Women and Rough Sleeping

A Critical Review of Current Research and Methodology

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Disclaimer

Fully anonymised data from CHAIN were shared with the research team for the purposes of this work. The analysis presented here is the responsibility of the authors. The views expressed in this report do not necessarily reflect those of St Mungo’s or the University of York. Responsibility for any errors lies with the authors.
Summary

- It is likely that the extent of rough sleeping in the UK is underrepresented by currently available data. Women’s experience is almost certainly being undercounted as women’s patterns of rough sleeping may mean they are less likely to be recorded in counts.

- Street counts may miss women who avoid being visible when sleeping rough, and because of some methodological limitations street counts are probably undercounting total experience of sleeping rough.

- Street counts can however be useful in monitoring change over time and may indicate changes in who is sleeping rough and in the effectiveness of policy to end rough sleeping.

- Women sleeping rough may be missing from administrative datasets collected by homelessness services and other agencies, because they may not be in contact with some services and there is evidence that they avoid contact with some homelessness services.

- Administrative data may represent the best single option for understanding rough sleeping and tracking the experience and extent of rough sleeping over time, and may be more effective than street counts.

- Women’s experiences of sleeping rough are horrendous, often including sexual abuse, violence and stigmatisation.

- Women view homelessness in terms of the absence of a settled, adequate, legally and physically secure home, not the absence or presence of a roof.

- Other countries do not count rough sleeping in the same way as the UK. Rough sleepers are often included in general counts of homelessness and some countries focus on long-term and repeated homelessness, rather than rough sleeping.

- The techniques used in other countries, including ‘point-in-time’ (PIT) counts and variations such as plant capture and capture-recapture do not overcome the limits of methods employed in the UK.

- American experience in large scale merging of anonymised administrative data has markedly improved data on homelessness. However, the best picture of homelessness is probably in Denmark, which combines administrative data collection by homeless services, survey data and data merging.

- The research recommends that there is a review and improvement of data collection on women’s experience of sleeping rough and homelessness more generally, with a multiple data point approach like that used in Denmark, including data merging and survey methods, being actively explored.
1. Introduction

Introduction

This report is based on a rapid review of the available evidence and research on the experience of sleeping rough among women. The report looks at the collection and analysis of statistical data, from both survey and administrative sources and the qualitative information collected through interviews, focus groups, and ethnographic and sociological research. The main focus is on the UK, but the review encompasses data and information from around the world.

All the work for this report took place over the course of February and March 2018.

In addition to the review of existing data and research, the report also includes secondary analysis of anonymised CHAIN data from London and new research with women with experience of sleeping rough, collected through three focus groups conducted in Bristol, Leeds and York in early 2018.

The report is divided into five sections. Section 2 reviews the existing evidence on women’s experience of rough sleeping, looking at the UK and comparable countries. Section 3 critically assesses the methods that have been used to understand the scale and experience of sleeping rough, with particular reference to gender. Section 4 presents the results of new research on women’s experiences of sleeping rough and considers what they can tell us about the robustness of the research methods being used to try to understand rough sleeping.
2. Defining Rough Sleeping

What is Rough Sleeping

Definition in the UK

The UK defines homelessness as meaning someone has no accommodation they can reasonably be expected to occupy. In the UK, if someone has no legal rights to their housing, it is not safe to live in, it is unfit for habitation, or is about to be lost, they can be defined as ‘homeless’. As the guidance to the 2017 homelessness legislation in England notes:

A person who has accommodation is to be treated as homeless where it would not be reasonable for them to continue to occupy that accommodation.

In the UK, rough sleeping tends to be regarded as a distinct form of homelessness, which is separately counted, and which is targeted by specific policies and programmes. In England, rough sleeping was targeted by the Rough Sleepers Initiative between 1990-1999, the later Homelessness Action Programme and the No One Left Out initiative, before the No Second Night Out approach was developed in 2011. The current (English) government has a manifesto pledge to halve rough sleeping over the course of the parliament and eliminate it altogether by 2027. Similar initiatives have been seen in Scotland, Wales and Northern Ireland.

Homelessness policy in the UK differs between Scotland, Wales, Northern Ireland and England. However, rough sleeping is almost always counted by street counts looking for people who are bedded down (in a sleeping bag or equivalent) after a certain point in the evening. This approach has been adopted to distinguish between street-using populations, which might include people begging or street drinking, and those people who are actually living on the street.

Government in England defines people sleeping rough, for the purposes of counting them, in the following terms:

Rough sleepers are defined for the purposes of rough sleeping counts and estimates as:

- people sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments)
- people in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or ‘bashes’).

The definition does not include people in hostels or shelters, people in campsites or other sites used for recreational purposes or organised protest, squatters or travellers.

Bedded down is taken to mean either lying down or sleeping. About to bed down includes those who are sitting in/on or near a sleeping bag or other bedding.

Guidance issued for CHAIN, the multi-agency database that records information about people sleeping rough and the wider street population in London, notes that people should be counted as sleeping rough if they are living in the following circumstances:

- Cars – whether taxed and/or roadworthy or not
- Hospitals/A&E wards – both inside as well as in the grounds
- Buses
- Parks
- Subways
- Bin sheds
- Garages
- Derelict buildings with no running water or amenities, no lockable door, and a roof that doesn’t cover the whole building

Homeless people in libraries (inside the building), police stations, fast food restaurants and living in houses that are used for illegal drug consumption.
are not defined as sleeping rough under these criteria.

Definitions in Other Countries

**ETHOS – The European Typology of Homelessness**

The European Typology of Homelessness (ETHOS) defines homelessness in terms of an absence of a home, rather than living in a specific situation. One aspect of having a home is having an adequate, suitable, physically secure space to live in (this is referred to as the physical domain). Another element is private space for oneself, a partner and/or wider family (the social domain) and the final element is a legal right to occupy the place being lived in (the legal domain).

The absence of all of these three domains creates a situation of homelessness. Homelessness defined in this way, of course, includes rough sleeping, but it also includes someone being forced to sleep on someone else’s floor because she has nowhere else to go. A woman who is alternating between sleeping on different people’s floors, emergency accommodation and sleeping rough is only – by some definitions - sleeping rough some of the time. However, she is in a situation of lacking the physical, social and legal domains of a home on a continuous basis.

This means that someone sleeping rough is defined as homeless in the following ways:

- By sleeping rough itself, i.e. lacking housing
- By the lack of their own private space in their own, safe and secure, home
- By the lack of any legal right to live anywhere

While very useful, ETHOS also has limitations, with the typology becoming a bit messy when it comes to actually defining homelessness. One issue here is that having defined ‘homelessness’ in terms of personal situation, ETHOS then tries to define the nuts and bolts of homelessness in terms of where people are physically living, which rather undermines the argument that homelessness may be better seen as a state of being than living in a particular physical situation. A revised version of ETHOS, ‘ETHOS light’, concentrates more on counting homeless people in different situations, including people sleeping rough as a category of homeless people and more closely resembles definitions used in the UK and other OECD countries.

**Other OECD Countries and Europe**

The European Union attempted to get all member states, including the UK at that time, to count homelessness in the 2011 censuses that took place across all 28 countries. The definitions that the countries were supposed to follow, but which most ignored, drew the following distinctions between homeless people:

- ‘Primary homelessness’, which meant literally without a roof.
- ‘Secondary homelessness’ which included people without a settled home, moving between temporary arrangements and people resident in emergency accommodation.

In several other OECD countries, people sleeping rough and those in emergency accommodation tend to all be counted as ‘homeless’ and homelessness as a social problem tends to be discussed in terms of the whole homeless population, not making a distinction between those who are sleeping rough and those who are not.

In several countries, such as Canada, Finland, France and the United States, a distinction is drawn between short-term homelessness and longer-term or repeat homelessness. These distinctions are made on the basis that long-term/repeatedly homeless people tend to have higher support needs and may require specific services, such as Housing First. So for example:

- Finland differentiates between long-term homeless people and other homeless people when counting the population, but would not define people sleeping rough as a distinct group of homeless people.
The United States follows a similar approach, differentiating between long-term and repeatedly homeless people who are defined as experiencing ‘chronic’ homelessness, and other groups of homeless people\(^\text{18}\).

Canada and France have targeted their Housing First programmes on long-term and repeatedly homeless people with high and complex support needs, again distinguishing between this group and other homeless people\(^\text{19}\). However, their homeless counts tend to be broader than that\(^\text{20}\).

Unlike the UK, some other countries distinguish between (and attempt to count) the populations with low support needs, who have short term experiences of homelessness, and people with more complex needs, whose experiences of homelessness may be long term or repeated.

This means that a long-term or repeatedly homeless person with complex needs is seen as a greater social problem (and counted as such) than a short-term rough sleeper without complex needs. In the UK, by contrast, there is a tendency to see rough sleeping as the ‘extreme’ form of homelessness, which has been the main target of repeated policy interventions.

In several other countries that are broadly comparable with the UK in terms of economic development, people sleeping rough are usually counted as part of a ‘homeless population’ although people sleeping rough are quite often recorded as ‘unsheltered’ and those in emergency and temporary accommodation as ‘sheltered’\(^\text{21}\).

**Key Points**

- The UK uses physical definitions of sleeping rough.
- Other countries do not necessarily think about or measure homelessness in the same way, homelessness can be defined in social terms, rather than where someone is sleeping.

