

The experience of Blackpool's Homeless Community during the COVID-19 pandemic





Over the last year society has struggled to contain and combat the COVID-19 pandemic. This has affected everyone and has changed the way we live, work and socialise. As with many health related issues this has disproportionately affected those living with the most need, furthering disadvantage and highlighting the disparities and complexities faced by this community.

Changes in legislation and guidance encouraged and supported local authorities to respond quickly to the crisis, and act on behalf of those who were homeless. However this presented a range of challenges including food provision, laundry services, digital exclusion and isolation alongside the challenge of providing adequate support for those with multiple and complex needs.

It's important to recognise that not everyone's experience will have been positive and the need for the system, including councils and health and care organisations to respond quickly, means that in some cases individuals felt a lack of control of their own lives. In order to acknowledge and learn from these experiences we've worked alongside NHS England & Improvement (NHSEI) and community partners to listen and collect the stories of 100 people in Blackpool who experienced homelessness during the pandemic. The stories have been presented here verbatim, as we felt it was important to share these powerful, real life experiences. They are the true, unaltered voice of a community living through a local COVID-19 response.

We hope that through this piece of work we are able to identify and recognise areas for further development and partnership work across the town to improve services and the future outlooks for our community.

Arif Rajpura

Arif Rajpura,Director of Public Health, Blackpool Council

Linda Charles-Ozuzu

Dr Linda Charles-Ozuzu,Regional Director of Commissioning NHS
England and NHS Improvement - North West

Over the last 18 months the COVID-19 pandemic has changed the way we live, hugely impacting people all over the world. The UK has been no different, with country wide lockdowns and restrictions put in place in order to protect lives. These restrictions have left their own mark on communities, often highlighting and exasperating pre-existing struggles. This piece of work, jointly developed between Blackpool Council and NHSEI was undertaken to shine a light on the real life impact of the pandemic, highlighting the experiences, challenges and barriers within communities that are often seen as vulnerable, at risk and/or highly susceptible to health inequalities.

These 100 Voices are real life stories of local people in Blackpool that have been narrated to us by people experiencing homelessness during the pandemic in Blackpool.. Key themes have been drawn out of the stories provided and quotes are used throughout to reinforce the messages, views and perceptions of those impacted. These stories might make for difficult reading, but they are incredibly moving and honest. I implore each of you to take some time out to read these stories, a step back to reflect on the person at the other end. The report makes recommendations based on what we've heard, before setting out some immediate next steps.

In order to encourage the community to openly express their feelings and stories we worked in collaboration with key frontline organisations across the town who have over the years built trust within the communities. All stories taken we anonymised and where issues were raised, they were brought to the attention of those who could step in and resolve.





Contributions

In order to gather these stories we've worked in partnership, linking in with trusted community providers in order to reach those individuals who are often described as 'hardly reached'. We couldn't have done it without them and moving forward plan to continue this partnership, taking forward lessons learnt from the stories provided to shape local service delivery for the better.

A special thanks goes to the following organisations for their time and support in helping to ensure the voices of the homeless community are heard:



Street Angels – run the emergency bed unit on behalf of Blackpool Council. They also undertake outreach and provide hot food.



Streetlife – works with vulnerable young people many of whom are experiencing homelessness. They operate a day centre, night shelter and provide additional support including counselling.



New Comfort Zone – Run weekly drop ins, providing food and support such as survival bags and signposting to other services for more complex issues



Empowerment – run a Lived Experience Team who work to engage and support people working in a person centred way.



The Ashley Foundation – provides accommodation, support and education in order to help residents live independently.



Blackpool Community Homeless Project

- works to rehome people experiencing
homelessness in Blackpool, providing
household goods, food and support.



Blackpool Coastal Housing – is a housing association who during the pandemic provided dispersed housing and support as part of rehoming plans.

Additional thanks to:



Blackpool Council – for coordinating the partnership and facilitating the process, providing support to those front line organisations and for the commitment to change based on the outcomes of this report.



