

# Bristol City Council Equality Impact Assessment Form



Name of proposal	<b>2 Preventing Homelessness Accommodation Pathways – families and adults (22+)</b>
Directorate and Service Area	People
Name of Lead Officer	Tom Rhodes

## Step 1: What is the proposal?

### Summary of proposal

The commissioning plan sets out proposals to help people recover from homelessness, and ensure that homelessness is not repeated, by providing sustainable accommodation with support to families and adults (22+). The plan will make savings of £632,200, required by the council's Corporate Strategy.

We want preventing homelessness accommodation based services to achieve the following:

- Help households to access and/or provide households with the right type of accommodation (based on their needs) once they have become homeless.
  - Reduce the number of people sleeping rough.
  - Reduce the need for spot purchased emergency accommodation.
- Help people to gain the skills to prevent them becoming homeless again.
  - Improve numbers moving on to independent living or positively within the pathway.
  - Build resilience and help people access training/employment.
  - Reduce repeat incidences of homelessness, including amongst people with complex needs and people for whom the existing pathways have not worked.

In order to achieve these objectives, we need to:

- Align supply and demand so that the right type of accommodation is available at the right time to people in need.
- Make the most efficient use of accommodation by:
  - Reducing void times;
  - Helping people move on as quickly as possible;
  - Reducing the number of refused referrals (by both providers and service users).

- Maximise opportunities for more holistic commissioning and benefit from other initiatives (e.g. Substance Misuse Team commissioning / Golden Key<sup>1</sup> / Preventing Homelessness Strategy action plan delivery).
- Make sure that services are flexible enough to deal with changing demands.
- Maintain a healthy provider market, building on the partnership working achieved through the Homelessness Agencies Meeting (HAM), Golden Key, Rough Sleeper Partnership etc.

The plan sets out the following recommendations to achieve these objectives:

1. We will create up to 100 additional units of supported family accommodation
2. Services for single people and couples will operate in distinct pathways
3. With the Substance Misuse Team, jointly commission a substance misuse accommodation pathway with an increase in preparation stage units but without abstinent accommodation, or the substance misuse specific floating support service
4. The current external floating support service would become resettlement linked to the pathways
5. Change the indicators to make them less resource intensive to provide (and monitor) and more flexible
6. Standardise the support cost per unit
7. Commission a jointly funded peer support service with the Substance Misuse Team (SMT)

## **Step 2: What information do we have?**

### **2.1 What data or evidence is there which tells us who is, or could be affected?**

#### **General Population**

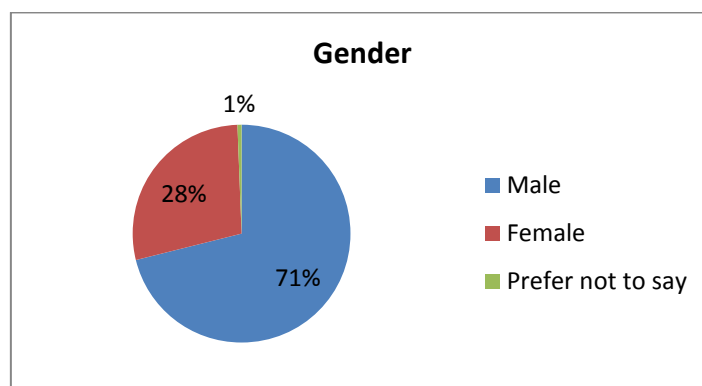
The population of Bristol is growing rapidly, increasing from 391,000 to 437,000 between 2003 and 2013 - a rise of 11.8%. The current population is estimated at 437,500 and Bristol is the seventh largest English city outside London.

#### **Gender in single services**

Males in single homelessness services are significantly over represented; the gender profile in 2015/16 was 71.1% Male to 28.3% female.

---

<sup>1</sup> <http://www.goldenkeybristol.org.uk/>



Across homelessness services in Bristol 20% of accommodation is male only and 18% is female only. The majority of accommodation is mixed (66%); however the majority of this accommodation is occupied by males.

Recommendation 2 in the commissioning plan retains the same number of women only units in the women only pathway (128 units, excluding family accommodation), and increases the number of men only units by the creation of a men only pathway. This will lead to a higher proportion of women in mixed services, which will prevent individual women being isolated in otherwise male services – this change is being made following consultation.

Refusal rates are slightly higher than expected for males (72.8% refusal rate compared to 70.8% total males in service). The staff group, however, is over represented by females. The new services will need to ensure that certain men, e.g. those who may present a risk to women can still be accommodated by the staff teams. Recommendation 2 in the commissioning plan proposes more control over who goes where. A more collaborative approach between providers should bring down/eliminate refusals as referrals will be both trusted and appropriate.

### Outcomes: Length of stay and planned departures

There are differences in the average number of days that males and females spent in services. Males stayed in services for 34% longer than females, except for in Level 2 services where females stayed for slightly longer than males.

	Female	Male
Level 1	116 days	177 days
Level 2	209 days	200 days
Level 3	358 days	599 days
Level 4	248 days	274 days

Average Number of Days Spent before Departure in Services by gender in Level 1-4 Services Bristol HSR data Q3 2014-15 - Q3 2015-16

Possible reasons for the gender difference in length of stay:

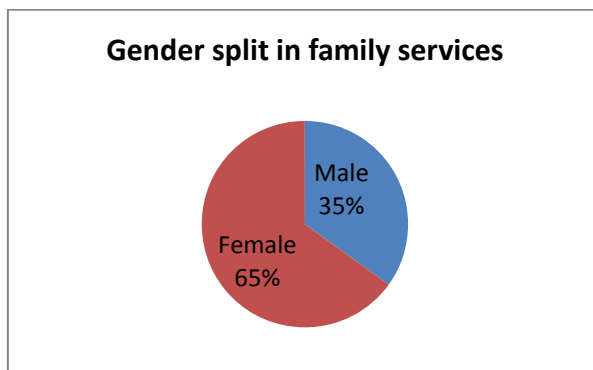
- The more readily available supply of women only accommodation (compared to demand) may speed up moves on within the pathway
- Refusal rates are much higher for men, which slows down the move on. The main reasons for refusal include aggressive behaviour and substance misuse.

	Self-contained			Shared			Total		
	Planned departures	Unplanned departure	%	Planned departures	Unplanned departure	%	Planned departures	Unplanned departure	%
Men in mixed	116	19	85.93%	108	41	72.48%	224	60	78.87%
Men in men only	2	0	100.00%	191	85	69.20%	193	85	69.42%
Total Men	118	19	86.13%	299	126	70.35%	417	145	74.20%
Women in mixed	50	7	87.72%	22	12	64.71%	72	19	79.12%
Women only	14	1	93.33%	129	79	62.02%	143	80	64.13%
Total Women	64	8	88.89%	151	91	62.40%	215	99	68.47%
Total	182	27	87.08%	450	217	67.47%	632	244	72.14%

Planned departure rates for both men and women are heavily influenced by the type of accommodation that clients are placed in. The majority of mixed accommodation is self-contained whereas much of male and female only accommodation is shared. Those in mixed gender self-contained accommodation had an 88.8% planned departure rate, whilst those in mixed shared had just a 68.7% planned departure rate. Similarly in women only services, those in self-contained accommodation had a 91% planned departure rate (though the numbers here are small – 1 planned, 11 unplanned), whereas those in shared had a 63.7% planned departure rate. This trend is replicated for male planned departures also, adding weight to the fact that it is accommodation type that improves planned departure rates rather than the gender mix or service level.

Recommendations 2 and 3 will lead to consideration of the best accommodation for the best purpose. We will maximise the number of self contained units in the pathway from the available resources.

