

# Health and Equity Impact Assessment (HEIA)

## Assessing Homelessness Impact

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**West Midlands**  
Combined Authority

This simple guide will help you assess the potential impact of your proposed policy or practice change through the lens of preventing and relieving homelessness.

This guide comes out of the work of the WMCA's Homelessness Taskforce, you can find out more about our work on the WMCA website: <https://www.wmca.org.uk/wmhtf>

Central to the work of the Taskforce is our objective to Design out Homelessness. Our focus is to help prevent homelessness wherever we can rather than just on managing it once it has happened. You can find out more about Designing out Homelessness by reading our short briefing paper: [designing-out-homelessness-briefing-paper.pdf \(wmca.org.uk\)](#)

## What is homelessness?

Many people associate homelessness with perhaps the most obvious and visible form of it i.e. rough sleeping; and are not aware of the full extent and depth of the issue. Rough sleeping is one of the most extreme manifestations of homelessness. There are explicit legal definitions of homelessness used by our Local Authorities and their partners. We are using a social definition in this paper for this purpose. However, rough sleeping is neither the only nor the most common form. When you are completing your HEIA, it is important that you consider all the forms of homelessness noted below, and capture any that apply in the HEIA:

**Homeless at home** – households whose homes are overcrowded, not fit for habitation. For example, young families having to live with parents because they cannot afford their own home.

**Temporary Accommodation** – households (including single people, couples, and families) in a night shelter, hostel, hotel, refuge, unsecured tenancies etc. For example, a woman and her children fleeing domestic abuse and living in a women's refuge, families who have lost their tenancy and can't find a new tenancy and are housed by the Local Authority in a temporary let.

**'Sofa surfing' and other unstable housing** such as intermittent hospital or prison stays. For example, a young person who has been asked to leave home by their parents and ends up sleeping at the homes of various friends, having to move on to new friends every few days.

**Rough sleeping, squatting** – people who have no home and are bedding down on the street, in their car or any other place not designed for habitation.

## Who is affected or at risk?

The risk of becoming homeless is not equally distributed throughout the population. Some groups and communities are at much higher risk of homelessness than others. For example, we know that people from Black British/Black African/Black communities are overrepresented in homelessness services and are at greater risk than other communities.

Women fleeing domestic abuse are one of the groups most vulnerable to becoming homeless and make up at least 20% of households in temporary accommodation.

Those on benefits or low / insecure incomes are at risk, poverty is a critical factor and the tighter the local housing market, which generally means higher rents, the greater the impact of low incomes.

Having unmet, or undiagnosed, needs for support with mental or physical health challenges can be a major contributory factor in increasing the risk of homelessness.

A less deficit-based approach to thinking about the risk of homelessness is to focus on the reasons people **do not become homeless** even when there have been major setbacks or 'shocks' across their life course. These protective factors include the following:

- Sufficient income and resources
- Secure tenure / accommodation
- Strong and supportive social networks
- Strong and supportive family relationships
- Access to health care and support
- Knowing where to get help
- Having the capacity to navigate public service systems

Much of the work of the Taskforce is focused on promoting the development of work in building these **protective factors**.

In short, families and individuals who have had their protective factors undermined are the most vulnerable to homelessness and those where their protective factors are boosted are much less vulnerable.

If there is an identifiable intersection with someone or groups of people who are [protected in the Equality Act](#), when undertaking your HEIA and considering the potential impacts on homelessness of your proposed policy or practice change, please note this in the HEIA.

### **Why do people become homeless?**

At a macro level one key issue is the chronic lack of affordable good quality accommodation for people to create a stable, secure and safe home.

In the final analysis homelessness is almost always a product of a mix of both structural and personal determinants (lower protective factors) such as:

- Insecure or low income
- Lack of affordable decent homes
- Isolation and lack of social networks
- Poor mental and physical health
- Experiencing domestic abuse

The consistent top three reasons for people seeking help with homelessness are:

1. Ending of a tenancy in the private sector
2. Relationship breakdown

### 3. Friends and family no longer willing to accommodate

So, when considering your HEIA you can reflect on the outcomes of your proposed changes in terms of the impact on protective factors, structural issues, inequalities and how these might be interacting.

#### **What is the scale of the issue in the WMCA region?**

The data that is currently collected relating to homelessness focuses on those households that are already homeless or are approaching their Local Authority (LA) for help. Clearly this does not give us any insight into those at risk of homelessness who either don't contact their LA or those who are vulnerable but not at immediate risk.

High level data for the last quarter of 2022 suggests that in that period:

- Over 3000 households approached their LA for help
- Over 5300 households were in Temporary Accommodation
- 88 people were rough sleeping (on the night of the autumn count)

For the most up to date data contact [Homelessness@wmca.org.uk](mailto:Homelessness@wmca.org.uk)

#### **The Positive Pathways Model**

We suggest you read our briefing paper on the Positive Pathways Model ([positive-pathways-model-briefing-paper.pdf \(wmca.org.uk\)](#)) and you may also find the aforementioned paper on Designing out Homelessness ([designing-out-homelessness-briefing-paper.pdf \(wmca.org.uk\)](#)) helpful.

#### **Questions to ask as part of your impact assessment:**

Is our proposed change/policy/project going to:

- Strengthen or weaken people's protective factors?
- Which part of the Pathway are we likely to be impacting on?
- Can we maximise our impact at the start of the Pathway (universal prevention)?
- Are we targeting those most at risk?



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