health services to meet residents' needs. A medical room has now been established in the Halls and a surgery is run there by the GP's on rotation every day. Given the high level of drug use amongst the current client group a local GP now runs a methadone substitution programme at the Kingston Halls. Having started with a client group of around 10 people this service is now provided to over 40 young homeless people.<sup>12</sup>

A4A.11 Overall, hostels and replacement services are smaller, more structured, professionalised and specialised. Moreover, there is movement towards continuous improvement in physical standards, alongside growth in the network of services and joint work focussed on addressing increased and changing need.

## GLASGOW CITY COUNCIL'S SERVICES

A4A.12 While the large hostels dominate the shape of local authority and other provision for single homeless people in the city, since the 1980's Glasgow City Council has diversified, modified and improved its homelessness services. A key development was the establishment of the Hamish Allan Centre (HAC) in 1990 as the central homelessness advice service in the city. The HAC provided a clearing house for homelessness services and it managed a significant stock of temporary accommodation, ranging from the large-scale hostels, smaller hostels, supported accommodation and furnished flats. Since the 1980's the Council's housing service has worked increasingly in partnership to:

- close and replace some outmoded hostels
- develop a city-wide youth housing strategy
- develop joint approaches and services with social work and health services and with the network of voluntary agencies and housing associations
- provide smaller-scale supported accommodation services to meet particular needs

A4A.13 Turning to City Housing's large-scale hostels, these have been incrementally upgraded since the 1980's. As early as 1989, the city's inter-agency strategy was two-pronged, on one hand seeking to increase the pace and effectiveness of resettlement and, on the other, to consider reprovisioning options. The 'Turning Points' Strategy (GCSH, 1989) emphasised that future hostel closures must be planned closures, that a range of alternatives would be required and that no hostel beds should be closed prior to the development of appropriate alternatives.

A4A.14 The social and physical characteristics of the four large-scale local authority hostels built by the then Glasgow Corporation, were reviewed in a research project conducted by a team of social architects commissioned by Glasgow City Housing in 1991/92. They found that each of the four establishments reflected a highly "predictive or institutional design model" involving:

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<sup>12</sup> Interview with Director, January 2000

- a high degree of classification of the users (e.g. a building for homeless people)
- multi-layered spaces linked by corridors
- overt distinctions between the different groups using the building (staff and residents – as reflected in staff dress codes or equipment)
- a tendency to deny or limit options for use
- a significant provision of private, individualised space
- communal spaces which are “profoundly unsatisfactory” for their purposes

A4A.15 The ‘Signposts’ project report defined an ‘institutional building’ as “any building in which the needs of the organisation take precedence over the needs of the users”. The authors point out that buildings may simply ‘feel’ like a hostel because of their large-scale, predictive design and institutional character (Wylie and Court, Signposts, 1992, p.59). The strategy emerging from Wylie and Court’s study was broadly to take account of residents’ housing preferences and support needs and then, having audited the full range of organisational, accommodation and support services, to develop a co-ordinated reprovisioning agenda. This would include new developments targeted to meet particular needs, a housing resettlement programme, and the re-structuring of one of the very large hostels to provide more suitable independent and shared accommodation for particular groups who wanted to remain there. The design model involved a mix of more independent and clustered living units - with the building overall being better integrated with its built environment to normalise the accommodation and to enable residents to access employment opportunities in the immediate environment.

### **The Glasgow Street Homelessness Review Strategy**

A4A.16 By the late 1990’s, the Scottish Executive’s Homelessness Task Force with its interest in ending the need for sleeping rough, acted on its concerns about persistent patterns in homelessness in Glasgow - including high levels of rough sleeping and indications that significant numbers of homeless people were rotating between the large-scale hostels and sleeping rough. The Glasgow Street Homelessness Review Team was formed in 2000, with a remit to explore these connections and other patterns in homelessness and to recommend a positive way forward. The Review Team involved senior-level multi-agency representation from the Scottish Executive and key local stakeholders. The Review findings led to a clear-cut commitment to a reprovisioning strategy to close and replace the city’s large-scale hostels in around five years time, with replacement services to include smaller-scale, community-based supported accommodation services, and supported and unsupported tenancies. Early in 2001 it was agreed that the hostel replacement strategy would be overseen by an inter-agency steering group (formerly the Review Team) comprising representation from senior officers from the Scottish Executive, City Housing, Social Work, Greater Glasgow Health Board and GCSH. A Joint Programme Manager has now been appointed to take the programme forward.