## Gender in family services



Unlike in single services, in family services females are over represented making up 65% of the client group. This is due to the fact that there are lots of single female head of household families in supported accommodation.

## Ethnicity

Overall the Black and Minority Ethnic (BME) population in Bristol has increased since 2001 from 8.2% to 16% of the total population (22% BME including non-British White). The largest growth since 2001 has been in White Other (includes Eastern Europeans) (+11,826), Black African (+9,775), Black Other (+5,986) and mixed ethnic groups (+7,504)<sup>2</sup>.

Changes to population characteristics have been concentrated in the inner city and inner east areas of the city, in particular the wards of Lawrence Hill, Ashley, Easton and Eastville. After White British, the largest populations by ethnic group are Non-White British, African (of whom a large proportion are of Somali heritage), Black Other, Pakistani, Caribbean and Indian.

The table below shows the ethnicity of people in Bristol broken down by age.

Ethnicity	Age						
	Age 0-19	Age 20-29	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70+
<b>Total White %</b>	<b>73.68%</b>	<b>82.95%</b>	<b>82.53%</b>	<b>85.77%</b>	<b>90.70%</b>	<b>94.98%</b>	<b>94.84%</b>
English/Welsh/Scottish/Northern Irish/British %	69.69%	73.88%	72.20%	80.43%	86.46%	91.34%	91.41%
Irish %	0.28%	0.75%	0.93%	1.04%	1.11%	1.60%	1.67%
GRT %	0.14%	0.11%	0.08%	0.06%	0.04%	0.05%	0.01%
Other White %	3.57%	8.22%	9.32%	4.24%	3.09%	1.99%	1.74%
<b>Total BME %</b>	<b>26.32%</b>	<b>17.05%</b>	<b>17.47%</b>	<b>14.23%</b>	<b>9.30%</b>	<b>5.02%</b>	<b>5.16%</b>
White and Black Caribbean %	4.09%	1.84%	1.12%	0.87%	0.54%	0.34%	0.25%
White and Black African %	0.76%	0.34%	0.33%	0.25%	0.17%	0.07%	0.04%
White and Asian %	1.55%	1.09%	0.65%	0.49%	0.24%	0.16%	0.12%
Other Mixed %	1.40%	0.85%	0.72%	0.45%	0.27%	0.19%	0.14%
Indian %	1.77%	1.92%	2.24%	1.48%	1.07%	0.49%	0.40%
Pakistani %	2.71%	1.64%	1.84%	1.23%	0.94%	0.60%	0.47%
Bangladeshi %	0.85%	0.50%	0.63%	0.38%	0.26%	0.12%	0.07%
Chinese %	0.80%	2.08%	0.78%	0.58%	0.53%	0.30%	0.30%
Other Asian %	1.15%	1.15%	1.54%	1.02%	0.73%	0.37%	0.14%
Black African %	5.46%	2.47%	3.47%	2.40%	1.08%	0.57%	0.31%
Black Caribbean %	1.34%	1.07%	1.25%	2.43%	2.10%	1.23%	2.29%
Other Black %	3.29%	1.07%	1.49%	1.94%	0.77%	0.31%	0.44%
Arab %	0.35%	0.44%	0.49%	0.21%	0.13%	0.07%	0.04%
Any Other Ethnic Group %	0.80%	0.60%	0.93%	0.49%	0.47%	0.21%	0.14%

<sup>2</sup> [Key statistics about Bristol from the 2011 Census](#)

## Gypsy Roma Travellers

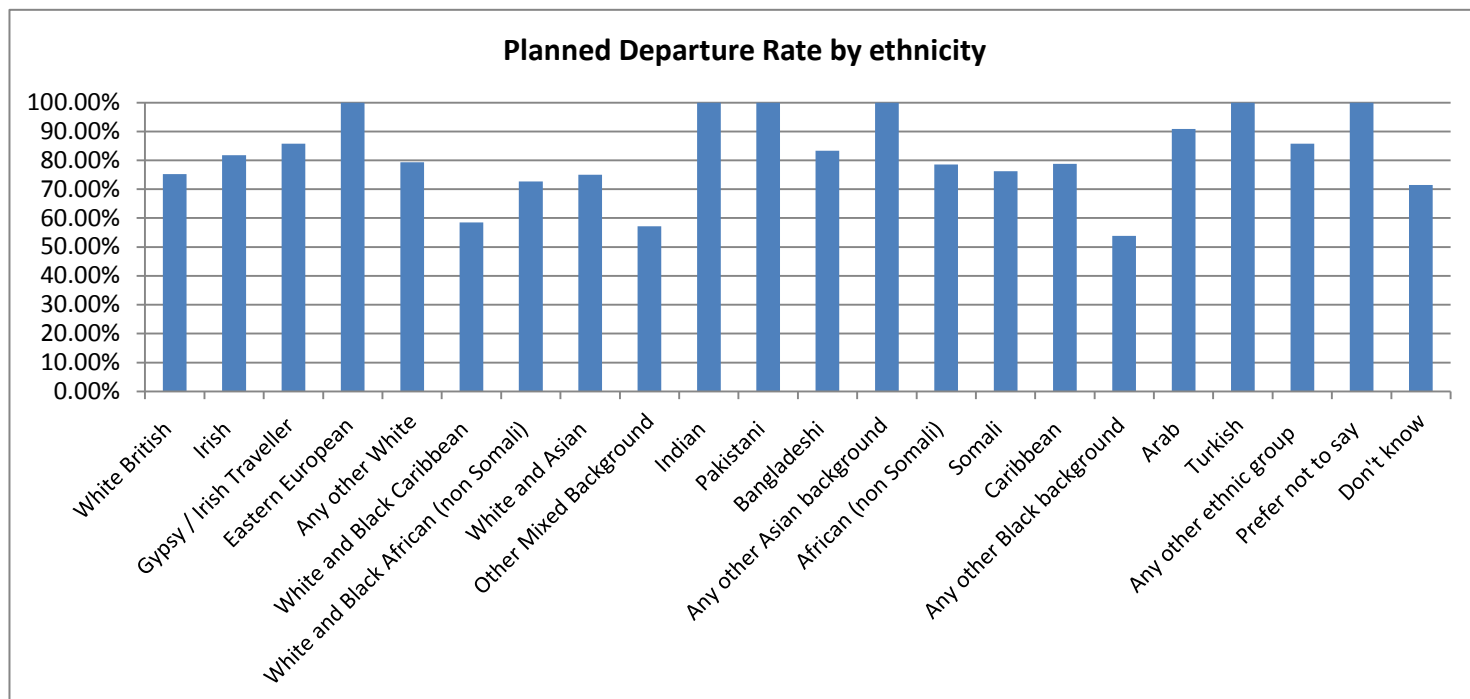
359 people in 117 families in Bristol stated their ethnic group as 'Gypsy or Irish traveller', when it was included as a category for the first time in 2011. Gypsy or Irish travellers account for 0.1% of the total population of Bristol, which is similar to national figures. Because the GRT population is fluctuating and likely to be underreported, there are estimated to be between 400-500 ethnic gypsies and travellers in Bristol at any one time. The low proportion of GRT in homelessness prevention services (0.69% in single services, 0 in family) reflects low numbers overall in Bristol.

## BME service users in single homelessness prevention services

BME service users are over-represented in single adult homelessness prevention services in Bristol compared to the BME population overall for Bristol (26.6% compared to 16%).