NHS England and Improvement – for funding the project and recognising the cathartic impact sharing a story can have for the individuals alongside the commitment to use this report as a platform to discuss, explore and improve health inequalities.



The Homeless Community – a particular thank you to the 100 individuals who were willing to share their stories in order to evoke change. When facing difficult times it can be a daunting experience to share such personal information but the positive impact their story can make on future service delivery shouldn't go unrecognised.

Over the last few years the levels of homelessness in Blackpool has remained consistent, with Blackpool Housing Options identifying 220 rough sleepers per year with a further 660 at risk of rough sleeping. Based on information gathered during the COVID-19 pandemic it is anticipated that there are a further 60-70 people rough sleeping or at risk of rough sleeping in the Fylde and Wyre areas.

Looking at the national picture we know that those suffering from homelessness are more likely to have long-term health and mental health problems, and are more likely to experience issues with drugs, alcohol and smoking. Disproportionately affected by changes in system delivery, homeless people are also recognised as heavier users of health services when compared to the general population.

The evidence shows that at risk groups such as the homeless frequently experience health inequalities which manifest through, for example, challenges with accessing health and care services at the right time in the right location. This, in-turn leads to them becoming more vulnerable and susceptible to further health and care inequalities.





It is worth noting that when referring to homelessness within this document we mean any individual who throughout the pandemic experienced life with no permanent address. This includes individuals who sofa surf, live in emergency accommodation, are classed as intentionally homeless and the street homeless.

These definitions are provided to help you understand the landscape in which the homeless community operate. During the pandemic an 'Everybody in' approach was taken to protect those most vulnerable. This meant that irrelevant of an individual's circumstance, eligibility or local connection they were provided accommodation and all the additional wrap around support.

Homeless - an eligible household is considered statutorily homeless if a local authority determines that the applicant does not have a legal right to occupy accommodation that is accessible, physically available and reasonable to live in.

Intentionally Homeless – Someone who following a homeless application and eligibility for the Relief Duty have knowingly or deliberately done something that has caused them to lose their accommodation.

Sofa Surfers - people who move from one friend or relative's house to another, sleeping in whatever spare space is available e.g. a floor or a couch. People generally stay with someone for a few days before moving on, but it can be a night by night arrangement.

Rough Sleeper/Street Homeless - 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 street, in tents, doorways, parks, bus shelters and encampments). This includes people in buildings or other places not designed for habitation (such as stairwells, barns, sheds, carparks etc.).

The above organisations collected 100 stories from this cohort over a 4-month period during the pandemic. These stories were then reviewed to understand what the key themes were for this group (shown in the narrative below). Understanding this narrative and themes is of vital importance as it will help us to shape services and undertake changes that will make a direct, positive impact on homelessness.

We identified seven themes that ran throughout the 100 stories provided. These have been summarised and representative quotes included to bring the theme to life. Quotes have been taken verbatim and provide a snap shot into the life of that particular individual at that moment in time.

For context, the split of stories collected are 26 female to 74 male (35% female). The background of most interviewees as White British represented the make-up of the homeless population in Blackpool. Throughout the stories, mental health was referenced the most followed by housing, community support and then hope. Other themes such as employment, education and access to services were also referenced although to a lesser degree.

One of the more unexpected findings across the 100 voices was the limited reference to accessing the more traditional health services such as GP's and A&E. This is particularly interesting given the significant rate of presentations usually experienced by those traditional health services by the homeless community. This could suggest that the presentations aren't necessarily made due to a specific health need and rather could be symptomatic of a need for more holistic and person centric support.





Drug and alcohol related comments were made throughout a high proportion of stories, often combined with links to the impact on individual mental health and need for additional support. With a higher proportion of the homeless population taking drugs (36%) compared with the general population (5%) the context surrounding these stories is imperative to driving forward improvements within a service that has a large proportion of homeless customers.