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\(^\text{1}\) OECD and European countries

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Women Sleeping Rough in the UK

**Historical Data**

The last 30 years of research into rough sleeping in the UK have been characterised by three findings on women:

- Women are sleeping rough.
- Women are apparently much less likely to live rough than men.
- Women sleeping rough appear to be increasing in numbers and this increase appears to involve younger women.

The last major survey of single homelessness conducted in England was published in 1991, reporting all three of these trends, which are also reported in much of the subsequently published research.

**Figure 3.1  Single homeless women England 1991**


In 1991, single homeless women were greatly outnumbered by men, but while they formed a quarter of the population in hostels and B&B hotels, women were much less numerous on the sites sampled to try to interview rough sleepers which were day centres and soup runs. Eighty-two percent of day centre users and 85% of soup run users had slept rough the night before they were interviewed, but only 7% and 13% of these two populations were women. The women and men using day centres and soup runs all tended to have very poor mental and physical health.

A 1995-1996 study of five emergency shelters in England reported that, out of 570 people using the shelters, only 61 (11%) were women. The women reported sleeping rough during the course of the past year at a lower rate than the men did (67% compared to 86% of men). A large 2011 survey-based study focused on high need homeless people in the UK also reported only small numbers of women.

**Current Data**

**Rough Sleeper Counts**

In the last two years, the rough sleeper count conducted in England has reported gender breakdowns. In 2016, 12% of people reported sleeping rough were women and in 2017 the figure was 14%. The definition used was described above and includes people bedded down, apparently about to bed down and living in tents.

**Figure 3.2  Rough sleeper count England**

Source: MHCLG.
**CHAIN**

The CHAIN database which operates in London is a multi-agency database which has been described as being the UK’s most detailed and comprehensive source of data on rough sleeping. CHAIN records service use by individual homeless people over time, including services used by people sleeping rough and street-using populations. As the CHAIN data are collected for administrative and monitoring purposes by professionals used to working with people sleeping rough, they may be a more accurate representation of rough sleeping than some other sources. CHAIN is however administrative data based on service contacts, which means it is not a census or representative survey of all homeless people in London.

Access to fully anonymised data was granted to the research team, covering people recorded in the CHAIN database over the financial years 2012-13 to 2016-17. During this period, CHAIN recorded 28,135 individuals with experience of rough sleeping of whom 24,095 were men and 4,040 were women, 14.4% of rough sleepers were women and 85.6% were men.

Levels of women rough sleeping increased between 2012-13 and 2015-16. There was a small fall in 2016-17, although levels were still higher than over the period 2012-13 to 2013-14.

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**Figure 3.3  Women as percentage of people sleeping rough recorded in CHAIN 2012-13 to 2016-17**

![Figure 3.3  Women as percentage of people sleeping rough recorded in CHAIN 2012-13 to 2016-17](image)

Source: CHAIN (authors’ analysis). Base: 4,040 women and 24,095 men (unique individuals based on specially created anonymous identifier).

Women recorded sleeping rough were significantly more likely to be aged 25 or less than men. A broad trend reported since the 1990s has been for increasing numbers of women to appear in the rough sleeping population, within a wider pattern of change that has seen the population shift from older, white, often alcohol-dependent and mobile men, towards a younger population with more complex needs. There have been major changes in health, social care, social housing and welfare systems, as well as in the UK housing and labour markets, along with significant cultural changes, and these data are within a longstanding pattern of increases in female youth homelessness.

Men were significantly more likely to be to be aged between 36-55, but there was little difference in the small proportions of both female and male rough sleepers aged over 55. Older rough sleepers appear to be relatively unusual. This may be associated with high rates of early mortality among single homeless people and rough sleepers.

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### Notes:

- **Note 1:** More people may have contact with services than are recorded in cross-sectional (snapshot) surveys or street counts (see below).
- **Note 2:** In compliance with the data protection and privacy legislation and in compliance with the new laws and guidance coming into effect in May 2018.
- **Note 3:** Unique individuals, i.e. this number includes people who were seen sleeping rough multiple times, but each person is only recorded once.
- **Note 4:** Four people identified as non-binary (excluded from this analysis).
- **Note 5:** p<0.001
Women rough sleepers were recorded as having higher rates of mental health problems than was the case for men. The data here were partial, as some 33% of individuals reported sleeping rough had not been assessed. However, the higher tendency for women rough sleepers to report mental health problems was significant.<sup>vii</sup>

**Figure 3.4 Rates of mental illness reported among individuals sleeping rough in CHAIN 2012-13 to 2016-17**

![Graph showing rates of mental illness reported among individuals sleeping rough](image)

Source: CHAIN (authors’ analysis). Base: 2,658 women and 16,385 men for whom information on mental health was recorded (unique individuals based on specially created anonymous identifier).

Men rough sleepers (43%) were more likely than women (29%) to report issues with alcohol. The difference for drug use was less pronounced, with 27% of women being reported as having an issue with drugs compared to 31% of men. Again, data here were not complete<sup>viii</sup>, but did indicate women using drugs and alcohol at lower rates than men.

There is longstanding evidence from CHAIN that a considerable number of people who experience sleeping rough in London are migrants, with a relatively strong representation of citizens of Central and Eastern European countries being reported. Women sleeping rough were more likely than men (48% compared to 43%) to be UK citizens over the period 2012-13 to 2016-2017. However, women were less likely to be have a White European ethnic origin than men sleeping rough (61% compared to 68%).

There was an overrepresentation of Black British women sleeping rough, who represented 20% of women who were reported as being UK citizens (3.4% of the population was recorded as Black British in the 2011 Census)<sup>ix</sup>, just under 5% were Asian, with the largest group of women UK citizens having White European origin (70%). Most women rough sleepers from Eastern and Central Europe were White European (61%), but 37% were recorded as having Romany/Sinti origins.

**Figure 3.5 Reported nationalities of women sleeping rough in CHAIN 2012-13 to 2016-17**

![Graph showing reported nationalities of women sleeping rough](image)

Source: CHAIN (authors’ analysis). Base: 3,957 women who provided information on nationality (unique individuals based on specially created anonymous identifier).

The CHAIN data for 2012-13 to 2016-17 supplied for this analysis was aggregated to indicate the broad experience of rough sleeping for each individual. CHAIN data on whether someone was recorded sleeping rough during each quarter (three-month period, one quarter of a year) were made available. For example, if someone slept rough in two quarters of 2012/13 and two quarters of 2014/15, they would be recorded as experiencing sleeping rough during four quarters, during the period 12/13 to 14/15.

The fully anonymised data shared with the research team covered everyone recorded in the CHAIN.
database from 2012/13 to 2016/17. For this group, historic records on their rough sleeping were made available from 2000/01 onwards. This meant that, for the people using homelessness services recorded by CHAIN between 2012/13 and 2016/17, their entire recorded history of sleeping rough, dating back to 2000/01, was available.

Women were significantly more likely than men to be recorded as sleeping rough for just one quarter (69% compared to 64%), but both genders were unlikely to be recorded sleeping rough during more than one quarter. This pattern may be related to policy and service provision in London, which is extensive, and in particular the No Second Night Out programme.

Figure 3.6 Number of quarters in which reported sleeping rough by gender

Source: CHAIN (authors’ analysis). Data cover people in the CHAIN database 2012-13 to 2016-17, with data on numbers of quarters in which recorded sleeping rough dating back to 2000-01. Base: 4,040 women and 24,095 men (unique individuals based on specially created anonymous identifier).

Periods of sustained homelessness, including some rough sleeping and some experience of living in precarious arrangements, such as hidden homelessness and in emergency accommodation, may exist. There is specific evidence indicating this pattern of moving in and out of rough sleeping, within a pattern of broader experience of homelessness, among homeless women. In practice, this means a report of sleeping rough during a single quarter should not necessarily be seen as meaning that a woman (or man) only had short-term experience of all forms of homelessness.

Multivariate analysis also indicated that women were more likely than men to be reported as sleeping rough during just one quarter. People without recorded mental health problems, and without recorded drug use or an issue with alcohol, were also more likely to only be reported as sleeping rough during one quarter. Women who were reported as having mental health problems were more likely to be recorded sleeping rough during more than one quarter. Analysis showed women with mental health problems were recorded sleeping rough more often than those without mental health problems. The average for women with mental health problems was four quarters (mean 4.28 quarters, median 2 quarters) while those without recorded mental health problems were recorded as sleeping rough less often (mean 2.57 quarters, median 1 quarter).

Men with mental health problems were also reported as sleeping rough in more quarters than those who were not reported as having mental health problems (mean of 5.33 quarters when reported to have mental health problems, mean of 3.23 when mental health problems were not present). As noted above, the data on mental health problems recorded in CHAIN were not complete, so this analysis should be seen as indicative.

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\( p < 0.001 \)

\( \text{http://www.nosecondnightout.org.uk} \)

\( \text{That is, women may sleep rough on an irregular and unpredictable basis within sustained period of homelessness (see below).} \)

\( \text{xi Binary logistic regression controlling for reported alcohol use, drug use, mental health problems, being aged 25 or under, UK citizenship and ethnic origins.} \)
Women's Broader Experience of Homelessness

Women are more likely to experience some forms of homelessness than men. In the UK, lone women parents with dependent children, who have often experienced domestic violence, represent the bulk of family homelessness. From 2007 to 2017, almost half of all the households accepted as statutorily homeless were lone women parents. At the lowest point 44% of all statutorily homeless households were lone women parents (2007) and during the period 2014-2017, 47% of all acceptances for each calendar year were women.

Figure 3.7 Slept rough in one or more than one quarter CHAIN 2012-13 to 2016-17

Figure 3.8 Women in the statutory homelessness system England

Source: MHCLG Live Tables. Author’s analysis.

