

Understanding the lived experience, and support needs, of families placed in temporary accommodation

Invitation to Tender, April 2021

Key information

- **Submission deadline:** 17:00 Tuesday 4th May 2021
- **Available budget:** £15,000 (including VAT)
- **Deadline for the final report:** Early January 2022 (*dissemination event end of January 2022)
- **Main Contact:** Becky Moran – Evidence, Impact and Learning Manager at the Cardinal Hume Centre (rebeccamoran@cardinalhumecentre.org.uk)

Introduction

The Cardinal Hume Centre (CHC) and Home-Start Westminster, Kensington & Chelsea and Hammersmith & Fulham have successfully secured funds from Westminster Foundation to commission a piece of research that will enable us to ***better understand the lived experience and support needs of families who are placed in temporary accommodation by Westminster City Council***¹. The overall aim of the research is to provide a body of evidence that will enable us as organisations to reflect on our own services, as well as contribute to wider sectoral discussions, about how the system can best support these families in order to improve family outcomes both now and in the future.

About us

The Cardinal Hume Centre (CHC), founded by Cardinal Basil Hume, is a one-site homelessness prevention centre in Westminster offering a range of services aimed at supporting young people, families and individuals to live fulfilling independent lives. We provide: one-to-one housing, welfare and immigration advice and representation; employment support and training; food provision; supported accommodation for homeless 16-24 year olds; and a family activity centre and community garden. Currently, we are supporting just under 500 families across our breadth of services.

Home-Start supports families with a child under the age of 5, or expecting a baby, living in Westminster, Kensington and Chelsea, and Hammersmith & Fulham. Last year, they worked with 126 families in Westminster experiencing difficulties, including social isolation, domestic violence, postnatal depression, marital/ partnership breakdown, as well as parents or children with disabilities and special needs. They have over 80 trained and DBS checked

¹ This will include families placed in and outside of the local area.

volunteer befrienders who visit families in their own homes, offering emotional and practical support to help them to link in with or access local services.

Westminster Foundation is an independent organisation representing the charitable activity of the Duke of Westminster and Grosvenor businesses. The Foundation works with local organisations who create opportunities for young people up to the age of 25, particularly those facing deprivation or intergenerational inequality, and it believes strongly in helping to build *'solid foundations'* to ensure young people and their families are able to lead happy and healthy lives.

Why this research is needed

Recent data shows that there are a large number of families placed in Temporary Accommodation (TA) by Westminster City Council. For example, during the period of April 2020 – June 2020, there were a total of 2748 households living in TA (MHCLG, 2020)². 44% of these were households with children; 3843 children in total. Of these 2748 households, the majority are placed in private sector accommodation; 1602 (58%) are placed in another local authority district³. A recent review of homelessness in Westminster (2019) noted that *'the tenure structure of Westminster is unusual, with a very large private sector...with nearly 40% of homes having one bedroom...'* (see section 4.4)⁴. It was also noted that *'renting a two bedroom home at the lower end of the market would also require a gross income of £97K'* (see section 4.7). As a result, this context can make it *"harder to prevent and respond to homelessness in Westminster compared with other areas"* (see section 4.10).

Westminster City Council's current Homelessness Strategy 2019 – 2024 includes a 'Temporary Accommodation Reduction Strategy' (2019: 21)⁵. Specifically, it acknowledges the need to: reduce the time households spend in temporary accommodation⁶; provide them with settled housing more quickly; and to offer households more choice over the location of these homes. One of the main drivers behind this strategy is the detrimental impact that living in temporary accommodation can have on the health, wellbeing and safety of families and children, as well as their longer term opportunities and prospects (see City of Westminster, 2019:11; Shelter, 2006; Shelter, 2017; Bramley and Fitzpatrick, 2018; the Children's Commissioner, 2019).

For example, research carried out by Shelter found that children's physical and mental health, as well as educational outcomes and opportunities into adulthood, can be adversely

² MHCLG (2020) Detailed Local Authority level tables: April to June 2020, [Live tables on homelessness - GOV.UK \(www.gov.uk\)](https://www.gov.uk) NB. More up-to-date figures are due to be released on 28th January 2021

³ The City of Westminster prioritises temporary accommodation in Westminster and adjoining boroughs for those with the highest need – see Accommodation Placement Policy, 2017.