A4A.17 The Street Homelessness Review overall identified the need for:

- a strategy to prevent street homelessness
- better support services for those on the streets and using hostels to address health and care needs
- targeted and better resourced resettlement and support services to enable people to sustain move-on accommodation and prevent repeat homelessness

- a review of hostel systems to address the fact that about one third of people sleeping rough in Glasgow have been barred from hostels
- structured, inter-agency, co-ordination of a reprovisioning and resettlement programme

A4A.18 The funding allocated so far to the programme includes a mix of previously allocated resources and new monies<sup>13</sup>. Already allocated funds include:

- £2.7 million (EYF) to provide and refurbish detoxification facilities for vulnerable women at Jean Morris House and to develop the emergency access bed-sit accommodation at the Hamish Allan Centre extension
- £0.5 million (EYF) and a further £0.85 million from the Rough Sleepers Initiative to re-furbish 250 flats for people ready to move on from the hostels now.
- £4 million health funding allocated in 2000, to address the support needs of rough sleepers. Half of this was allocated to Greater Glasgow Health Board to fund a homeless addictions/health team for hostel residents and to meet capital costs of the Turning Points Link Up unit.
- £0.2 million of RSI funds have been allocated to cover 18 months of the project management post.
- A further £12.5 million has been allocated to support the “hostels decommissioning programme”. Additionally, the key statutory agencies plan to continue their current allocations to homelessness services and to increase these as feasible through mainline funding.

A4A.19 Finally, Glasgow City Council has recently revived its inter-agency Joint Planning Implementation Group on Homelessness as part of its planning system focused on community care. This means there is now the clear potential to integrate the hostel replacement strategy more positively with other aspects of homelessness planning in the city.

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<sup>13</sup> Information supplied by Scottish Executive – November 2000

## **APPENDIX 4 (B): REPROVISIONING AND SERVICE IMPROVEMENTS IN OTHER DISTRICTS**

A4B.1 The inventory indicates a very dynamic picture of hostel provision in Scotland, including that there has been continuous re-structuring of hostels in a number of local authority areas in Scotland. Additionally, it highlights the current plans by local authorities and voluntary agencies to improve the physical standards of hostels and related homelessness accommodation. It was notable that some hostels could not participate in this study as they were undergoing renovations and re-structuring.

- In Dundee, reprovisioning and restructuring are in process for three key services. Dundee Survival Group moved in to purpose-built accommodation in May 2000 and a full refurbishment of a Salvation Army Hostel is pending. The Dundee Stopover, managed by NCH-Action for Children, is currently being redeveloped by Hillcrest Housing Association as a new-build hostel. This will increase the number of places and provide bed-sits as well as hostel bedrooms. The service will offer comprehensive packages of care and support to vulnerable young people
- In Perth and Kinross a number of changes are planned. In a local authority hostel (Greyfriars House) a further satellite unit is to be developed for families with children. This will offer better facilities, including self-contained flats. In Wellbank House (local authority managed) a development is ongoing to improve partnerships with other agencies, such as a local college, volunteers and health workers. A health development worker has been employed. The CATH (Churches Action on the Homeless) hostel aims to extend the service to increase direct access beds from 7 to 12. The Salvation Army plans to develop a service to meet the needs of people with dependency problems.
- Aberdeen Council is considering extending its hostel provision by purchasing a building that neighbours an existing hostel and the council believes that the increased capacity would assist in meeting obligations arising from the new Housing Bill. The intention is to close Victoria House, currently managed by the Social Work Department. This has been on the agenda for some years and Social Work plans to advertise for an agency/contractor to provide a 24-bedded unit within the existing building (currently 32 beds). The client group would remain much the same and it is likely that the accommodation should be funded through Housing Benefit. Initial discussions are in process about the potential development of a drugs rehabilitation/detoxification service. Phoenix House is opening provision in Aberdeen in the near future and the Regent Trust is considering developing a detoxification service to meet identified needs.
- In North Ayrshire, the council is considering a range of provision for homeless people in the area. The council is increasing its pool of temporary furnished flats and the support provided to those living in them. It aims to provide smaller, more specialist provision as part of a strategy to replace bed and breakfast and to meet increased demand. Three new-build projects are planned: a 5-bedded unit for single women with a caretaker that should open in a year's time; a 6/8-bedded accommodation unit for single men, due to open in 2 years, and accommodation with related employment and training service elements. The function of the Ardrossan Hostel is under review and changes may include increasing the hostel staff complement and linking the role of the hostel to the homelessness standby service. The Council plans to appoint a dedicated homelessness manager to oversee and co-ordinate the service, including to manage throughput from the hostels.