Taking 2017 as an example, 47% of statutorily homeless households in England were women with dependent children, a further 10% were lone women (usually accepted as in priority need due to ‘vulnerability’ under the terms of the legislation) and, of course women would have been around half the adults in the couples accepted as homeless. Women would also have been present among the ‘other’ categories of statutory homeless. In 2017, households headed by women accounted for 57% of households found statutory homelessness. There were more women in the statutory homelessness system than men.

Scale is also important here, at the last count there were 4,751 people recorded as sleeping rough in the UK, 653 of whom were women. In 2017, the 653 women sleeping rough were the equivalent of:

- 11.3% of the lone women headed households accepted as statutorily homeless in 2017 (5,770 women).
- 2.4% of the lone parent households headed by women accepted as statutorily homeless (27,220 women).

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xiii Possibly not quite half or slightly over half, as some gay and lesbian couples may be present.
households containing one or more dependent children headed by a lone woman parent).

**International Statistics**

**Europe**

Other European countries do not record homelessness or rough sleeping in the same way as the UK, nor do they necessarily record homelessness in the same way as each other. However, it is possible to look at the broad representation of women in homelessness statistics from other countries.

One key difference between the UK and other countries is that other countries do not tend to count people sleeping rough separately from the other groups in the homeless population. So, for example, France, Germany, Italy and Spain would count both people sleeping rough and those in emergency shelters and (where present) temporary accommodation as homeless. Where some other countries, such as Finland or the USA, draw distinctions between different groups of homeless people is not whether or not they are sleeping rough, but around the duration of their homelessness. In the UK, the ‘extreme’ of homelessness is often seen as people sleeping rough, while in other countries, long-term and repeated homelessness is seen as the most damaging aspect of homelessness and is sometimes counted separately.

Many countries report the presence of a significant migrant population among homeless people. Countries recording particularly high proportions of migrants include France, Italy and Spain, although migrant populations are generally overrepresented in homelessness counts in many European countries.

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**Figure 3.9  Women’s homelessness in European countries**

![Women's Homelessness in European Countries](image)

**Data are not directly comparable and are from different periods.** In Denmark, Finland and Norway, homelessness is defined as including hidden or concealed households (people staying with friends or relatives as they have nowhere else to go). In France, Italy and Spain, homelessness is defined as including people sleeping rough and those in emergency shelters and temporary accommodation for homeless people.

Finland does not have a concept of ‘rough sleeping’ in quite the same way as the UK, but, like several other countries does measure long-term homelessness which includes people who are recurrent and sustained rough sleepers. Data on long term homelessness – as a result of a sustained policy effort now a very low number in Finland – record women as 21% of this group in the most recent statistics.

**Figure 3.10  Long-term homelessness in Finland**

![Long Term Homelessness in Finland](image)

In Finland, long-term homelessness is often experienced by people with high and complex support needs. These include addiction, severe mental illness, physical disability and limiting illness. Long-term homelessness is also associated with extreme social and economic marginalisation, i.e. people tend to lack friendships, family connections, work and the broad connections with wider society experienced by other citizens.

**Australia**

The Australian Bureau of Statistics developed a definition of homelessness, following a process of consultation, in 2012. The definition encompasses different elements of both European and British ways of defining homelessness, someone is homeless in Australia, for statistical purposes, if:

- they are in a dwelling that is inadequate; or
- have no tenure, or if their initial tenure is short and not extendable; or
- does not allow them to have control of, and access to space for social relations.

The 2016 count of homeless people in the census reported 116,427 people as homeless within this definition, an increase from the 2011 figure of 102,439. The rate at which homelessness was experienced was reported in terms of the number of people per 100,000 Australians who were homeless. The rate for women remained steady between 2011 and 2016 at 42 women being homeless for every 100,000 Australians, whereas the rates among men increased from 54 to 58.

Under this broader definition, the ratio of women experiencing homelessness is higher than reported in some other countries at an average of 41% of the homeless population (across the different sites where homelessness is recorded). Specific data are also collected on homeless people ‘in improvised dwellings, tents or sleeping out’, which is effectively very similar to the UK, but here again the reported figures are higher than might be expected, with 34% of this small population (8,200 people) being women.

**United States**

In America, it is possible for women to be sleeping rough or in living in emergency shelters with their children, both as lone parents and with a partner and their children. Approximately 67% of the homeless population was made up of lone adults, including people who were sheltered (in services) and unsheltered (sleeping rough, tents and in vehicles).

Among lone homeless adults, 28% were women, 104,315 women within a population of 369,081 lone homeless adults. Women were a slightly greater proportion of the sheltered lone adult homeless people (30%) than unsheltered individuals, who are defined in a similar (though not identical) way to rough sleepers in the UK (26%). Recent American statistics do identify whether someone is transgender or did not identify as male or female, although the record of whether someone is transgender does not specify their chosen designation (i.e. it is not possible to count those people identifying as women).

![Figure 3.11 Women’s homelessness in the United States 2015-2017](image)

*Source: HUD. Percentages based on people who reported their gender as either male or female.*

‘Chronic’ homelessness, which refers to recurrent and sustained homelessness among people with

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high and complex needs\textsuperscript{xiv}, has been reduced in the United States through changing strategies and service innovation. Women are present in this population, although the proportion of ‘chronically’ homeless people within the homeless population appears to vary considerably between States (this may reflect individual States’ control over social and housing policy). In 2007, 119,813 people were reported as chronically homeless in the annual count, this had fallen to 77,486 in 2016, but increased in 2017 to 86,962. A gender breakdown is not included in published reports\textsuperscript{47}.

**Key Points**

- A range of data show women are sleeping rough in the UK and research suggests an upward trend over time, in both proportional and absolute terms.

- The CHAIN data indicate that women are more likely to sleep rough for short periods than men. However, both women and men are *unlikely* to have sustained or repeated experience of sleeping rough.

- Women with mental health problems appear more likely to experience sustained/repeated rough sleeping according to CHAIN data. However, women have lower rates of problematic drug/alcohol use than men, which are also variables associated with recurrent/sustained rough sleeping in the CHAIN data.

- There is a migrant population sleeping rough in London, which includes women. People who are not UK citizens cannot access many homelessness services, it is illegal for local authorities to assist asylum seekers under the terms of the homelessness legislation in England.


\textsuperscript{xiv} People with a limiting illness, mental health problem and/or disability, who have been homeless for one year or more, experiencing at least four episodes of homelessness in the last three years where the combined length of time homeless is at least 12 months.
The state of knowledge on women’s homelessness in the UK and across Europe is reviewed in the recently published volume, *Women’s Homelessness in Europe*. The evidence base can be patchy, in the sense that studies have not been frequent and have quite often involved small scale qualitative studies by social policy researchers, feminist scholars, sociologists and ethnographers.

There have been various attempts to analyse the reasons for the apparently low representation of women in the lone adult homeless population and, particularly, among people with experience of sleeping rough. In 1990, the discrepancy between the numbers of women in homelessness services for lone adults and those sleeping rough was noted in the last major survey of single homelessness in England and has been recorded ever since, both in the UK and internationally.

The closer homelessness comes to street homelessness, to sleeping rough, the lower the proportion of women appears to be. When the definition of homelessness is broader, particularly when various forms of hidden homelessness are included, women are much more evident.

The existing research indicates there may be five reasons why women are not visibly sleeping rough at the same rates as men:

- **Women tend to take different trajectories through homelessness**, with a greater reliance on informal arrangements with friends, family and acquaintances – hidden homelessness - than is the case for men. Some research suggests women experiencing long-term and repeated homelessness may alternate between forms of hidden homelessness, sleeping rough and use of services.

- **Women tend to exhaust informal options - acquaintances, friends and family - before seeking help from homelessness services more often than men, who tend to resort to services more quickly.** This is most clearly illustrated in research on statutorily homeless families in the UK and in American evidence on homeless families, where women’s first reaction to homelessness is often to use the most immediate and accessible informal options to keep a roof over their own and their children’s heads.

- **Women avoid homelessness services.** This is because homelessness services can lack appropriate, physically safe facilities and support for women, as they can often be designed on the assumption that their target population is overwhelmingly male. There are fewer women-only homelessness services than male services in England.

- **Women’s homelessness is very closely associated with domestic violence.** Every study in the last 30 years or more has reported that women who become homeless often do so as a direct result of domestic violence and that, while it is not always direct cause of homelessness, experience of domestic violence and abuse is near-universal among women who become homeless. When a woman seeks assistance because of domestic violence, her homelessness may not be recorded as homelessness but instead be recorded as use of a refuge or other form of domestic violence service. Women who sleep rough and who have contact only with domestic violence services may be not ‘recognised’ as homeless or as rough sleepers by the administrative systems within domestic violence services.