⁴ City of Westminster (2019) Westminster City Council: Review of Homelessness 2019, [Westminster City Council: Review of Homelessness 2019](#)

⁵ City of Westminster (2019) Homelessness Strategy 2019 – 2024, [homelessness strategy final for decision 22.5.2020for upload.pdf \(westminster.gov.uk\)](#)

⁶ The average wait times in temporary accommodation for social housing can be anything from 2.5 years (for a studio flat) to 34 years for a 4 bed house (see City of Westminster Homelessness Strategy 2019 – 2024, pg 23)

affected by their experience of living in temporary accommodation (see Shelter 2006 and 2017)⁷. The research found that children who had been living in temporary accommodation for over one year were three times more likely to develop mental health problems, such as anxiety or depression, compared with their peers (Shelter, 2006:9). There was also a significant impact on children's education, with increased absence from school due to the disruption caused by moving into and between temporary accommodation, and the fact that children in temporary housing are often forced to move school frequently, causing them to lose out on the stable influence of attending a single school, missing valuable class time and disrupting friendships. More recently, research published by the Children's Commissioner outlined the serious risks posed to children's health, safety and education as a result of poor quality temporary accommodation (2019: 12-15)⁸.

In addition to the immediate consequences of living in TA, research by Bramley and Fitzpatrick found that *'(childhood) poverty very often predates, and is a powerful predictor of, (adulthood) homelessness'* and they also noted that material poverty and economic status are amongst the strongest factors for experiencing homelessness (2018:113)⁹. In other words, evidence suggests that an individual's previous experience of poverty and homelessness can impact on the likelihood of them experiencing similar deprivation later on in life. In 2013, the Joseph Rowntree Foundation also acknowledged that there are links between housing, poverty and material deprivation, with housing having the potential to *'mitigate or exacerbate the impact of poverty on people's lives'*¹⁰ (see JRF, 2016; Child Poverty Action Group; The Children's Society)¹¹.

The impact that the Covid 19 pandemic is having on family homelessness and family incomes is still unfolding. Recent research undertaken by Crisis suggests that, whilst the 'Everyone In' policy has had some positive effect on homelessness, services are very concerned about the temporary nature of these, along with how issues such as rising unemployment, reduced household incomes, and increasing levels of domestic violence will lead to new levels of emerging need in this area (Boobis and Albanese, 2020)¹².

Overall, it is as a result of this evidence base, as well as the current local and national context, that we feel this research is both timely and vital.

⁷ Shelter (2006) Chance of a lifetime – the impact of bad housing on children's lives, [Chance of a Lifetime.pdf \(shelter.org.uk\)](#), AND Shelter (2017) 'We've got no home: The experiences of homeless children in emergency accommodation. [2017 Christmas investigation report.pdf \(shelter.org.uk\)](#)

⁸ Children's Commissioner (2019) Bleak Houses – Tackling the crisis of family homelessness in England, [cco-bleak-houses-report-august-2019.pdf \(childrenscommissioner.gov.uk\)](#)

⁹ Bramley, G. and Fitzpatrick, S. (2018) Homelessness in the UK: who is most at risk, in *Housing Studies*, 33:1, 96-116.

¹⁰ Joseph Rowntree Foundation (2013) The links between housing and poverty, [The links between housing and poverty | JRF](#)

¹¹ JRF (2016) We can Solve Poverty, [we can solve poverty in the uk 0.pdf](#); Children Action Poverty Group, [The effects of poverty | CPAG](#); The Children's Society, [Effects Of Child Poverty | The Children's Society](#)

¹² See [The impact of COVID-19 on people facing homelessness and service provision across Great Britain \(2020\) | Crisis | Together we will end homelessness](#)

What we hope to gain from this research

By better understanding the lived experience of families placed in Temporary Accommodation within the specific context of Westminster, we hope to be able to reflect on how we, and the wider sector, can best develop or adapt service provision and interventions in order to ensure the best possible outcomes for these families.

Specifically, we hope the research will help the system to learn about/reflect on the:

- Circumstances that may have contributed to a family's lack of secure housing;
- Difficulties or challenges families may face when transitioning to, and living within, temporary accommodation;
- Impact of these difficulties and challenges on a family's overall welfare;
- Experience of current support that is offered to families living in TA; and
- Implications for families' immediate and future support needs.

About the research

Research questions

In order to address our research aim (*to better understand the lived experience and support needs of families who are placed in temporary accommodation by Westminster City Council), we anticipate that this research would explore the following types of research questions:

1. What are the range of triggers that lead families into temporary accommodation, and what interventions/support do families may have made a difference/prevented this from happening?
2. How do families experience the process of moving into temporary accommodation and what support do they need at that time?
3. What is the impact of living in temporary accommodation on the family's welfare? How could any negative consequences be minimised?
4. What support have families been offered, both before and during their transition to temporary accommodation? What has been their experience of this support? How have families been communicated with during this time? What was most helpful? What was least helpful? What was missing?
5. Do certain families appear to need more or less support, and if so, on what basis? What is the experience of families housed outside of the borough? Is there learning about the impact this has on the family or about what support is needed to make the transition to another less detrimental?
6. What do families understand about the process of finding more secure accommodation in the future? What do families aspire to? And do families experience any specific barriers when thinking about finding more secure accommodation in the future?

7. What do the findings mean for the development of local service provision going forwards? What does this mean for CHC and Home Start? What does it mean for the wider system?