The majority of stories highlight the difficulty individuals faced when attempting to connect with services throughout the pandemic due to the changes in service delivery. The majority of prescriptions were moved to less frequent pick up and face to face support was limited. With the mandate made to house everyone, accommodation housed a mixture of residents with some in recovery, others still in active use and some with no previous drug or alcohol history. Those living in recovery and just starting out found the mixture of people at various stages in their journey difficult. Others found that with stable housing they were able to focus better on resolving issues in their lives and focusing on recovery, employment and building relationships.

Drugs and Alcohol

"I drink because I have nothing to do and I can't go anywhere"

- Female, 21 years old

"Recently I moved to a local hotel where my life has transformed. I feel that for the first time since I can remember I have a chance to rebuild my life. I am making every effort to stay 'clean' and make a determined effort every day to make my life better."

– Male, 45 years old

"The hotel was full of drug-dependent street guys and girls. I was a recovering heroin addict as well as any other substance you could misuse by either sticking it up your nose, in your mouth, down your neck and in normal years I would have been recalled back to prison for mixing with the people I was now being ordered to live and associate with."

- Male, 48 years old

"Being here has opened my eyes and made me realise I do not want to end up an alcoholic and living on the streets."

- Female, 36 years old

"I have been plagued by depression and I've been down some dark paths. I have resorted to drugs and thought about suicide. It is not a nice thing."

– Male, 34 years old

"It's had an effect on my mental health which caused me to go back and take drugs which lost me my home and job."

- Male, 27 years old



As can be imagined from a report regarding homelessness, housing was a key theme throughout the stories with reference made to some of the existing difficulties faced by Blackpool including poor quality private accommodation and a number of references to 'sofa surfing' and staying with friends.

Throughout the stories, mental health is referenced with the overall theme being positive in relation to long-term, stable housing and its impact on mental health. However it is worth noting that for those individuals in short-term accommodation and without a clear next step, the impact of being placed in temporary accommodation housing has had a negative impact on not only mental health but physical health in relation to healthy weight.

Social connection was also referenced heavily, with those in hostels or shared supported accommodation finding a benefit to being part of a community and shared support. Females interviewed had an overall more positive outlook in relation to the wider impact which stable accommodation can have, specifically mentioning time to reflect and feeling safe.

It is worth nothing that throughout these stories there seems to be a lack of understanding about the 'local connection policy' with those who moved to Blackpool from out of area feeling frustrated by a lack of support from the council but also a sense of belonging and support from the wider community.

Housing

| "Slum la | andlord | s is all | we can | expect for | our lot." |
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- Male, 48 years old

"...it was impacting heavily on my finances because obviously I don't like sleeping on the streets so I was just putting myself in cheap hotels, B&B's and stuff like that...it was like, quite hard, like you couldn't eat, well cook at all, in the hotel."

- Male, 32 years old

"...but the pandemic overall was quite positive for me like, cause it got me housed."

- Female, 39 years

"I was staying with friends like, but when lockdown was announced and stuff and it got serious, like, no one wanted to let me stay, like they couldn't let me so I was stuck like."

– Male, 39 years old

"...gave me a feeling of belonging which had been seriously lacking in my life."

- Female, 56 years old

"...the staff there are very supportive and understanding about my condition."

- Male, 34 years old

"Social distancing in the hostel is different so my 'bubble' has just got over 30 people in it. This is helpful as I can socialise with the other residents. If this wasn't possible I think my mental health would suffer further."

- Male, 30 years old

"...the staff there are very supportive and understanding about my condition."

- Male, 30 years



With the pandemic forcing services to change the methods and ways in which they engage and work with customers it's not surprising that access to services came up as a reoccurring theme. Like many of the general population, the homeless community struggled with changes to service provision. This was further exacerbated by a lack of information available with the majority of national changes being communicated via daily TV briefings.