- **Women tend to have children.** When a lone woman at risk of homelessness has dependent children with her, welfare systems tend to protect the children and their mother because in the UK, as in other economically developed
countries, there are multiple systems designed to reduce or prevent children’s experience of the extremes of poverty. Women are ‘protected’ from homelessness and from rough sleeping when they have their children with them because welfare, social services, health and social housing systems are designed to protect children.60

The existing research on women’s homelessness makes a series of broader points which are relevant when considering women’s experience of rough sleeping. The first of these points concerns our collective and cultural responses to women’s homelessness. Women’s ‘expected’ roles in society, as mothers, carers and as the core of ‘family’ life is reflected in how social, welfare housing and other policies are structured, as well as in popular fiction, advertising and mass media. Rough sleeping places a woman at a great distance from the roles she is expected to fulfil; she is not raising children, she is not in a (domestic) role in a relationship with a male partner, she is not caring for an elderly relative that needs support, she is not nurturing or reinforcing a family. These images are sexist and confining, but also widespread and are important in understanding responses and attitudes to rough sleeping, in the sense that we do not expect women to be sleeping rough.61

Along similar lines, there have been associations drawn between women’s rough sleeping and sex work. While women experiencing homelessness can be involved in sex work, research has suggested that even in societies with higher than usual levels of gender equality, widespread assumptions that homeless women will be involved in sex work, reflecting their ‘deviance’ from expected roles, as mother, carer or partner, are not actually based on clear evidence.62

Not expecting something to be there can mean that we fail to consider looking for it. The attitudes towards women who sleep rough – as so distant from their ‘expected’ roles that it represents an aberration – means that it is arguable that there could be an assumption that women rarely sleep rough. It is important not to get carried away here, raising this idea and evidencing it are different things and research that explores whether cultural bias around female roles and associated sexism is influencing the enumeration of homelessness has yet to be conducted (and we will not hold our breath waiting for such a study to be funded). However, there is a broader point here, which is why, whether in terms of methodology, underlying assumptions, logistics and hypotheses, there has been almost no work investigating whether the reason why women appear to sleep rough at lower rates than men might be because, at least in part, our systems for counting rough sleeping may not be accurate when it comes to counting women.

There is a history of very serious mistakes when it comes to counting and understanding homelessness. From the late nineteenth century and into the early twentieth century, when homelessness began to be looked at as a social problem, there was a broad belief that the causes were a mix of deliberate inaction and deviance, people becoming homeless because they were ‘immoral’ and ‘workshy’ or because they were unable to care for and house themselves.63 As data began to be gathered in a systematic way, the evidence pointed towards the latter explanation, people were often homeless because they could not care for themselves, with an apparently strong association between homelessness and severe mental illness combined with addiction.64

In the United States, research on lone adult homelessness found a group of men with high and complex needs, whose often long-term and repeated homelessness was apparently associated with those needs, which centred on severe mental illness and addiction. Data collection used cross-sectional or snap shot surveys, i.e. everyone using an emergency shelter or living on the street over a given period, a day, two or three days or perhaps a week or two.65

This picture of homelessness was quite wrong. The problem was that when people sleeping rough or in emergency services were looked at over a short period, they did appear to mainly have high and complex needs and a history of homelessness, but
when administrative data were looked at – everyone using the emergency shelter over five years – a very different picture emerged.

What the cross-sectional surveys had counted were the people stuck in homelessness services, stuck on the street, or caught in a revolving door between services and sleeping rough. Eighty-percent of lone adults using emergency shelters in the USA stayed for short periods, had low support needs and did not reappear\(^57\).

By contrast, 10% of the population using emergency shelters were using half the bed-nights, they were long-term homeless, they had high and complex needs, as they were always in the shelters, if you only looked at who was in the shelters during a short period, it was this group you would see\(^58\).

The point, in relation to lone women’s homelessness and women’s experience of rough sleeping, is that no-one expects it to exist at scale, so it is not looked for. What happened in the USA was that because there was an expectation that homelessness would be ‘caused’ by severe mental illness and other support needs, no-one questioned data that showed the expected association, until someone thought to change the method and found a very different picture when they looked at everyone who was using homelessness services over time.

The possibility that we are doing the same thing in relation to women’s homelessness and women’s experience of rough sleeping does at least need to be considered. Our data apparently show us what we expect to see, that women do not drop out of their ‘expected’ roles, or that when those expected roles are threatened, such as being a mother, the State steps in as a ‘protector’, so women and their children do not end up on the streets\(^69\).

Questioning our assumptions is never easy, particularly when those assumptions are longstanding, but it may be helpful to pose the question another way, i.e. does it make sense that women do not tend to sleep rough? Women are overrepresented when it comes to family homelessness, we know the scale and severity of domestic violence in our society, which we also know is a cause of women’s homelessness, yet the apparently low representation of women among rough sleepers has not really been questioned.

**Key Points**

- There is increasing evidence showing that the cause of women’s homelessness and the trajectories that women take through homelessness tend to differ from those of men.

- While men can experience the same or similar pathways or trajectories through homelessness to women, there is growing evidence women that women draw on informal resources to manage homelessness – staying with friends, family and acquaintances – at higher rates and probably for longer periods than men.

- Women’s homelessness is associated with domestic violence at much higher rates than is the case for men.

There is evidence of cultural responses to women’s homelessness that may influence how it is seen and the ways in which it is counted.
5. Women’s Experiences

Introduction

This section of the report draws on three focus groups with homeless women who had experience of sleeping rough. Fourteen women, who were mainly aged in their thirties and forties, took place in groups that service providers helped the research team to arrange in Bristol, Leeds and York. The groups were not representative, being only small in scale and obviously only represented women using services.

In conducting this review and in other recent work, the authors have been involved with on gender and homelessness, the invisibility of women’s homelessness and absence of their voices in research, their absence from homelessness data and a broad failure to consider their needs in policy and service development has been — repeatedly — made apparent. In this light, the authors took the view that while this was a short review of the evidence base, it should seek the views of women with direct experience of sleeping rough. Views were sought on how accurately existing research reflects their experiences and the nature of sleeping rough, the focus groups employed a semi-structured approach, designed to enable the women to raise issues rather than being expected to respond to a series of questions.

The Experience of Sleeping rough

The women who participated in the three focus groups spoke frankly about the experience of sleeping rough. Most had been subjected to horrific violations, this included being spat, urinated and vomited on. Many had been robbed, threatened, experienced physical violence and been continually harassed for sex by male members of the public. The attitudes experienced by the women varied. Verbal abuse and being treated with contempt were common experiences, there was also a frequent assumption that being on the street meant they were involved in sex work.

People tend to look down at you more if you’re a woman than a bloke. There’s a lot of stigma for women on the street.

Women tend to get targeted more if you’re on the streets.

Me and [...] used to sleep on the [location in York]... a woman went past with her fella and she went ‘people like you do my ***king head in’ and she threw a red hot coffee at me.

These experiences of stigmatisation, abuse and hostile attitudes had what the women described as highly damaging effects on their self-esteem.

Homelessness may have been triggered by domestic violence, by other factors outside their control, yet the women were continually confronted with attitudes that blamed them entirely for their situation, as if they had brought their homelessness upon themselves.

I tell ’em me, what do you think I’d be sitting here if I could get a ***king job!

45% of the public judge you and the other 55% don’t and they help and most of them are kids. I had an eight year old that came up and gave me his pocket money.

There’s a whole stigma around being homeless, it’s their fault, they did it. When in reality - I’ve been homeless, it’s opened my eyes up so much

The responses of the women to these experiences was the obvious one, which was to conceal themselves when sleeping rough. This concealment took two forms. The first was to be in places where

See acknowledgements.

See the Women’s Homelessness in Europe Network [http://womenshomelessness.org]
they would not be seen or harassed, the second was to attempt to conceal their gender.

*We have to hide because if we don’t we’re gonna get raped, kicked, beat.*

*Women dress more like men as well when they’re out. All covered up and that...put your hoods up...big baggy stuff.*

Women would also sometimes pair up with one or more men sleeping rough, forming a small group that would provide them with some protection. Several women reported that they felt safer with men who were also rough sleeping than with male members of the public, albeit that there was some experience of crime and violence from other homeless people.

The women reported seeking safe, quiet places in which to bed down. Keeping out of sight was a priority.

*(I hid in) Wendy houses in back gardens, sheds, empty garages, empty houses that were gonna be demolished...public toilets...wherever.*

*It’s easier to find a shed in someone’s back yard than it is to sit in a doorway and risk getting a beating.*

*That’s why women tend to hide, they think safety first.*

Women also reported moving around as a way to avoid harassment and physical danger. Walking around as a way of being less visible than would be the case if they were in a doorway or on a bench.

Addiction and crime were widespread experiences. Some women talked about the prevalence of addiction among people sleeping rough and saw this as a major issue. Other research has suggested complex relationships, in that while addiction and homelessness can be mutually reinforcing, the idea that addiction ‘triggers’ homelessness is too simplistic. Addiction can arise before homelessness, develop during homelessness and may sometimes remain a constant, before, during and following an experience of homelessness. While addiction issues can be widespread, they are also not necessarily universal. However, as is the case with much of the research on rough sleeping and the extremes of homelessness, work has tended to focus on male experience.

### Access to Services

The women reported that they avoided some homelessness services. The main reason for this was because those services were mixed gender. The women chose to talk about their experience of domestic violence, which was near-universal and about how this made them feel about being around men generally within an environment and situation they did not directly control. There were also concerns that perpetrators of domestic violence could sometimes track the women through their appearance at some homelessness services, because someone might reveal their presence.

*Men. Because they have been abused and had domestic violence they don’t want to be around men...They’re reluctant to go because they don’t know who’s gonna be there.*

*The people who have had domestic violence, their friends, the man’s friends are gonna be there as well. You don’t know who knows who.*

The environment within some homelessness services was also reported as difficult to deal with. Disputes with other service users, being in environments where drug use was widespread and other sources of tension were reported, meaning there were other reasons to avoid some services.