Research methodology

We anticipate that the research would draw on a range of methodologies. We would like this to include a desk-based review to ensure that we are learning from the existing evidence base, including data publicly provided by the Local Authority, as well as qualitative methods to capture the voices of families and, if and when appropriate, the voice of the child(ren). A survey may also be considered to test out ideas with a wider breadth of participants, however we are not wedded to any particular approach; rather, we will be assessing proposals based on the methodological justification provided as well as the best use of resources. We are also keen to hear how the voices and ideas of families could be included in the analysis and co-production of any recommendations that are created during the final stages of the research.

We understand that, as a result of Covid 19, some research practices may be more challenging to deliver, however we would hope that any proposals submitted take into account the current [‘roadmap’](#) that England is currently working towards. We would also like some reassurance that potential suppliers have considered alternative arrangements should the ‘roadmap’ significantly change course during the duration of the research.

We anticipate that the research sample would include families who:

- have been housed in temporary accommodation both in and out of Borough;
- have a variety of different aged children (we would like there to be a mixture of school-aged children as well as children under 5 across the sample);
- have recently been housed as well as who those who have been in TA for a longer period of time; and
- represent families from a variety of ethnic backgrounds.

We envisage the sample size for any qualitative work being no more than 15-20 families, however this is open to discussion depending on the methodological approach that is proposed and how the bidder proposes to utilise the available resource. We would also like the supplier to consider how best to include the perspective of the expertise of volunteers and staff who work with these families on a regular basis.

It is essential that the research is conducted in line with standard research ethics, whereby the principles of ‘informed consent’, ‘avoiding harm’ and ‘confidentiality and anonymity’ are fully thought through, particularly given the content and context of the research.

Key deliverables

We would like the findings of this research to be completed by the end of December 2021 in preparation for a dissemination event in January 2022. The key deliverables throughout the duration of the research will include:

- **Amended research proposal (mid June 2021):** Within the first few weeks, we would like the successful applicant to provide an amended research proposal based on discussions/ decisions made during the inception meeting.
- **3 month progress report (mid September 2021):** Document key research activity, including initial findings from the desk-based research, and review research schedule and timelines
- **6 month progress report (mid December 2021):** Document key research activity, reflect on initial findings and agree report structure
- **Research report/slide deck, ideally to include a small number of case studies (Early January 2021)**
- **Dissemination event (End of January 2022)**

Timescale and Budget

The timescale for this research is as follows:

Key milestones	Key dates
Invitation to tender released	Thursday 1 st April 2021
Opportunity to ask questions about the research brief	Between Tuesday 6 th April and Tuesday 20 th April 2021
Deadline for research proposal submissions	17:00 Tuesday 4 th May 2021
Selection process	Reviewed 5 th - 7 th May 2021 Interviews held (*if required) by Zoom on Friday 14 th May
Successful bidders notified	No later than 17:00 Wednesday 19 th May 2021
Project inception	Week commencing 24 th May 2021
Research deadline	Early January 2022
Dissemination event	End of January 2022

The budget for this research is £15,000 (including VAT). This should include all costs associated with the research, including a budget for travel expenses and research incentives (if required/appropriate).

Project Management

The main day-to-day contact for this research will be Becky Moran (Evidence, Impact and Learning Manager at CHC) – rebeccamoran@cardinalhumecentre.org.uk. Becky will coordinate all project updates/meetings with the chosen supplier and other internal stakeholders. Other reasons to coordinate with Becky will include:

- **Signing off research tools:** We would like all research tools (e.g. interview guides; survey design) to be shared and signed off with us before use.
- **Access to participants:** CHC and Home Start will work in collaboration with the supplier to enable access to potential participants.
- **List of stakeholders:** CHC and Home Start will provide the successful supplier with a list of up to 10 key stakeholders to ensure the practitioner perspective is included.
- **Advisory group:** A small advisory group will be coordinated, including at least one representative from CHC, Home Start and Westminster Foundation. This group will be responsible for the selection and recruitment of the supplier, as well as monitoring the key research milestones and working with the supplier to ensure the successful completion of this work.

Submitting a proposal

Submissions should be sent to Becky Moran (rebeccamoran@cardinalhumecentre.org.uk) by no later than **5pm on Tuesday 4th May**. Should you have any questions about the research brief, or anything included within this ITT, please do not hesitate to contact Becky by Tuesday 20th April. Whilst it is not essential, it would be **helpful if you could inform us that you intend to submit an application** before doing so. We welcome submissions from independent, professional researchers as well as academic institutions. We also welcome collaborative bids.

Submissions should be no more than 6 pages long and should include:

- An understanding of the research brief
- Research proposal (including research budget) aligning to the methodological and budgetary requirements outlined in this ITT
- Examples of previous research that is of relevance to this research brief
- Two professional references
- CV (*for all members of the research team).