- In Edinburgh, the 1990's has seen the contraction of large-scale hostels and their restructuring and improvement, alongside new developments in the network of services. These include a Single Access Point - a new multi-agency advice service, additional resettlement and support services such as the new ECSH Day and Night Centre, an expanded range of small specialist hostels and supported accommodation for homeless people with particular needs, and the Bridges 'One Door Initiative' - youth homelessness advice and clearing house service. Specialist accommodation and support services include accommodation for homeless people with disabilities, short-stay flats for young people (ECSH/Stopover), a growing and wide-ranging network of youth homelessness services, accommodation and support for people with a drug problem (Turning Points) and a Challenging Behaviour Unit (Bethany).
- East Ayrshire Council, following a recent service review, plans to extend St Andrews Court hostel to include a play area for children. It also plans a programme of training and staff development and to increase joint work to meet the needs of service users.
- North Lanarkshire Council has undergone a review of its homelessness services and the restructuring of several services is on the agenda. YMCA/YWCA is assessing the role it may play in the Council's Youth Housing Strategy and plans to develop the foyer model to increase access to training and employment for homeless young people.
- One local authority managed hostel in the Highlands is having the occupancy reduced to incorporate a warden's flat.
- Shetland Island Council's Hostel plans to develop an outreach service this year.
- Moray Council recently gained Challenge Funding to identify the extent of rough sleeping and to increase assistance for this group. Key service gaps identified include a direct access resettlement facility providing supported accommodation, a resettlement service and longer-stay supported accommodation for people with alcohol and/or drug abuse problems and/or mental health problems in Elgin.
- In East Renfrewshire, a voluntary sector hostel is closing and the replacement service will be classed as supported accommodation, with residents having their own flats.
- In Inverclyde, the Jericho Society is developing a larger unit (18-20 beds) to be completed in 2003. The Salvation Army is re-structuring a hostel to provide approximately 44 places. This will include 5 single rooms in an assessment and detoxification unit, 22 single rooms for alcohol recovery, a bed-sit cluster for 12 people in a dry resettlement unit, and a further bed-sit cluster for 5 people, in a dry minimal support unit.
- It is worth noting that across Scotland a number of voluntary sector and housing association providers are seeking to improve physical standards and to re-structure provision in light of changing demand and support requirements. For example, Women's Aid (Scottish Borders), alongside services in Fife and in Glasgow are interested in improving disabled access. Many voluntary sector providers are also assessing the feasibility of re-structuring and/or expanding some services to meet the needs of more

vulnerable service users. Others like the Talbot Centre in Glasgow plans to convert its remaining dormitory accommodation in the Kingston Halls to single rooms.

- Some voluntary agencies are considering the de-registration of services after discussion with Social Work - for example, Bethany House in Edinburgh, which is currently re-structuring its accommodation.
- Some providers are considering re-targeting the client group. In Edinburgh one agency has found a low demand for its hostel places for women and is considering reducing these, while another agency in the same district reported that it may increase the number of places for women. The Scottish Refugee Council is considering re-focusing its small-scale hostel provision for asylum seekers to meet the needs of vulnerable refugees with positive decisions, funded through Interim Housing Benefit, as since April 2000, accommodation for asylum seekers has increasingly been managed through the City Council and funded through NASS. Blue Triangle Housing Association in South Lanarkshire is considering extending the age range in its hostel.
- Highland Council is concerned about a huge shortfall in affordable housing and faced by high levels of homelessness. The council is reviewing the need for emergency accommodation for people currently sleeping rough at the same time as reviewing its advice services and hostel provision. One hostel is currently being reprovisioned through the development of 25 flats for single homeless people. The Council's priority is to develop long-term housing solutions in partnership with housing associations and it plans to develop a common housing register. It is also concerned with responding to particular needs and so is assessing the need for a 'wet hostel' or night-shelter in Inverness. Haven Housing Association is assessing the feasibility of developing foyer-type services for all its projects in the Highlands.

A4B.2 The interviews highlighted agencies' concerns about the capital and revenue funding implications of reprovisioning and related homelessness service improvement plans in their districts.