*They’re reluctant to go because they don’t know who’s gonna be there... When you’re in this cycle, in this lifestyle, with all the drugs and everything, do you know what I mean, you get beefs with people.*

The women reported barriers to domestic violence services, which were seen as difficult to access. Whether seeking help from services, the criminal justice system or from Housing Options Teams in local authorities, the women reported that they were expected to ‘prove’ their experience of domestic violence and that repeated contacts with the Police and other services could be needed before they were believed. Use of domestic violence services was not reported as widespread by the women in the three focus groups.
Domestic violence services aren’t as easy and obvious as you’d think to get in.
I didn’t know how to access them [domestic violence services], I didn’t even know if I could.
It’s like you are in a different World when you are in a domestically abusive relationship…nobody believes you.

Earlier research has suggested that domestic violence services cannot always meet the level of need in England[73], with cuts to refuges and other services having occurred since that work was completed. However, it is not possible on current evidence to be clear how far refuges and other services may prevent or stop rough sleeping, or, if not accessible, increase the risk of it.

This report was written at a point when the statutory homeless system in England was in a process of transition because of the introduction of the Homelessness Reduction Act. There will be a new emphasis on prevention, building upon the initial move towards a preventative approach which was underway by the mid 2000s. With reference to systems that were still in place when they had sought help, the women identified barriers to assistance from the statutory system. An expectation to ‘prove’ their homelessness in general and their rough sleeping in particular was widely reported across all three locations.

Rough sleeping was seen, in relation to the statutory system, domestic violence and other services as creating a barrier to access. The homelessness of the women, whether sofa surfing, living in homelessness services or during those periods that all of the women interviewed had spent sleeping rough, was often not recognised by services.

Every single time I go to the council there’s a reason why it’s my fault. I’ve been treated like I’m a prostitute, like I’m on drugs…they make you feel that you are lying – ‘Oh, did you really sleep out on the street?’ Well, I wouldn’t say I’ve slept out on the street, but walking around all night is near enough sleeping – sorry I didn’t sleep - ‘Oh, well you’re not homeless then.’

Defining and Counting Rough Sleeping

Rough Sleeping and Homelessness

The women were asked if they could share their views on how rough sleeping related to other forms of homelessness. Here the answers tended to follow the logic used in several other countries[17], that the site at which homelessness occurred, whether it was on the street, in emergency accommodation, a homelessness service or an abandoned building, was not particularly important, homelessness was homelessness.

The homeless women defined homelessness in terms of the absence of physical security, their own private space and security of tenure. A home meant your own house or flat, with your own front door and a reasonable expectation that you had a protected right to live there. An absence of these things, whether rough sleeping or in a homelessness service, meant that someone was homeless.

If your name’s not on a tenancy and stuff, you haven’t really got a home have you.
For me homelessness ends when you’re a permanent resident in a flat or a house that is in your name.
You want somewhere where you can call yours and come and go as you please.

These views were closer to European, Australian and North American ideas on what being ‘homeless’ is. There is not the distinction between unsheltered and sheltered people in the sense that the former group is somehow more ‘homeless’ than the latter, their homelessness is defined in terms of the absence of what would be conventionally recognised as a settled home, not on whether someone is sleeping on the street or in a shelter[18].

For the women in the three focus groups, rough sleeping might have presented heightened risks, but they were no less ‘homeless’ when they were squatting, sofa surfing or living in a homelessness service. Conditions away from the street were not
always much, or any, better and the risks in certain environments could be greater than remaining sleeping rough in a concealed location or with trusted companions.

*It’s not that we’ve not got somewhere to sleep on a night* [resident in a homelessness service], *but it’s, it’s not feeling like you’re coming home...it just feels like somewhere to doss.*

*But then again it could be like there’s some horrendous houses where I’d rather be on’t streets...Like you know, crack dens I’ve slept in, I’d have rather been in a doorway because they were diabolical...*

The women also talked about the disconnection that they could feel from normal life. The absence of a home, the stigma and the lack of connection with the wider world were all part of the experience of sleeping rough and being homeless.

*It’s about not having anywhere to go in the day as well. At night I would drink to be able to sleep, but that wouldn’t really bother me. It was the daytime, just sitting in the middle of town, nowhere to go – everybody’s doing something! Everybody talking on the phone and walking round with their boyfriends. There’s nothing worse than feeling like you’ve got nowhere to go.*

Homelessness was also often associated with a loss of family and a loss of connection with children. Previous research has also shown that lone adult women experiencing homelessness and rough sleeping are often parents, who have lost contact with their children for various reasons, ranging from the circumstances in which they became homeless, through to social work intervention and children being taken into care.

*I’ve always been with my family, a family person. I’ve never been out there...and all of a sudden to be chucked out there, like, ‘this is your life’...I didn’t know what to do.*

**Counting Rough Sleeping**

Talking through the likely accuracy of existing methods for estimating or counting the number of people sleeping rough, the women in the three focus groups made four main points:

- Women were likely to hide for reasons of physical safety and to avoid harassment.
- Women could change their appearance, making themselves look male, as part of keeping themselves safe.
- Women avoided at least some homelessness services.
- Women may avoid areas where some other homeless people are likely to be, where there may be risks or tensions around drugs.

In terms of the locations where women sleeping rough were likely to be visible, non-homelessness services offering free food and other support were referred to. In Denmark and the USA, securing cooperation from services that offer things of assistance to homeless people (such as free food), but which are not used solely by homeless people, is part of the approach to counting homelessness.

**Key Points**

- Women reported being stigmatised, verbally and physically assaulted and the risk of violence and sexual abuse and violence while sleeping rough.
- The conditions of sleeping rough meant that women concealed themselves or kept moving at night. Women might also conceal their gender by dressing as men.
- Experiences of male violence and abuse led women to avoid services where men were present.
- The women defined their homelessness in terms of the absence of a settled, adequate, legally and physically secure home, not in terms of whether they had a roof over their head.
Existing Methods

There is no perfect method for counting rough sleepers or experience of homelessness in general. In part, this is because there are always some inherent limitations in statistical methods, whether it is traditional surveys or the combination of big data from administrative and commercial sources. There are also unique challenges in measuring homelessness, because the population is mobile, both in the sense of not necessarily living in a fixed place and because the composition of the population shifts as people enter, exit and re-enter it. However, while the data we can collect on homelessness may not be perfect, ensuring that the methods are as robust as they can be helps at least give us an indicative picture of the scale and nature of homelessness, while repeating studies over time, alongside longitudinal research, can give us a picture of how homelessness might be changing.

Street counts

The UK is unusual in counting people sleeping rough separately from other homeless people\(^\text{xx}\). A 2015 review of the homelessness and rough sleeping statistics for England reported the following\(^{75}\):

_Data on Homelessness and Rough Sleeping are collected and recorded by LAs in a range of different ways. The Rough Sleeping statistics are produced from a mix of actual counts and estimates and there are a number of challenges to accurate recording. DCLG needs to evidence for users its assurance arrangements and its judgements of the strengths and limitations of the statistics._

There has been an attempt to standardise counts of rough sleepers, involving Homeless Link\(^{76}\), the federation of homelessness organisations in England. The counts take place during one night. To avoid the risk that people begging or making use of the street, but not sleeping there, are inappropriately counted as sleeping rough, there is an emphasis on people who are bedded down or appear about to bed down and counts are conducted at points when the streets are likely to be relatively clear of people with homes to go to. The guidance notes that people may bed-down later at weekends, that the earliest time at which a count should start is midnight and that a 2am start time may be more appropriate in cities, with an expectation that the count be completed by 5am. Different rules can be used in rural areas, where counts can be conducted between dawn and 7am\(^{77}\).

Homeless Link provides ‘verifiers’ who can be present to check the validity of a count and counts are targeted on known ‘hot spot’ areas where rough sleepers are thought to be present, as resources to cover an entire geographical area are rarely available. Consultation with the Police, service providers (homelessness and drug/alcohol), faith groups, mental health services, local residents and businesses is used to establish where these ‘hot spots’ are. It is recognised that the counts will not record everyone in an area with a history of rough sleeping; in the 2017 report on the rough sleeper statistics, the following is noted\(^{78}\):

_There are many practical difficulties in counting the number of rough sleepers within the area of a local authority. It is not possible to cover the entire area of a local authority in a single evening, so counts will be targeted to areas according to local intelligence. Rough sleepers may bed down at different times meaning that some may be missed. Some places of rough sleeping may be difficult or unsafe for those conducting the count to access. For these reasons, the figures in this release are subject to some uncertainty. In addition to the difficulties in capturing an accurate number, various factors can affect the numbers of rough_
sleepers on any given night, such as the availability of alternatives such as night shelters, and the weather.

In practice, although efforts have been made to standardise and verify the rough sleeper counts conducted in England, a number of significant methodological limitations remain. Some of these are acknowledged, others are not, and they can be summarised in five main points:

1. Anyone who is a rough sleeper, but who is not sleeping rough on the night of the count will be missed. This includes long-term and repeat rough sleepers who are in short-term services such as night-shelters on the night in question, or who have made another short-term arrangement. As noted, there is some evidence that women experiencing rough sleeping on a long-term and recurrent basis may alternate between sleeping rough and forms of hidden homelessness. Women may also be sleeping rough and staying in refuges, which would not always record them as ‘homeless’ (see above).

2. In practice, places that are not designed for habitation, which may potentially contain people sleeping rough seeking shelter, are too numerous to include in a street count.

3. A count cannot in practice cover an entire area, the focus on ‘hot spots’ is a reflection of this. Anyone sleeping rough outside the designated areas will be missed.