<b>Ethnicity Single Adult Services</b>	<b>Bristol Demographic</b>	<b>Number</b>	<b>%</b>
Total BME	16%	250	21.70%
Total White	84%	883	76.65%
English/Welsh/Scottish/Northern Irish/British	77.9%	820	71.18%
Irish	0.9%	17	1.48%
Gypsy / Irish Traveller	0.1%	8	0.69%
Any other White (incl. Eastern European)	5.1%	38	3.3%
White and Black Caribbean	Not available	34	2.95%
White and Black African (non Somali)	Not available	16	1.39%
White and Asian	Not available	6	0.52%
Other Mixed Background	Not available	15	1.30%
Indian	1.5%	2	0.17%
Pakistani	1.6%	9	0.78%
Bangladeshi	0.5%	8	0.69%
Chinese	0.9%	1	0.09%
Any other Asian background	1%	5	0.43%
African (non Somali)	2.8% (including Somali)	29	2.52%
Somali	Not available	8	0.69%
Caribbean	1.6%	37	3.21%
Any other Black background	1.6%	28	2.43%
Arab	0.3%	17	1.48%
Turkish	Not available	1	0.09%
Any other ethnic group	0.6%	34	2.95%
Prefer not to say	Not available	14	1.22%
Don't know	Not available	5	0.43%

The groups most over represented are 'Any other ethnic group', 'Arab' and 'Black Caribbean'. Adult homelessness prevention services have reported a high level of refusals into level 1-4 accommodation for BME people (21% refusal compared to 16% overall BME in Bristol). This is particularly high for 'Any other Black Background' 7.7%, Caribbean and White and Caribbean (3.3% for both). BME groups are well represented in the staff teams (27.5%), with the majority of them Caribbean.



The BME group with the highest proportion of unplanned departures is again 'Any Other black background' (46%), followed by 'Other Mixed Background' (42%) and 'White and Black Caribbean' (41%). These three groups have significantly higher unplanned departures than any other. Work should be done to improve outcomes of clients who Other Black Background.

### **BME service users in family homelessness prevention services**

The over representation of BME service users is overwhelmingly evident in commissioned family accommodation with 46.08% of clients who are BME. The largest BME group in family services is Black African (non-Somali) 13.73%. 10.78% of clients were Pakistani; this is in vast contrast to the 1.6% Bristol demographic, and just 0.8% Pakistani residents in single homelessness services.

Ethnicity	Bristol Demographic	% Clients
Total BME	16%	46.08%
Total White	84%	38.24%
English/Welsh/Scottish/Northern Irish/British	77.9%	29.41%
Irish	0.9%	0.00%
Gypsy (including English, Scottish and Roma Gypsy) or Irish Traveller	0.1%	0.00%
Any other White background (including Eastern European)	5.1%	8.82%

White and Black Caribbean	Not available	1.96%
White and Black African (non-Somali)	Not available	0.00%
White and Asian	Not available	0.00%
Any other Mixed/multiple ethnic background	Not available	0.00%
Indian	1.5%	2.94%
Pakistani	1.6%	10.78%
Bangladeshi	0.5%	1.96%
Chinese	0.9%	0.00%
Any other Asian background	1%	0.98%
African (non Somali)	2.8% (including Somali)	13.73%
Somali	Not available	4.90%
Caribbean	1.6%	0.98%
Any other Black / African / Caribbean background	1.6%	1.96%
Arab	0.3%	0.00%
Iranian	Not available	0.00%
Iraqi	0.6%	0.00%
Kurdish	Not available	0.98%
Turkish	Not available	0.00%
Any other ethnic group	Not available	4.90%
Prefer not to say		1.96%
Not known		13.73%

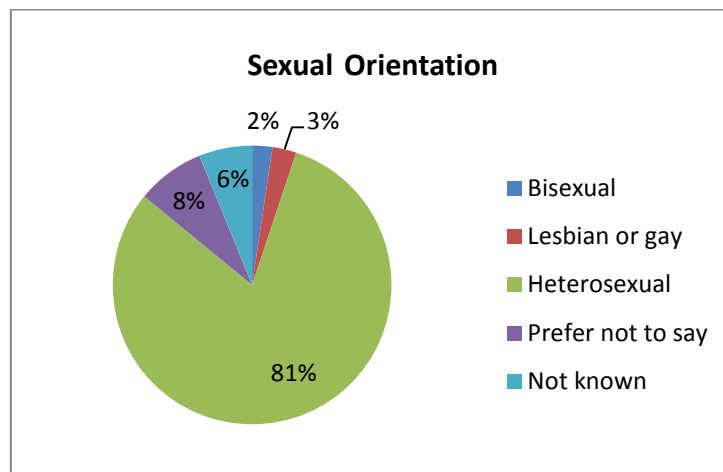
## Sexual Orientation

There has been a positive increase in the percentage of people in homelessness prevention services who are recorded as LGB in the past few years. As well as a greater proportion of LGB people accessing services, this change is likely to do with improvements in data recording or an increase in the level of engagement that LGB people have with homelessness prevention services, makes it easier for them to disclose their sexual orientation.

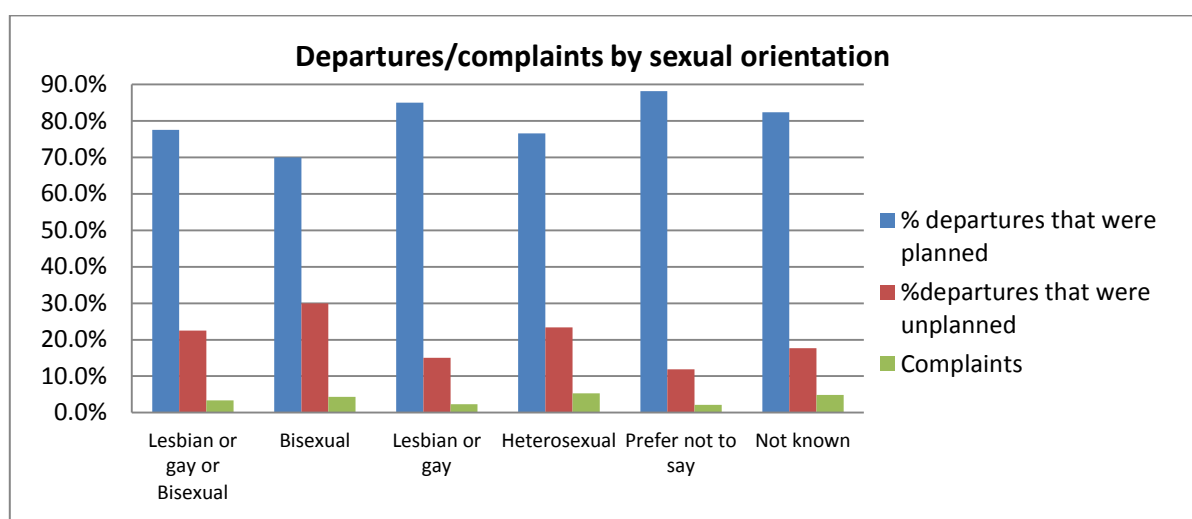
However there may still be significant under reporting of LGB people in supported accommodation services. The data is collected at the point of referral, and 'not known' and 'prefer not to say' may represent clients who were not asked about their sexual orientation, rather than those who do not know what their orientation is.