Frequent changes in messages meant that services had to adapt and change delivery at short notice. With the majority of the homeless not consistently connected with services and the majority of face to face services delivered remotely it was difficult to communicate those changes effectively and this caused confusion and anxiety within the population. Outreach teams and partners were key in getting messages out but with daily changes, without daily contact people were left behind. This situation added to pre-existing anxiety issues, and for many with shops and businesses closing also cut off support supplies provided by the general population. It's worth noting that some of the changes to service provision such as the impact of joint working and broad holistic advice has been positively received with a request for this information sharing to continue showing a real desire from the community to help shape delivery and work together to resolve issues.

Access to services / Information Sharing

". I've found it difficult getting in touch with services as many of them were closed due to Covid."

- Male, 32 years old

"I think the support for the homeless since the pandemic has been a lot better. Giving good advice, leaflets on where to eat. But that support should have always been there but the streets are full of bid workers advising the homeless and pointing them in the right direction – this should continue"

- Female, 48 years old

"There was no information about where to go for help, no notices, no leaflets. I had no mobile phone."

- Male, 59 years old

"I was scared to talk to people because of the distancing thing so didn't get information about things. Scared to get close and ask."

- Male, 26 years old

"There are regulations that I can't keep up with, they change and I don't know."

- Male, 34 years old



The pandemic had a positive impact on local joint working with the council taking a facilitation role and local organisations coming together to help meet need and resolve issues in a collaborative way. Links to various support services were made throughout the stories with the majority recognising and thanks organisations for the various support received. This included food, care parcels, support with applications forms and benefits and most notably regular contact.

Various organisations were mentioned throughout the 100 voices, including both statutory and community organisations. This showcases the positive impact partnership working can have on ensuring the homeless population have access to a variety of services and support. It was clear that for those individuals linked in to a community based organisation, the relationship had significant benefit. For those who didn't hold a relationship with local services, access to broader more holistic support was difficult with complaints made about digital access, forms and difficulty with more corporate processes.

The more intensive support community organisations are able to provide appears to help the homeless population to settle and make positive changes to their lives. Reference was also made to more informal community support through the goodwill of the general population and the positive impact these relationships can have to the homeless community.

Community organisations/support

"I've lost regular contact points like shop keepers and community organisations where you could see and talk with familiar faces. Isolation creeps in and you don't know who to contact."

- Male, 40 years old

"8 months on and I am living in a flat, have a girlfriend, walk 4 miles a day. I could not in my wildest dreams have thought I'd be here, and it's all thanks to street angels"

- Male, 46 years old

"like my support network wasn't there. Like the library wasn't open, at the time gyms weren't open"

- Female, 56 years old

"To be honest, if it weren't for the food banks and other projects I would have starved to death or turned to crime; if it's a case of survival you may have to do that."

- Male, 34 years old

"The police helped me to get in to a council run hotel, which I was grateful for but once again, everyone was wearing face masks."

- Female, 44 years old

"Any group offering support has been priceless. I couldn't manage without you."

- Male, 48 years old

"To be honest, if it weren't for the food banks and other projects I would have starved to death or turned to crime; if its a case of survival you may have to do that."

- Female, 39 years



Despite the huge impact of Covid and clear references to its impact on health, hope ran through as a key theme, with individuals reflecting on some of the opportunities presented by the pandemic. Stories spoke of the importance of hope while also exploring how time with less pressures to achieve everything all at once has allowed many to focus and reflect on their future plans.

References to hope were often mentioned alongside other themes such as the stability of housing. While many spoke of poor mental health due to isolation it is positive to see the continuation of an individual's journey and the positivity increase despite difficulty.

These responses highlight that given time, support and stable housing, our many of our homeless population start to look to the future with hope, making positive plans around education, relationships and connecting with their community.

Hope

"After I got through the worst of my illness, I felt I could 'be strong' and start to 'help other people'. The covid pandemic made me look outside myself and be more aware of others suffering."

- Male, 49 years old

"During lockdown it has given me tie to think about my life and where I want to go. I have had a good look at myself and this time has made me realise I want to make something of my life."