4. Homeless people hide when they have to sleep out, sleeping rough is potentially dangerous. As was seen in the last section and is indicated by other research, women will very often conceal themselves.

5. The rules in relation to whether someone is ‘bedded-down’ or about to bed-down, miss anyone who is walking around, using all-night cafes, shops, bars and restaurants for shelter. People sleeping rough may also be in hospitals, train stations, riding around on public transport, and sometimes in Police custody when counts are being conducted and be missed for those reasons.

There may also be differences in levels linked to weather, for example when temporary shelters are opened during the winter months in some areas. Weather, in itself, is not a determinant of the levels of sleeping rough. People sleep rough because they have nowhere to live, are avoiding services, cannot access services and are unable to find somewhere to stay.

The reasons why this method will miss women sleeping rough are the same reasons why this method will miss at least some rough sleepers of both genders. However, research on women’s experience of homelessness and rough sleeping highlights the risks of sexual abuse and violence that they have to endure. The research provides evidence that women who sleep rough will often try to conceal themselves, whether in an attempt to stay safe from strangers or known abusers. This means that rough sleeper counts may be more inaccurate in terms of representing women than is the case for men, although this is an idea that would require testing to be certain if this is the case.

It is important that the issue of rough sleeping is recognised and monitored in some way, but from a statistical perspective, street counts have serious limitations which do mean they are always going to be somewhat inaccurate. The potential usefulness of street counts can be summarised as follows:

1. Counts may help indicate population trends. If there are more visible rough sleepers being observed by street counts over time, that may mean total numbers are also increasing.

2. Rough sleeper counts can also serve as a canary indicator about the state of responses to homelessness more generally, i.e. an effective, integrated and well-resourced homelessness strategy is in place, numbers recorded by street counts would be expected to be near zero and to remain there, rather than increasing.

\textsuperscript{xix} In the sense of a canary in a coalmine.
While there may be considerable inaccuracies in respect of counting women and possibly other groups of rough sleepers, repeated street count may give at least some indication of changes in population composition, e.g. more women and more young people began to be observed in street counts and surveys of people sleeping rough from the 1990s onwards.

**PIT counts**

Point-in-time (PIT) counts are used in Canada and the United States as the main method for enumerating homelessness. In both countries, homeless people are defined either as 'unsheltered' (which is broader than the definition used in the England rough sleeper counts - see section 1), or 'sheltered' (living in homelessness services), and are all included in the same PIT count. A PIT count is an attempt to measure all homelessness, including people sleeping rough and people using homelessness services.

In the USA, there is a clearer emphasis on attempting to count the entire extent of homelessness within administrative areas. There is not a single fixed method. Simple counts are used, but on the basis that the approach should try and get as close as possible to a census, not just conduct a limited exercise covering a limited area.

Various sample-based approaches can also be employed to undertake the PIT counts. Sample based surveys are designed to be sufficiently statistically robust as to enable projection (an estimation) of total homeless population size to be produced. This is fine in principle, although any sample survey (because it is not the entire population) is likely to contain at least some element of inaccuracy. In the case of homelessness, there is uncertainty about what the sample universe (the entire population from which a sample will be taken) actually looks like, which means that assumptions have to be made about what kind of sample would be representative. Even drawing a random sample is difficult because the location, nature and extent of the homeless population is not known.

It is possible to combine a street/service count and a sample-based survey, the latter being used to record demographics. Like the English rough sleeper counts, the PIT counts take place on a single night, which must be during the last 10 days of January.

While the American methods emphasise statistical accuracy, the US guidance notes that attempts to completely cover an entire area, focusing on ‘known locations’ (the same as the hot spot approach used for counting rough sleepers in England) and a random sample of areas are all acceptable. For unsheltered people, both a straightforward street count, described using the slightly odd sounding phrase, a ‘night of the count approach’, and/or a ‘service-based’ count, which includes the non-homeless specific services, such as soup kitchens or food banks, which homeless people (along with other low-income groups) use, can be conducted.

PIT approaches are also used in France, Spain and Italy, although on a less frequent basis, with surveys always being several years apart and not always covering all the country, e.g. smaller towns and rural areas may be left out. The methods are standardised to a greater extent than in the USA, but there are still some limitations:

- **People are missed.** They are missed if they are not observed because they are outside the area covered by the PIT count or are not visible to the people conducting the count. If the count is focused on emergency accommodation and other homelessness services, and/or incorporates other services (such as food banks and soup kitchens or free medical care centres) that people sleeping rough use, it will miss anyone who is not engaging with those services.

- **Women may be more likely to conceal themselves and avoid services.** If women are alternating between sleeping rough and precarious accommodation, that precarious accommodation may be the home of a friend, an acquaintance or family, not a homelessness service.
The time-limited nature of a PIT count means that people who are sleeping rough on a repeated or sustained basis will be missed if they do not happen to be sleeping out (and visible) or using services on the day that the count is conducted.

In Spain, the national survey has been criticised, for focusing on services used by homeless people and on areas with more than 20,000 people, as being an undercount. Some cities that have conducted their own counts of homelessness have reported higher figures than the national survey suggests. There is a broader point here, apparently small alterations in the definition of rough sleeping, changes to area coverage and the data collection points for PIT counts can produce apparent shifts in the population sleeping rough that are actually the result of methodological differences, not differences in population.

There are ways to modify PIT methodology, taking repeated counts, or counting over a longer period to try to compensate for the inherent inaccuracies that will occur as a result of using a cross-sectional survey on a single night. There are obvious resource implications as conducting a PIT count can be expensive, but the main question is determining the point at which running repeated exercises should cease. Given that the errors within a PIT methodology can occur on any night that it is conducted, repeating the exercise, or prolonging it, may not actually have a meaningful effect on the accuracy.

**Capture-Recapture**

Capture-recapture techniques are – literally – used to estimate the populations of animals in the wild. The approach is to ‘tag’ an individual when counted, to keep counting and to estimate the total population on the basis of how many times an individual is ‘recaptured’. In other words, if one ‘catches’ someone sleeping rough and then catches them again and again, the total population is likely to be smaller than if a lot of other people sleeping rough are ‘caught’ before any individual sleeping rough is recaptured. Capture-recapture has been tested in England.

When capture-recapture (also known as mark and recapture) is looked at critically, a number of methodological questions arise. The potential advantage is that it will provide a better estimate of the number of people sleeping rough in an area than a PIT count. However, many of the same limitations arise, in relation to the extent and nature of the coverage and the time period for which data are collected.

There is also the question of defining rough sleeping which was raised in the preceding section. If someone is ‘captured’ once, are they really a ‘rough sleeper’, compared to someone who is say, captured six or eight times over the same period, the answer might be thought to be no, but the reason why someone is only captured once might be down to geographical coverage and where the survey chooses to look for people sleeping rough. The inherent problems of counting people who move around physically, who hide, who move in and out of rough sleeping, who simply do not have the fixed point of a consistent address, are not removed by using this methodology.

Again, it is women experiencing rough sleeping who may be more likely to be missed by this approach, for the same reasons they may be missed by street counts and PIT counts.

There are also some ethical questions here. While it is arguable that capture/recapture may give a better idea of numbers than a street count or PIT count, there is a worrying aspect to it, which centres on how it treats the people being counted. The idea of being tagged, monitored and tagged again, could be seen as dehumanising, it is very different from an ordinary citizen being asked to complete a survey or a census form.

**Plant-Capture**

Plant capture is a modification of PIT methodology. Here, a group of fake homeless people or rough sleepers, literally ‘plants’, are placed in services or on the street at the time a PIT count is undertaken.
The rate at which the ‘plants’ are counted and are not counted can be used to provide an estimate of the degree to which the PIT is accurate. For example, if 34 out of 100 plants are not counted, the PIT survey might be missing around 34% of the homeless population it is designed to count.

Plant-capture sounds cleverer than it is. One issue that researchers have identified is whether the plants look sufficiently homeless (if they do not, they are not counted), or indeed whether (in line with stereotypes of homelessness) there is a hyperrealist effect, i.e. the plants look more ‘homeless’ than real homeless people and are consequently counted more frequently than the people who are actually sleeping rough or experiencing homelessness. However, again, the issues of limited coverage and limited time are not addressed by this approach, the basic problem of not deploying enough people over a big enough area, in enough places where people might be sleeping rough for a sufficient time, are not overcome.

**Longitudinal Sample Surveys**

Surveys that track experience of homelessness over time are unusual. It is difficult and therefore expensive to maintain contact with a large sample of people at risk of homelessness over time, watching them enter, experience, exit and sometimes return to homelessness. An important example of such a study is the Australian Journeys Home survey, which collected data on 1,700 people who were identified as homeless, or as in insecure housing, over two and a half years. These data can be extremely useful in understanding why homelessness occurs and what combination of services and other factors can be most important in preventing homelessness and in stopping homelessness when it has actually happened. In the UK, research led by Maureen Crane tracked over 200 single homeless people over five years, tracking long-term outcomes.

In terms of counting homelessness, like qualitative research, while longitudinal sample surveys do not tell us about the overall numbers, they have the potential to tell us about the experience of homelessness in ways that enable us to modify, enhance or replace systems for counting homeless people to get a better idea of the overall numbers. A longitudinal sample survey can tell us about trajectories through homelessness, which might identify important pathways for homeless people that are being missed by existing methods for counting homeless people. The data can also give us an idea about questions like the extent to which homeless people might avoid certain services or opt not to go to particular areas.