## Sexual Orientation in single services



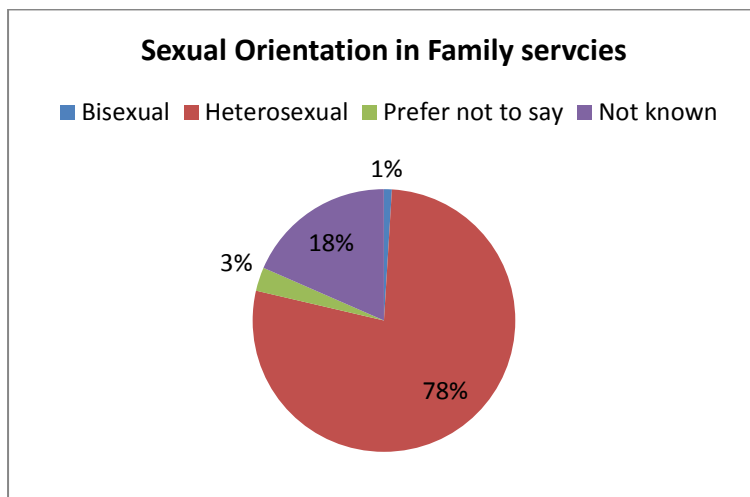


5.7% of service users identify as LGB, roughly in line with the Bristol demographic of 6%. However there may still be significant under reporting of LGB people in supported accommodation services. Across all services 14% of residents either preferred not to disclose their sexual orientation or it is unknown – this group could be concealing a number of LGB clients and providers should work to encourage people to be open and disclose their sexual orientation and make sure that the services are as inclusive as possible. 6% of staff amongst services are LGB and services should encourage these staff members to be LGB champions and promote equalities in services.



Service users who are lesbian or gay have better outcomes in terms of planned departures than heterosexual young people; however bisexual clients have the worst outcomes. Where the main reason for homelessness presentation is connected to sexual orientation (e.g. family homophobia leading to relationship breakdown) it may be that some LGB young are able to move on to independent living more easily because they have fewer other unmet needs. Another possible reason may result from the under-recording of LGB, where those who are confident to disclose may also have higher levels of confidence and/or engagement with services.

### Sexual Orientation in family services



Whilst there are no lesbian or gay residents in family services there are a high proportion of clients in family services whose sexual orientation is not known. Some of the progress that has been made in single services should be shared with family services to avoid any assumptions about sexual orientation or wider heterosexism.

## Gender reassignment

Several services are not collecting data on trans status and there should be a push for this to be done going forward. In single services only 7 (0.5%) clients within the timeframe identified as trans. In the UK, the Gender Identity Research & Education Society (GIREs) estimates that about 1% of the British population are gender nonconforming – based on this transgender clients are underrepresented within the services. There is a high rate of homelessness amongst the trans community (Scottish Transgender Alliance, Inside Housing) and so we would expect to see more trans residents within services.

Professionals may be unaware that they are working with people considering gender reassignment or those who identify as a different gender from their birth. Although over half of trans respondents (58%) in a recent survey knew they were Trans by age 13, approximately half had not told their family and 28% had not told anybody<sup>3</sup>.

Of the 7 clients who identified as trans, 3 clients have moved on, all of whom had left the services in a planned way. 1 known trans client was refused from services within the timeframe.

In family services there were no trans clients; however this information is unknown for 23% of clients and services should ensure full equalities monitoring is undertaken.

## Age

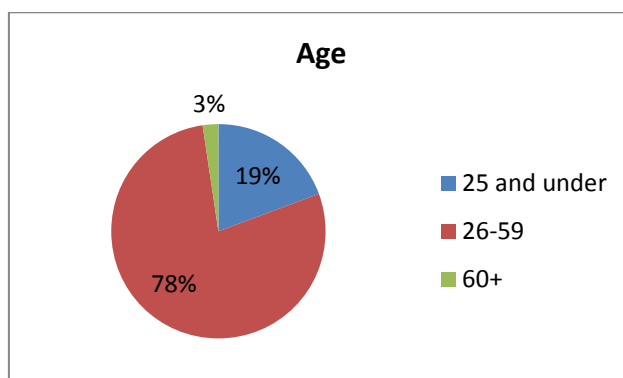
Bristol has a relatively young age profile; the median age of people living in Bristol in 2014 was 33.4 years old, compared to 39.9 years in England and Wales. The working age (16-64 yr. old) population is 300,900 (68%), which is a higher % than nationally (63%), especially

---

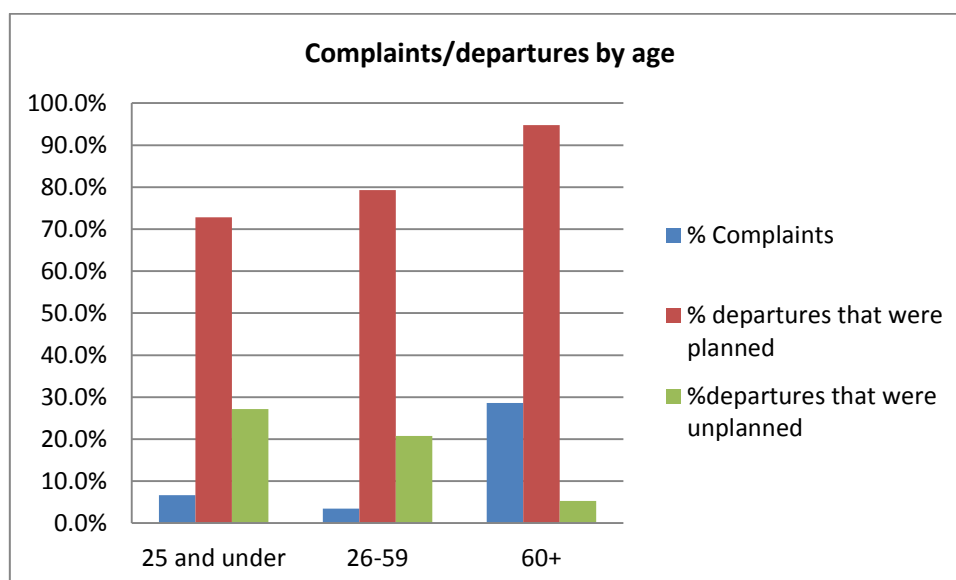
<sup>3</sup> Summary of First Findings: The experiences of LGBTQ young people in England. Youth Chances 2014

young adults up to 40 years. The older people population (65 & over) is 58,800 (13.3%), lower than nationally (17.7%); in fact, Bristol has a lower proportion of older adults from 45 years upwards than nationally.

## Age in single homelessness services



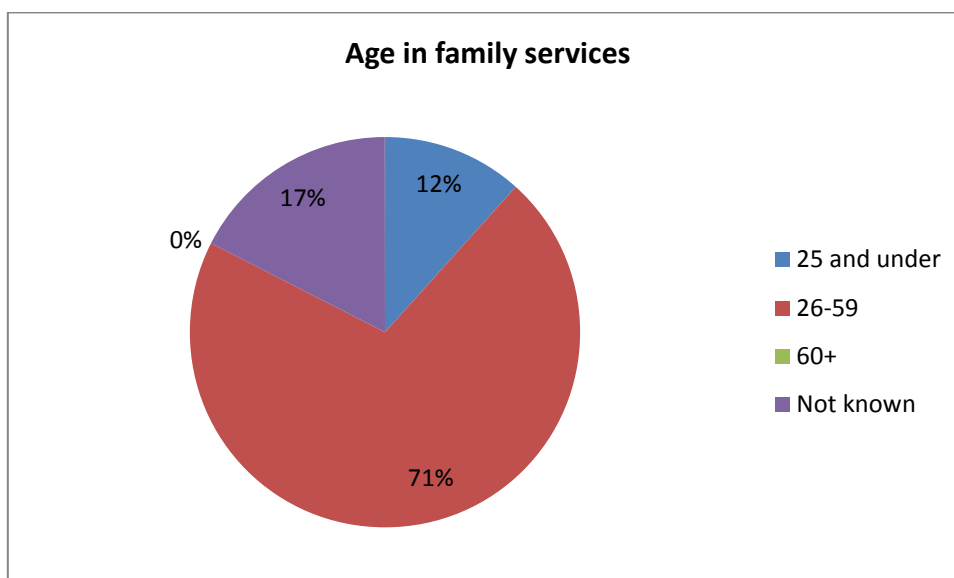
Both the Under 25 and 26-59 age groups are over represented in services (this graph excludes those in young people's services) compared to the Bristol demographic.