- Female, 19 years old

"On the plus side COVID has made me look at my life in detail. It has allowed me to slow down and think about what I want to achieve. I have stopped taking drugs and reconnected with the world."

- Female, 33 years old

"I moved back in to the hostel and being around people has made me feel so much better. I am now feeling hopeful again for when things start to open up"

- Male, 34 years old

"I feel that for the first time since I can remember I have a chance to rebuild my life. I am making every effort to stay 'clean' and make a determined effort every day to make my life better."

- Male, 45 years old

"...now I've got my own little place sorted, it's a bit better like, you know what I mean? I can kind of cope a little better."

- Male, 29 years old

"It's important to remain positive and have realistic hope."

- Male, 40 years old



With many businesses closing during the pandemic or changing the way they work, across the country people were being furloughed or losing their jobs altogether. Stories from participants spoke of the need to find and secure work, the impact losing their job had on their mental health and the loss of routine.

It was also highlighted the difficulty faced by the homeless community when searching for employment without a fixed address. For some of the most vulnerable the impact of job losses had more severe implications with risks to their personal safety due to domestic violence.

It's also worth highlighting that many of the individuals who had employment at the start of the pandemic in what were considered key roles felt such anxiety about the impact of COVID-19 on the safety of their family that they chose to leave their roles.

Employment

"...you can't get employment when you're on the streets."

- Male, 61 years old

"I've not been able to get employment through it even though I've been trying and that."

- Male, 25 years old

"I lost a job cause of the Covid from where I'm from like. So that sort of did my head in, if you know what I mean. I mean working was good for me, I like working, so that messed with my mental health in a big way."

- Male, 29 years

"I had to leave my job as I was a key worker and had to try and protect my family."

- Female, 36 years old

"...now found myself in an almost impossible situation to find new employment – everywhere was closing or not in a position to hire me."

- Male, age unknown

"I managed to get a job in a care home, which meant that I became a key worker and could go out to work. I'd take on extra shifts to stay out of the house as long as I could just to escape."....." I felt scared and trapped, with nowhere to turn. This was made significantly worse when I could no longer maintain my employment with the care home."

- Female, 23 years old



Mental health was the most referenced theme throughout all 100 stories with a high number of references to suicide, both thoughts of and physical attempts. Isolation hit the homeless community hard, with many being encouraged to isolate alone in B&Bs and hotels across the town.

Locally organisations attempted to make this isolation easier with many provided with mobiles, radios, activity books etc. However the realities of self-containing within one room with limited opportunities to exercise of socialise had a significant effect on people.

Lack of socialising and human contact, particularly for those experiencing difficult family time and changes in their pre-existing support network had a hugely adverse effect. Many spoke of pre-existing conditions and how isolation prevented their usual coping mechanisms such as physical exercise and visiting family. Where services moved to telephone/online provision many found keeping those appointments difficult as it became harder to keep track of time, this often resulted in them feeling forgotten.

Mental Health

"This has made my day to day life more difficult and has made me feel more depressed, lonely and hopeless"

- Male, 32 years old

"I think about killing myself far too often than is normal"

- Male, 48 years old

"I have lost a lot. I lost my father in the first wave. I have been plagued by depression and I've been down some dark paths. I have resorted to drugs and thought about suicide."

- Male, 34 years old

"To be honest, my mental health was almost at a breaking point really, you know? Definitely losing my support system"

- Male, 41 years old

"I felt like all I needed was someone to put their arms around me and tell me everything will be ok."

- Female, 44 years old

"People who supported me seemed happy and 'chilled' on the phone. The only issues was not seeing people for mental health and other support and I did fall through the system a little – getting confused on who, what, when."

- Female, 44 years old

Mental Health

"Covid has affected me in a big way. I struggle with mental health issues and because covid came with a lot of restrictions I was unable to do certain things. i.e. go to counselling, see family members and others."

- Male, 20 years old

"Covid is scary, it's taken a lot away from me, I'm scared"
- Female, 41 years old

"the gym helps my mental health and it's like in my head, you got to make the most of it because I don't know when it's going to close again!"