**Prevalence Surveys**

Prevalence surveys measure experience of homelessness across the general population of a country, they have been conducted in France and in the UK, among other countries. Prevalence surveys are undertaken among people who are housed and ask them questions about whether they have ever been homeless and what the experience was like. Most are not dedicated surveys but are in the form of additional questions added to an existing social survey, designed to explore wider questions across the whole population. These data can be useful because they give a picture of what total experience of homelessness is like across the entire population of a country and, by extension, provide a reference point against which existing methods for counting people sleeping rough and homelessness can be compared.

There are some limitations to these data. The first is that they tend to be household based, i.e. collected from housed people, rather than from everyone in the population in a way that includes people without settled housing, which might mean long-term and repeatedly homeless people will probably not be recorded. The second is that experience of rough sleeping, in many economically developed countries like the UK is actually extremely unusual,
when you look at levels of rough sleeping relative to total population, albeit that there are reasons to think that the existing statistics may be an undercount. This means that a general survey, asking questions about experience of homelessness, may not pick up very many people reporting experience and that may limit what can be done with the data in terms of statistical analysis. Again, as with qualitative and longitudinal sample survey data, information on patterns of experience of homelessness from prevalence surveys may help us shape and improve our systems for counting current levels of rough sleeping and homelessness.

**Administrative Data**

Administrative data offers possibilities that are not available through survey methodologies. Data like that recorded by CHAIN can give a clearer picture of the nature and extent of rough sleeping, the patterns of rough sleeping and at least some information on gender dynamics through the capacity to track people over time.

The key limitation of these data has already been noted, people sleeping rough are recorded when and if they use services (or are located by outreach workers, in the case of CHAIN), and specifically those homelessness services that are linked into the shared database. When systems are, effectively, national, as is the case with the Danish data on people using homelessness services\(^{84}\) and the PASS database system used in the Republic of Ireland\(^{85}\), the worry that people are missed because they are not in contact with services is lessened, because more services in more areas are included.

However, the risk that someone who does not use homelessness services, or who may - as is known to be the case for at least some homeless women – actively avoid those services, is always there to some extent. In America, one study looking at deaths among homeless people in Philadelphia, a city which has eight outreach teams and over 5,000 emergency shelter beds, reported that 24% of the 141 homeless people, who had died over a two year period, had no history at all of homeless service contact\(^{86}\). Conversely, that same study indicated that 76% of that population had accessed services and had been recorded, which could be a more representative picture than a street count or PIT count can achieve.

The great potential for administrative data lies in the scope for merging information across administrative systems. In essence, this means that a person sleeping rough can be ‘tracked’ across their contact with homelessness services, the NHS, local authorities (housing options teams, social services), Jobcentre Plus, social landlords and, where relevant, with the criminal justice systems. There are interesting experiments in Scotland, combining NHS Scotland data with the data collected for the Scottish statutory homelessness system\(^{97}\), but it is in America that the most interesting developments are occurring\(^{98}\).

The capacity to track people across systems creates the potential to understand homelessness like never before, because the chances are that homeless people will have at least some contact, with charitable and publicly funded services, on a regular basis. Data merging creates a much bigger ‘net’ than using administrative data from one source, if there is a means to identify specific individuals as homeless, across a range of services, then the chances that people sleeping rough will be recorded somewhere increase. So, for example, a woman alternating between sleeping rough and staying with friends or acquaintances, who does not use homelessness services, might tell a hospital where she is being treated that she is homeless, be recorded as such, and then both her existence and her pattern of contacts with other services like Jobcentre Plus/DWP, or a local foodbank, can be recorded. Denmark, at national level, and the USA, in terms of counties within States, some States and some major cities, have both been able to do this.

However, there are some challenges and some moral questions to consider here. In the UK, in terms of GDPR legislation around data protection and privacy, it is difficult to combine administrative data. The process of securing appropriate permissions is complex and expensive, and while there are good reasons why these systems are in
place, there are real obstacles to combining data in ways that are potentially useful to both understanding homelessness and to enable the right support to reach vulnerable people experiencing or at risk of rough sleeping.

In the USA, combination of data does occur, but it is only shared with researchers as fully anonymised datasets that are only accessible remotely. Some sensitive data may also not be accessible via the Internet but are stored on systems that must be physically visited to run analyses and that do not allow a researcher to take any data away with them.

Information must also be accurate and consistent for data merging to work, i.e. ensuring that a woman or man sleeping rough is properly recorded as doing so by non-homelessness services like a hospital, or if they have contact with Jobcentre Plus or the Police. Systems must be consistent if the data are going to be meaningful and ensuring this across a range of bureaucracies and services is more challenging that ensuring consistency within a single database.

The moral questions centre on the ethics of this kind of data collection. The State might know much more about poor people, including those that experience sleeping rough and homelessness than it does about most citizens. While there is scope to use these data positively, it is also possible to use them in other ways, targeting homeless people for reasons that may not, from the perspective of those homeless people, be advantageous or helpful to them. There are also the risks about how services and individuals may react when someone's file contains a note that they were a ‘rough sleeper’, which may place them at a disadvantage.

Another concern in relation to homeless women who are experiencing rough sleeping, specifically if their experience is a mix of hidden homelessness and rough sleeping, with very restricted service use, is that the data may still only be partial. Data combination, used with some success in the USA,

has been employed for populations of lone ‘unsheltered’ and ‘sheltered’ adults who tend to be male, although there have been experiments with homeless families (as in the UK this group contains many lone women parents).

**Multiple Data Points**

No single method of counting people sleeping rough is likely to give an accurate picture of women’s experience of sleeping rough. This is in part because there are inherent problems in trying to count people sleeping rough of either gender, but it also reflects a failure to look for women or to account for the possibility that their trajectories through homelessness and rough sleeping may differ from those of men.

Denmark combines methods to better understand homelessness, using a mix of surveys and administrative data collection. Neither method is perfect, but the survey data provides at least some coverage of those people experiencing homelessness who might be missed because they do not use homelessness services sharing administrative data. Data from the client registration system in all Danish homeless shelters are used alongside a week-long survey in which all services and systems likely to have contact with homeless people are asked to complete a questionnaire about the homeless people using their services.

**Predictive Analytics and Machine Learning**

Machine learning techniques employ learning programmes that explore statistical data in new ways. In theory, these systems, given enough high quality data, are better at seeing patterns, predicting and classifying than the programmers who built them, with capacity set to increase exponentially. In the USA, there is work underway to predict homelessness and chronic homelessness, the logic being that potentially associated with increasingly high and complex support and treatment needs, see Section 3.
homeless people can be found and their homelessness prevented, before it even occurs\textsuperscript{102} and to explore the effectiveness and resources devoted to homelessness services\textsuperscript{103}.

Predictive analytics, using machine learning, in theory, does not count people sleeping rough, instead these systems have the capacity to predict who \textit{will become} a rough sleeper and stop it from happening, the count is not of actual rough sleepers, but potential rough sleepers, based on bringing together multiple data points and letting a learning computer loose on them. There are reasons why this may not work, at least why it may not work well initially, some of which centre on data quality, extent and availability. AI (artificial intelligence) systems employed for predictive analytics will also tend to have access to data that record individual characteristics, needs, choices and experiences, whereas the cause of homelessness and the reasons it is sustained may be at least partially structural, such as funding cuts to services. Much depends on how much data the computers can be given and how wide ranging those data actually are. Nevertheless, these technologies are real and will start to influence how governments try to respond to social problems like homelessness, which if it can indeed be predicted, may be reduced. This could mean measurement of homelessness shifts towards predictive modelling and targeting of potential homelessness, within a much more preventative policy approach.

\textbf{Key Points}

\begin{itemize}
  \item Street counts can help us understand changes in rough sleeping over time and can also highlight the overall state of policy and service responses to homelessness.
  \item Both street counts and point in time (PIT) counts may miss homeless people who conceal themselves and/or are not present in services, are not present in areas targeted, or who are often sleeping rough, but not at the point at which data are collected.
  \item Women may be more likely to conceal themselves, avoid services or not be in areas where counts are conducted.
  \item Surveys can be used to estimate and project population numbers, but in the context of uncertainty about what the sample universe (the entire population of homeless people) actually looks like, again may lead to inaccuracy.
  \item There is not clear evidence that modifications to PIT counts, such as plant-capture and capture-recapture approaches, overcome the limitations inherent in methodologies that only cover limited areas for a limited period.
  \item Longitudinal sample surveys and prevalence surveys can help understand the nature of homelessness and the trajectories that people take through homelessness, which can help with designing systems for counting current levels of homelessness.
  \item Administrative datasets, like CHAIN and, in particular the scope for using ‘big data’ approaches that combine multiple administrative datasets has the potential to build a large, longitudinal and comprehensive dataset on people sleeping rough.
  \item There is evidence that women avoid some homelessness services. Administrative data is not collected on women and other populations who do not use the services collecting data.
\end{itemize}
7. Improving the Evidence

Introduction

This review has considered the strength of the evidence on women’s experience of sleeping rough, reviewing existing research and looking critically at survey and data collection methods for enumerating the rate at which women sleep rough. This final section considers the findings and discusses the ways in which the evidence base on women’s experience of rough sleeping and homelessness can be improved.

The Case for Exploring Rough Sleeping

Rough sleeping, as a definition and measure of homelessness, can be seen as being politically useful in three ways:

- The problem of homelessness can be associated with high support needs rather than systemic failures, i.e. people can be described as homeless ‘because’ of their behaviours, addiction and severe mental illness, rather than because of cuts to mental health services and a lack of affordable, adequate housing supply offering reasonable security of tenure.