Young people are underrepresented in staff teams, and have the highest proportion of unplanned departures of any age group. Older residents made considerably more complaints – 28.6% of all residents aged over 60 within the timeframe made a complaint, however this group has very low unplanned departure rates indicating that services take complaints seriously.

The proposed aged range for adult homelessness services is 22+ the rational around this age is to meet the needs of adults whilst safeguarding vulnerable young people through a separate 16-21 year old young people's pathway (plus 22-24 year olds who are particularly vulnerable and care leavers).

## Age in family services



## Disability

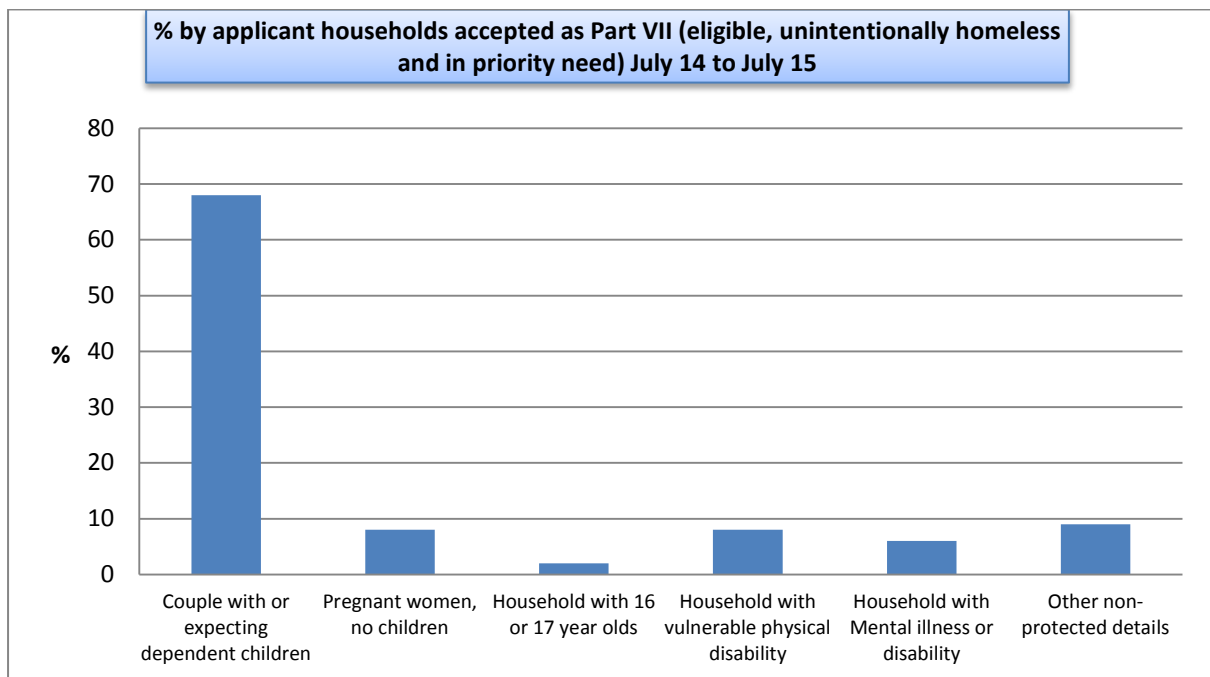
According to the 2011 Census, there were 71,700 people in Bristol with a “limiting long-term illness or disability”. As a proportion this is 16.7% which is slightly lower than the 17.9% national average. Although the proportion of people in Bristol with a disability is decreasing, the actual number of disabled people is increasing because of the growing overall population.

More deprived areas of Bristol have a higher proportion of residents living with a disability or long-term illness e.g. Filwood has 20.9% compared to Clifton East which has just 5.3%.

According to overall population estimates, there were around 8,480 adults in Bristol with some level of Learning Difficulty (or Learning Disability) in 2015<sup>4</sup>.

---

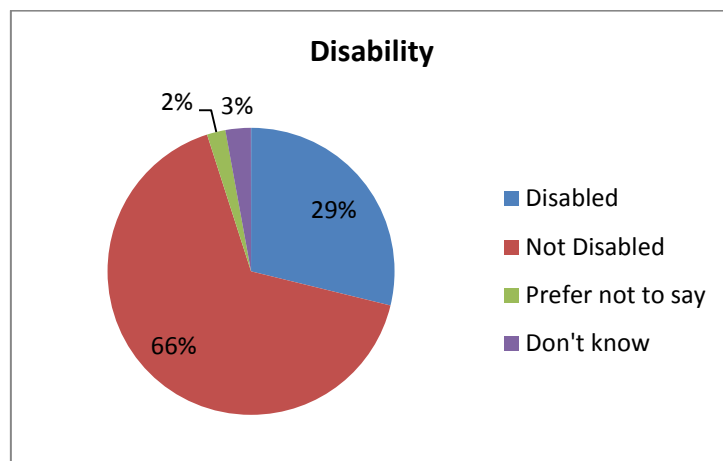
<sup>4</sup> Bristol JSNA 2015



The table above shows applicant household Part VII (eligible, unintentionally homeless and in priority need) acceptances offers some detail on disability<sup>5</sup>. However this could not be compared accurately with census data (disability/pregnancy and maternity).

### Disability in single services

The chart below shows the percentage of disabled clients in single homelessness services for the year 2015-16; clients with disabilities are over represented in services at 12.3% more than the Bristol demographic.



Physical impairment and mental/emotional distress are the most predominant disabilities within services:

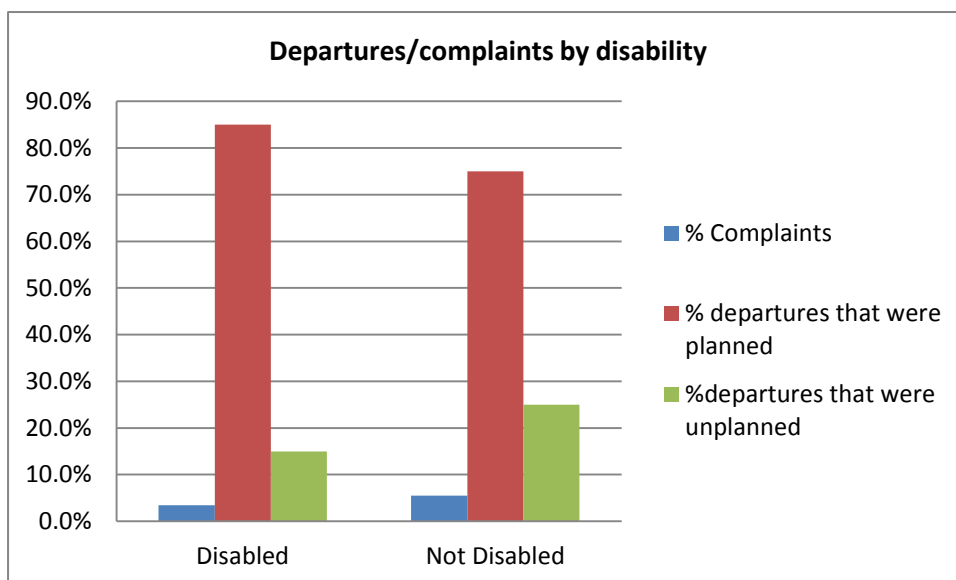
Physical impairment	49.7%
---------------------	-------