- Male, 32 years old

"And I decided to kill myself, as usual I lived, I must be indestructible"

- Female, 56 years old

"I mean I suffer from depression and like I've suffered with this before this like, you know, like before the pandemic and that, and yeah it's really not been very good, not being to go see anyone, you know what I mean, like basically I've had to stay in on my own like"

- Male, 25 years old



The COVID-19 pandemic has had a huge impact on the general population with changes in working conditions, lifestyle and relationships. For the already marginalised homeless population this has felt more extreme with changes to services, support provision and additional pressures on people experiencing already complex needs.

As outlined in the report, individuals have spoken on various themes, with almost all covering multiple issues within their stories. Issues haven't occurred in single focus areas but have spanned various topics adding to an already complex situation.

The benefit of the anecdotal approach this report has taken is that while shining a light on areas of concern the people telling their stories have also highlighted opportunities for change and improvement. They've also shown a willingness to become part of the solution and an eagerness to engage in what has traditionally been described as a 'hardly reached' population. This is something that should be celebrated and the momentum utilised to create change and improve the services and health of our fellows.

One of the more unexpected elements across the 100 voices was the limited reference within the narrative by this community regarding accessing traditional health services such as GPs and A&E. This is particularly interesting given the significant rate of presentations usually experienced by those traditional health services by the homeless community.



"And I would just like to say how grateful I am to be able to share my experience with you."

– Male, 23 years old

Based on the above and the 100 stories provided by the homeless community the following conclusions have been drawn:

- Housing is a stabilising factor for those working towards recovery. Placing people in shared accommodation should be done sensitively
 and with consideration for any drug or alcohol dependency as this can add additional pressure. Individuals with stable housing spoke of
 hope and the opportunity to change their lives and move forward.
- Addiction and mental health have been linked together in the majority of stories showing they often come as a package. Consideration should be given to providing mental health support alongside treatment.
- Overall the stories referencing links between addiction and mental health highlighted that issues were exasperated by isolation and boredom with a lack of meaningful activity and social contact, thus showing that activity and social connection should be considered as part of a recovery package.
- There seemed to be confusion over the expectations placed by the homeless community on the council as a statutory service,
 particularly for those moving from outside of the area who don't meet local requirements. There could be an opportunity to improve
 the way we communicate and engage with this community. Particularly on areas such as support available and the various roles and
 responsibilities of organisations.
- A number of participants reference moving to Blackpool from other areas a further piece of work exploring this could help reduce
 numbers and strain on local services.
- Broad communication with this cohort is difficult and much work is required to communicate on an individual basis. Consideration
 should be given to alternative information sharing methods such as information boards that can be accessed at any time and provide
 regular information on local services and changes.
- Participants were keen to help influence local service delivery and often provided insight that might otherwise be missed. Continuing to involve service users in service delivery and strategic planning will ensure local needs are met.
- When working in partnership across Blackpool services users found increased benefit and increased awareness of other activities of interest and areas for support. Continuing a partnership approach will ensure all organisations working with the community to ensure all services have a broad range of knowledge of other areas of support available.



Moving forward it is important that lessons are learnt from this experience and that we use the stories provided to challenge service delivery where needed to create change while also recognising and celebrating successes.

In order to do this a copy of this report will be made available to all local stakeholders including community, voluntary and faith groups, the local Clinical Commissioning Group, housing associations and Public Health team. It will also be taken to the Homeless Partnership Board for discussion and will feed into the local action plan. All those organisations who worked alongside us to develop this report will be invited to join those meetings where they're not already involved.

Reflecting all the hard work that has taken place & the with this work we're keen to share the narrative within the document to help influence systems. This includes sharing with a number of stakeholders to get feedback on how we can use this work to help influence and improve service delivery.

Finally we will as part of wider community engagement work encourage services to engage with and have representation from their services users as part of best practice and ongoing service delivery.