- Focusing on rough sleeping makes the problem of homelessness appear smaller. Highlighting that there were 4,751 rough sleepers at the last count in England\textsuperscript{104} is politically damaging in some respects, but is arguably less damaging than the 61,000 statutorily homeless families with dependent children in temporary accommodation at the same point in time, which received a lot less political and media attention\textsuperscript{105}.

- People sleeping rough can be presented as a distinctive group in a cultural and political sense, as ‘different’ from ordinary citizens, which makes their presence less worrying to the general population\textsuperscript{106}. This is much more difficult to do with groups like statutorily homeless families, who resemble nothing so much as other low income and poor families who are not homeless\textsuperscript{107}. By being on the street, by looking ‘different’ and by being portrayed as ‘different’, a focus on rough sleepers helps reduce any popular fears that ‘homelessness can happen to anyone’\textsuperscript{xxv}.

These arguments can be countered by asserting that scarce resources must be concentrated on the most extreme forms of homelessness, with rough sleeping, when it is recurrent or long term, representing one of the most potentially damaging experiences that someone can have. There are a number of difficulties with such an argument. Resources are ‘scarce’ because of a series of

\textsuperscript{xxiv} There is some evidence that support needs, including addiction, arise during homelessness and as a consequence of homelessness and that people who have complex support needs experiencing recurrent and sustained rough sleeping often develop those needs, at least in part, because they cannot quickly or sustainably exit homelessness, see: Pleace, N., 2016. Researching homelessness in Europe: theoretical perspectives. European Journal of Homelessness, pp.19-44. http://www.feantsa.org/download/10-3_article_11612162762319330292.pdf

\textsuperscript{xxv} In practice, homelessness is much more likely to happen to some people more than to others. While there is always the theoretical possibility of homelessness, the existing evidence all shows a clear association between poverty and the risk of homelessness. Low income people are at greater risk of homelessness. See: Busch-Geertsema, V.; Edgar, W.; O’Sullivan, E. and Pleace, N. (2010) Homelessness and Homeless Policies in Europe: Lessons from Research, Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities. http://noticiaspsh.org/IMG/pdf/4909_Homeless_Policies_Europe_Lessons_Research_EN.pdf
political decisions to cut budgets, set income
taxation at a certain level and impose only limited
taxation on inherited wealth. The UK has taken
political decisions to spend less on social protection
(population welfare) relative to some other comparable OECD countries, with equivalent or lower levels of economic prosperity. Rough sleeping in England has spiked as expenditure on homelessness services has been cut, in 2014, the annual survey of homelessness services in England reported 38,534 bed-spaces in homelessness services, in 2017, there were 34,497. When serious public spending was directed at rough sleeping - when the UK economy was rather smaller than it is now - under the Rough Sleepers Initiative (RSI) from 1990-1999, numbers fell. ‘Scarce’ resources have gotten rather scarcer even though the economy is larger than it used to be.

The point that successive governments have defined the social problem of homelessness in terms of ‘rough sleeping’ to make homelessness seem smaller, and confined to people who are ‘different’, has been made many times. It has also been argued, again for some time, that rough sleeper counts serve primarily as a means of distracting attention away from the real scale and significance of homelessness as a social problem.

There is something in these arguments. Other countries do not draw the distinctions between rough sleeping and other forms of homelessness that are made in the UK. There is targeting, but it is on a different and arguably more logical approach, focusing on the long-term and recurrent homelessness that is associated with high support and treatment needs, which is clearly very damaging at the human level and which is not confined to (although it includes) people sleeping rough.

Yet while it is always important to recognise all the dimensions of homelessness and to never restrict discussion and analysis of homelessness to people sleeping rough, there are dimensions to sleeping rough – and the experience of women sleeping rough – that do require specific recognition and analysis. The evidence that is available strongly indicates that we need to be concerned with the recurrent and long-term experience of homelessness and rough sleeping, rather than focusing simply on homelessness occurring in the open.

Rough sleeping, where it is recurrent or sustained, is almost certainly the single most damaging form of homelessness at the human level. As is graphically illustrated in Section 4 of this report and also in the wider evidence on women’s experience of homelessness, the physical danger, sexual abuse and harassment and sheer stress of being on the street is highly damaging to women.

These risks of homelessness for women are not confined to sleeping rough, women can be unsafe, unwell and at risk when they experience homelessness in other ways. Nevertheless, sleeping rough constitutes a horrendous situation for a woman and may present unique and acute risks to her wellbeing.

Improving the Evidence

Existing data suggests that women do not sleep rough as often as men, but there is reason to believe that systems for enumerating people sleeping rough may undercount women. Beyond this, there are good reasons to think that there is a general undercount of rough sleeping in the UK.

The results of survey methodologies, from street counts through to ‘plant-counts’ do not accurately enumerate sleeping rough. As noted, these surveys do have their uses, they can point to possible trends in the scale and nature of the population sleeping rough and the ‘canary indicator’ role, i.e. if a homelessness strategy works well, there should be next to no-one sleeping rough visible to a street count or PIT count, is also important. However, there is a need to look critically at existing methods, to think through how accurate they are and, in particular, to consider the possibility that many women sleeping rough may not be being counted, rather than assuming that existing methods are
giving an accurate picture of gender among people sleeping rough.

Many of the things the women who participated in this research told us have been reported by earlier research or by academics taking educated guesses at potential flaws in the evidence. That they confirmed the expected limitations of existing survey methodologies, i.e. that women hide and avoid at least some homelessness services is not surprising, although in sharing their experiences of changing their appearance to conceal their gender and sometimes avoiding ‘hot spots’ of rough sleeping, they added further reasons to doubt the veracity of rough sleeper counts.

The data points that have been used to estimate and enumerate homelessness, the physical counts and the collection of administrative data from homelessness services both seem likely to undercount women’s experience of sleeping rough. It is inherently difficult to count people experiencing hidden homelessness as well, because they are hard to find, surveys do not tend to draw a sufficiently large sample to find them in any numbers, they are mobile and - again – if they are not in contact with services, they cannot be ‘seen’ by administrative systems.

Data merging, across systems, enabling us to see homeless women, including those sleeping rough, whenever they have contact with both homelessness and non-homelessness services is, theoretically, a way forward. There are logistical barriers and the data protection legislation must be carefully followed. However, the presence of these barriers is not a reason not to try to combine data in new ways and, in the meantime, there are clearly ways in which our evidence base on women’s homelessness and their experience of rough sleeping can be improved.

Observational research on women’s experience of rough sleeping is possible and the way to do that is to work with women who have had the experience. Researchers need to know where to look and how to look. There are some clues even in the small amount of primary research conducted for this short review, women use services that help them out, but which are not designed primarily for rough sleepers, such as services offering free cooked food or food banks. If we cannot find and talk to enough women with experience of sleeping rough on the street or in homelessness services, we can work towards finding them and understanding their experiences in new ways.

Equally, we need to know more about women’s experiences and their lives when sleeping rough. Even some recent research on homeless people with complex needs, who tend to sleep rough, defaults to the study of men, on the assumption that there are few women, and while some useful work on women and gender issues has been done, it is on small groups of women, which were found by studies expecting to find a predominantly male population. Dedicated research on women’s homelessness and women’s experiences of sleeping rough is still very much the exception.

The human dimensions of women sleeping rough must never be neglected. The women, with their varied experiences and needs, must not be reduced to stereotypes, analysis must begin with understanding and respecting their viewpoints and opinions. Reducing rough sleeping to stereotypes is what caused us to miss the gender dynamics in this form of homelessness to begin with.

In studying women sleeping rough – indeed everyone sleeping rough – it is important to recognise that homelessness is not a fixed state. Women will move in and out of rough sleeping and there is evidence that they may have a sustained experience of precarious accommodation, such as hidden homelessness, which is interspersed with rough sleeping. To understand rough sleeping among women, we need to understand the population at risk of rough sleeping, not simply those who are sleeping rough at any one point. Here, some of the developments in predictive analytics may prove interesting.
Recommendations

Women are clearly sleeping rough. There is reason to suspect that our existing data collection and research methods are underrepresenting the extent of women’s experience of sleeping rough. There is clear scope to improve data.

Women who sleep rough are likely to often be experiencing other forms of homelessness. Women at risk of recurrent and sustained rough sleeping, as well as those currently experiencing rough sleeping, should be the focus of further research and policy development. A general review of homelessness data to assess the accuracy of the representation of women is recommended. In particular, methods that can track the trajectories/pathways of women through homelessness should be developed.

Data merging, involving health, social services, social landlords, the criminal justice system and non-homelessness services that women sleeping rough may use, such as food banks, represents the long-term solution to better understanding this form of homelessness. Logistical and legal barriers exist, but there is no reason not to work towards ways of anonymously combining data. It is recommended that large scale data merging is explored to improve data on rough sleeping, with an emphasis on ensuring women are accurately represented.

It is recommended that a new system for data collection on homelessness and rough sleeping, using multiple data points is developed, ensuring women are represented across the multiple data points used to measure rough sleeping and other forms of homelessness.

As data on homelessness and rough sleeping improve, it is recommended that these data are employed to look critically at existing homelessness services as we begin to understand more about women’s needs, characteristics and experiences.

Women with experience of sleeping rough are not a single ‘group’, the dangers of oversimplifying homelessness have led to a situation where women’s rough sleeping is likely being undercounted. It is recommended that new data collection is actively shaped by the experience and opinions of women who experience rough sleeping and homelessness, to ensure it fully reflects their experiences.
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