<sup>5</sup> Bristol BCC – Report on P1E return data July 14 – July 15

Mental/emotional distress	35.2%
Visual impairment	2.1%
Hearing impairment	0.9%
Learning difficulties	6.3%
Specific learning difficulties like dyslexia	1.5%
A health condition	4.2%

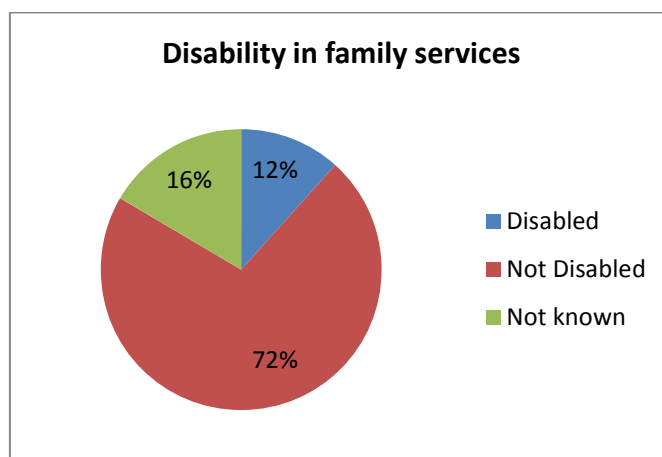
Services across different levels in each pathway have level access accessible rooms in order to meet this demand. In order to deal with high rates of mental and emotional distress in services, the pathways will be commissioned to have expertise in this area, and will operate as Psychologically Informed Environments (PIEs), including training for all staff.

The rate of refusal for disabled people is also higher than would be expected at 31.8%, this is likely in part due to lack of accessible accommodation, given that 10% of the client group have physical disabilities, services should ensure they have sufficient disabled accommodation.



Disabled residents have a better planned move on rate (85%) than non-disabled residents (75%) though both groups met the move on target. Services should ensure that all residents are given sufficient support and consider if disabled residents are given more support than non-disabled.

## Disability in family services



In family services the percent of disabled clients is considerably lower than both the Bristol demographic and single services at just 12%. Of those clients with disabilities, again physical impairment and mental/emotional distress are the most predominant types of disability:

Physical impairment	3.88%
Mental and emotional distress	6.80%
A health condition e.g. HIV, multiple sclerosis, cancer	0.97%

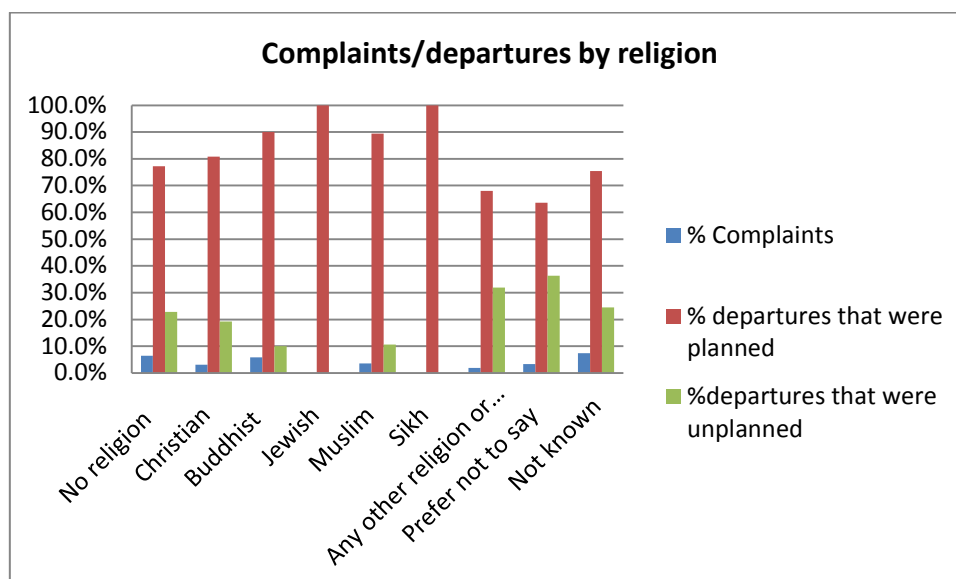
## Religion

In Bristol the majority of the population are Christian, followed by No religion and then Muslim.

Religion	Bristol Figures	Bristol %
Christian	200,254	46.8
Buddhist	2,549	0.6
Hindu	2,712	0.6
Jewish	777	0.2
Muslim	22,016	5.1
Sikh	2,133	0.5
Other religions	2,793	0.7
No religion	160,218	37.4
Religion not stated	34,782	8.1

## Religion in Single services

Clients who preferred not to disclose their religion had the highest percentage of unplanned departures, indicating that those who are not open with their religious beliefs find it harder in services; work should be done to find out if this is because they are not accessing religious support that they need. The group 'any other religion' also has a poor departure rate and work should be done to identify which religions specifically these people belong to and how better to engage them.



## Religion in family services

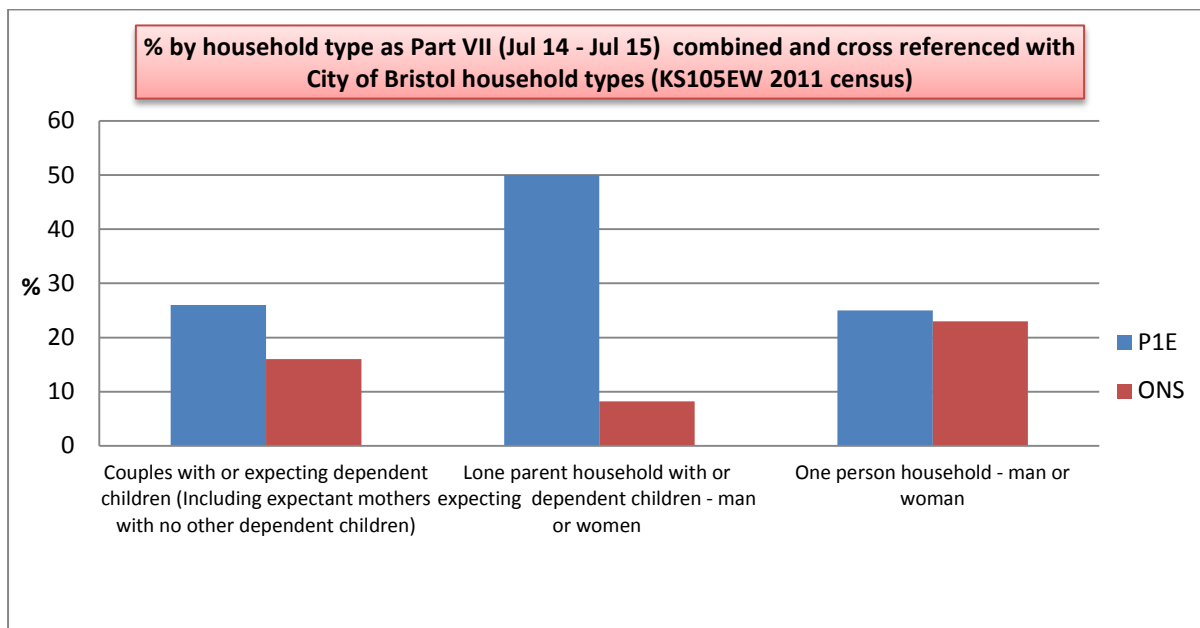
In family services the majority of clients are Muslim; this group are significantly over represented compared to the Bristol demographic of just 5%.

Religion	Bristol Demographic	% in Family services
No religion	37.4%	21.36%
Christian	46.8%	13.59%
Buddhist	0.6%	0.97%
Muslim	5.1%	31.07%
Sikh	0.5%	1.94%
Prefer not to say		7.77%
Not known		23.30%

## Being pregnant or having a child

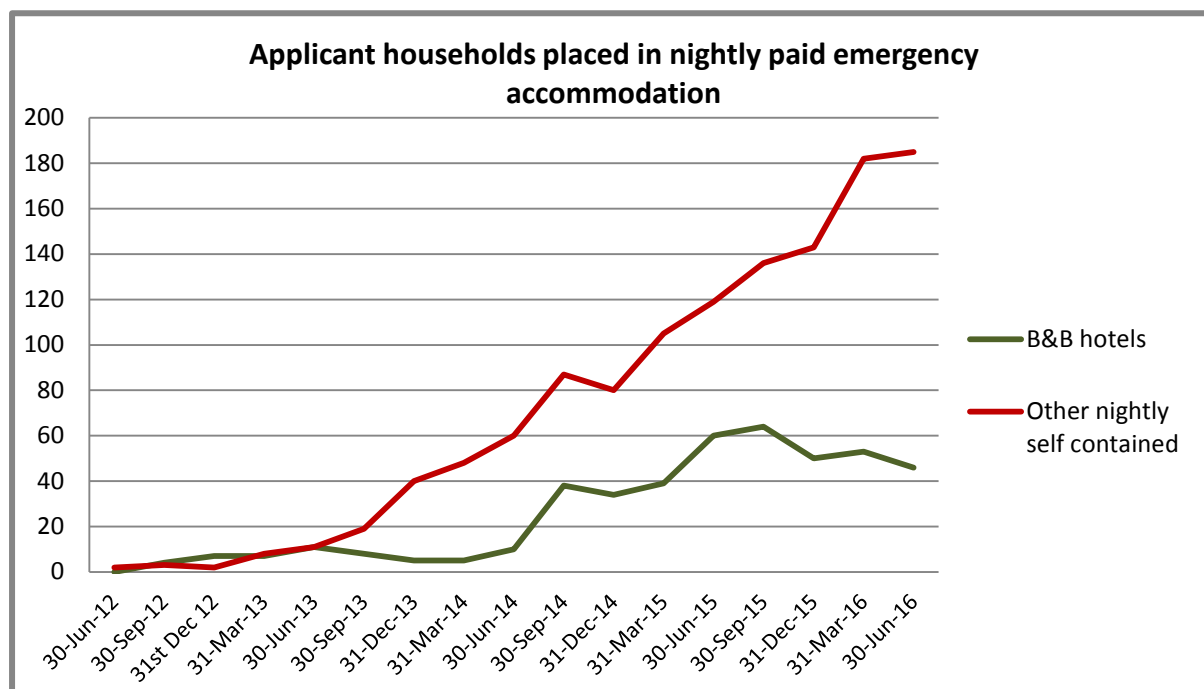
The chart below shows that couples and lone parents with or expecting dependent children were over-represented in Part VII (eligible, unintentionally homeless and in priority need) acceptances during the period July 2014- July 2015. For example 50% of presentations at all ages were by lone parent households.





P1E return for period Part VII acceptances by household type compared to ONS (Office for National Statistics) Jul 14- Jul 2015

There is not accurate information on the number of pregnant / clients with children in single services, however there is a clear need to increase the amount of family accommodation, as evidenced by the number of households in spot purchased accommodation. There has not been a single week since the beginning of 2015 where the number of families in emergency accommodation has fallen below 100.



## Marriage or civil partnership

There is no information available, however many people entering homelessness services do so due to a relationship breakdown.

## 2.2 Who is missing? Are there any gaps in the data?

- Local Data is based on the last census (2011) and is therefore out of date.
- We do not have accurate local data about sexual orientation, religion or being transgender.
- Some characteristics are likely to be under-reported e.g. Ethnicity (Gypsy and Irish Traveller), Transgender and Sexual Orientation.
- The number of people with a learning difficulty is likely to be under-reported, partly because it may be undiagnosed.

## 2.3 How have we involved, or will we involve, communities and groups that could be affected?

In developing the commissioning plan we have:

- Reviewed current services and processes to identify issues and improvements required.
- Listened to people using services, to understand their experience and needs and find out what they want from services.
- Talked to practitioners in other agencies and provider organisations to get their views about services and processes and what improvements they would like to see.
- Collaborated with colleagues across the council to make sure we maximise opportunities to improve how we work and enable effective joint internal working.

During the consultation on the plan we:

- Held an equalities workshop for professionals and stakeholders with an interest in understanding homelessness and the impact on a range of protected characteristics. At this event we asked participants to identify additional issues which might affect homeless people as a result of these proposals, as well as possible actions and mitigations for these issues.
- Worked with Bristol's expert citizen's homelessness group to run a series of events for current and former users of homelessness services, including women.
- Conducted an online survey to ask stakeholders what they thought about our proposals.

## Step 3: Who might the proposal impact?

### General Issues

	Issues	Benefit/Action/Mitigation
	Lack of staff cultural awareness and diversity may lead to indirect discrimination against protected groups.	As part of ongoing quality assurance and monitoring we will be reviewing staff training in equalities and diversity.  All providers must have appropriate equalities policies for evaluation by a member of BCC Equalities Team during the

	Issues	Benefit/Action/Mitigation
		process for new contracts.

## Race

	Issues	Benefit/Action/Mitigation
	BME people may have strong affiliations with particular geographical areas, or wish to avoid areas of Bristol and agencies which are felt to be potentially discriminatory, limiting their choice of service or housing.	At assessment if the location of a service is determined as a genuine need for a client then an appropriate placement that takes this into consideration will be made.
	People from nomadic Gypsy, Roma, Traveller communities may experience difficulty accessing homelessness support services and other welfare provision because of unplanned travel patterns, lack of engagement, literacy barriers etc.	The Housing Advice Team will continue to offer different ways of engaging with support, including telephone and online support, and support through interpreters.
	A high proportion of males in custody are BME, and leaving custody is a reason for homelessness. There is currently limited ability to plan for people coming out of custody because it is not possible to hold voids, or move them up the priority list before they are at risk of homelessness.	<p>The distinct pathways approach will allow for better planning for release from prison, and for fewer evictions, because of a more co-ordinated approach to homelessness prevention.</p> <p>The services will need to ensure that there is culturally appropriate support in place while in accommodation so that they can maintain their accommodation and not return to prison.</p>

## Sex (Gender)

	Issues	Benefit/Action/Mitigation
	Men and women often have different needs and face different risks. Women only services are extremely important to some women, in particular women fleeing DVA or sex work. Research with local service users has also shown that some women do not want women only accommodation and prefer mixed	There will be a male only and female only pathway in order to mitigate these risks. Where only mixed accommodation is available providers will be encouraged to offer women's and men's groups to address separate issues.

	accommodation.	
	<p>Domestic violence and abuse (DVA) is a significant factor in females presenting as homeless, as well as affecting males presenting as homeless.</p> <p>We do not currently record being a perpetrator of DVA as a reason for reason for homelessness, unless someone has been arrested/charged.</p>	<p>We will ensure that there is adequate risk assessment for DVA when considering housing options, as there will be an emphasis on returning home where safe.</p> <p>On-going domestic abuse awareness training for commissioned services will be mandatory. This should cover asking about issues of domestic abuse and knowing what to do about disclosures for all statutory and commissioned agencies and organisations.</p> <p>We will ensure that all contracts for commissioned services include adequate and appropriate training requirements that will ensure frontline practitioners are adequately trained, and understand the principles of safeguarding; and their responsibilities where Domestic Abuse is identified.</p>
	Women may be more likely to be 'hidden homeless' and the routes to homelessness may be different for women. They may be staying in unsafe or unsuitable situations instead of seeking help.	Organisations working with vulnerable women, like One25 and Eden House will continue to be a referral agent and a close partner of the homelessness pathways.
	<p>Recommendation 6 'standardising the support cost per unit' will have the biggest impact on the women's pathway, because the women's services are currently funded more than any other service per unit. This is bringing funding proportionately in line with other services.</p> <p>There is proportionately less provision with 24 hour support in the women's pathway compared to the men's and the mixed pathways.</p>	The current women's provision is funded to a significantly higher value than men's provision, and this recommendation is removing the disparity. Whilst women are more likely to flee domestic abuse and sex work than men, but men are overall more likely to be homeless, including being homeless with complex needs, so we do not believe that the current disparity in funding is justified. Work is being done with the current provider to reduce the overall cost in preparation for the new contracts.

		<p>Whilst there is less accommodation with 24 hour support in the women's pathway, there is mixed accommodation with 24 hour support (at Jamaica Street), and this will be provided in women only clusters. There is 24 hour women only provision (at Dean Crescent) for women who need that service.</p> <p>One of the changes from the draft commissioning plan to the final commissioning plan has been to remove the assessment stage. A key reason for this was because it would have further reduced the number of 24 hour high support bedspaces from the women's pathway.</p>
--	--	---

## Sexual orientation

	Issues	Benefit/Action/Mitigation
	We do not know why lesbian and gay people do better in terms of outcomes in high support accommodation.	<p>During consultation professionals with expertise in LGB issues have suggested that young people who feel comfortable disclosing their sexuality are more likely to be engaging well with services, leading to better outcomes.</p> <p>Some young people who have experienced family breakdown because of their sexuality may thrive when living independently compared to peers with more complex needs.</p>
	Bisexual people have worse outcomes in services.	We will ensure that the partnerships offer specialist support to this group in a focused way, making use of the expertise in the city, e.g. through the Diversity Trust
	There may be under-reporting of being LGBQ in services because some people may not feel comfortable disclosing their sexual orientation.	<p>We will continue to prioritise improvements in the collection of data.</p> <p>We will ask providers to demonstrate that they promote an inclusive environment.</p> <p>Staff teams should be representative and staff should feel comfortable to be out in the workplace – how services will achieve this will be tested before new contracts are given.</p>

--	--	--

## Disability

	Issues	Benefit/Action/Mitigation
	<p>There may not be enough accessible accommodation to meet the needs of disabled people with housing needs.</p> <p>We need to ensure that we have sufficient suitable provision for people in services with mobility issues and who may need adapted properties.</p>	<p>We have aligned services in distinct pathways ensuring that there is accessible accommodation in each pathway. Because of the close partnership working between different services, where someone has specific access needs, the partnership will need to create the best solutions from within the whole pathway.</p> <p>We will ask providers to provide detailed information about properties, and to develop as much accessible accommodation as possible, within the limitations of the stock.</p>
	<p>Many people receiving drug and alcohol floating support have disabilities</p>	<p>So do people who need treatment, and this recommendation will increase the number of disabled people who can access treatment accommodation.</p> <p>Other services, including the complex needs service in the ROADS commissioning will go some way to meeting this need, prioritising people with disabilities.</p> <p>Organisations' equalities policies will include areas where they are able to ensure they take service users Reasonable adjustments into account, this may also help in stopping this group being turned away due to their disability.</p>

## Religion and belief

	Issues	Benefit/Action/Mitigation
	<p>People may be uncomfortable using services provided by faith-based organisations if they are not religious or hold different religious beliefs.</p> <p>People may feel that faith based organisations will not be accepting of their</p>	<p>We will ensure that service specifications state that organisations who have a religious ethos should not proselytize or promote religion to service users.</p> <p>We will ensure that providers are committed to equality and diversity</p>

	sexuality, lifestyle choices etc.	<p>through tender evaluations and ongoing monitoring and quality assurance.</p> <p>We will ensure that there is specific cultural awareness training, specifically faith based. The data specifically indicates that the service is over represented with families who are Muslim, and therefore we need to ensure staff are aware of cultural/religious differences. We must be aware that some of service users are new to the country, and therefore do not understand how the system works, and service users need support in understanding things like, the size of accommodation restrictions at an earlier intervention point.</p>
--	-----------------------------------	---

## Gender reassignment

	Issues	Benefit/Action/Mitigation
	Several services are not currently collecting data on transgender status.	A contractual requirement will be that providers must complete comprehensive equality returns every quarter.
	Professionals may be unaware that they are working with people considering gender reassignment or those who identify as a different gender from their birth.	<p>Training on different protected characteristics, including gender and transgender, will be mandatory as part of the new contracts.</p> <p>The partnership approach will allow best practice to be shared between different providers in the pathways, and to share the cost of specific training.</p>

## Age

	Issues	Benefit/Action/Mitigation
	The new homelessness pathway is specifically designed for 22+, whereas previously 16-25 year olds were placed in young people's accommodation. This will increase the demand for adult services.	The Equality Act 2010 ban on age discrimination is designed to prohibit only harmful treatment that results in genuinely unfair discrimination because of age. It does not outlaw the many instances of different treatment that are justifiable or beneficial <sup>6</sup> .

---

<sup>6</sup> <https://www.gov.uk/guidance/equality-act-2010-guidance>

		The age limits for the proposed pathway are based on eligibility for age based state benefits, and well-established definitions of being a young person.
--	--	--

### **Pregnancy or having a child**

	Issues	Benefit/Action/Mitigation
	There has been an increase in demand for accommodation for homeless families, including young parents. We do not currently have a sufficient range accommodation to meet this demand, and consequently families with children are more likely to spend time in emergency accommodation.	<p>We will change the use of some existing accommodation for single people for use by families.</p> <p>This will reduce the reliance on emergency accommodation for families.</p>

## **Step 4: So what?**

The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.

### **4.1 How has the equality impact assessment informed or changed the proposal**

- Retention of women only pathway.
- Some existing accommodation for single people will instead be used by families to meet increased demand and create up to an additional 100 family units.
- We will build flexibility into the contracts so that the units can change to supporting single people if the demand for family accommodation changes.
- There will be no assessment stage (as was proposed in the draft plan), partly because this would require a reduction in the number of high support women only units.
- Funding an expanded ACE service to specifically work in supported accommodation and support the high rates of clients with mental health problems within services.

### **4.2 What actions have been identified going forward?**

- Effective equalities monitoring will be required of all commissioned services, through a bespoke monitoring spreadsheet that allows for analysis of entry, outcome and complaints by protected characteristic, and the protected characteristics of staff.
- Specific training on different protected characteristics will be required.



- The pathways partnerships will share best practice to ensure that services are non-discriminatory.
- The contracts will require positive action in recruitment to ensure that the staff teams are representative of the service user group.

### **4.3 How will the impact of your proposal and actions be measured moving forward?**

We will measure the impact of our proposals as part of the ongoing quality assurance and monitoring of Bristol homelessness services.

Service Director Sign-Off:	Equalities Officer Sign Off:
Date:	Date: