



**Dublin Simon Women's Support Service & Middle Abbey
St. B&B – A Timely Review. Nov. 2005**

**draft
confidential
report**



Working with People to Create **Powerful, Just & Celebratory Places** to Work and Live

focused solutions
your vision ■ our focus

**A Timely Review of the Middle Abbey St B&B and the Dublin
Simon Women's Support Service**

Liz Lennon. Nov 2005



Table of Contents

Executive Summary	3-4
Action Evaluation Methods	5
Women who end up Homeless What's the Story?	6-9
Women who stay in Middle Abbey St B&B – a snapshot & their opinions	10-14
The B&B & the Support Service A sense of the work and the challenges	15-18
A Safe Haven – The Service of the Near Future	20 – 23



Executive Summary

If Middle Abbey St B&B didn't exist would we invent it today?

No.

Seven years ago when it was first established the B&B served a very basic purpose. It provided a bed for women who were experiencing homelessness.

It's no longer just about bodies on beds. The sector is committed to a strategic focus that includes:

- ❑ Eliminating rough sleeping
- ❑ Encouraging existing emergency accommodation to become more low threshold
- ❑ Focusing on Housing First with relevant tenancy sustainment supports
- ❑ Localising service delivery
- ❑ Developing cross agency and within agency multi skilled teams
- ❑ Using a Care and Case management approach to the work
- ❑ Developing organisation, worker and service quality standards
- ❑ Effectively resourcing services

Other key initiatives that will provide positive opportunities within the sector and for the service include:

- ❑ HSE initiatives regarding a cross Liffey GP service involving 20GP's; and further developments of both the ACCESS and Multi D Health Teams.
- ❑ The development of a specific Probation & Welfare Service Team unit to work with homeless people.
- ❑ Plans by key NGO's to buy substantial housing stock to provide homes for homeless people with multiple needs.
- ❑ The strategic research conducted by the Homeless Agency in 2005 will clearly help to inform the work of the sector in 2006.

The Steering Group of the Dublin Simon Women's Support Service (DSWSS) commissioned this evaluation. The Steering Group consists of senior managers and managers from Dublin City Council Homeless Services Unit, The Health Services Executive Social Inclusion Unit, Dublin Simon Community as well as the Manager of the service.

'This accommodation is not suitable for long term use' Middle Abbey St assessment. Liz Lennon 2003

The service was established 2 years ago after an initial evaluation report recommended that some form of support service be provided to the women using the Middle Abbey St B&B.

This evaluation aimed to assess the service as well as make



recommendations on the scale and scope of a future service.

The timeframe for the evaluation was deliberately short as all parties felt there was an urgent need to review the service and the physical infrastructure of Middle Abbey St.

Within the timeframe the evaluator saw the opportunity to not only evaluate the project but also to take a broader view of the needs of homeless women in Dublin. Specific research on gender-based services and the differing needs of homeless women has not been done in Dublin and international research is scarce.

I stated in my 2003 review of Middle Abbey St that 'this accommodation is not suitable for long term use.' My opinion regarding the building has not changed. With the introduction of the Support Service the limitations of the building became even more evident.

My key recommendation is that the support service and accommodation:

Be based in another building still within Dublin City

The current building should never again be used as emergency accommodation for homeless people unless substantial refurbishment takes place.

**The Service will run within the sectors strategic focus
Be for women only
A range of values and principles will inform the service
The Service will be based on a low threshold and harm reduction models of practice
The Service will employ skilled and experienced staff on relevant staff client ratios for the needs of the women who use the service
The Service will be underpinned by explicit service standards and within the sectoral case and care management framework
The Service will be provided by Dublin Simon and governed by the existing Steering Group
The Service will be well resourced by all key agencies**

A summary of all other recommendations is at the back of this report.

There's been good work done and now it's time to keep up the momentum and lift the bar in terms of the quality services and buildings we will develop together.

It's no longer just about bodies on beds



2. Action Evaluation Methods

The time frame for this evaluation was short. It reflected the sense of urgency that all stakeholders felt regarding the need for an evaluation.

The aim of the evaluation was to:

- ❑ Review the service provided by Dublin Simon in Middle Abbey St B&B
- ❑ Make recommendations on the future of the service

I conducted the evaluation within a framework of:

- ❑ Good practice standards for services – a synthesis of Putting People First and PQASSO
- ❑ An assessment that looked at both the internal and external management of the service
- ❑ The Homeless Agency report on Case and Care management and a paper I wrote on Keyworking in 2003

From the start I saw this evaluation as an opportunity to not only review the specific service but also gain a broader overview of the needs of homeless women in Dublin.

Within the fieldwork timeframe (3 weeks) the evaluator used a series of methods:

- ❑ Nearly 30 interviews with a range of service providers, the HSE and the DCC.
- ❑ 1 to 1 interviews with 4 of the women that use the B&B.
- ❑ A survey was sent to the team, managers and steering group to rate key elements of good practice.
- ❑ A survey was given to the women that use the B&B. They were invited to complete it and place it in a sealed enveloped that was given to the evaluator.
- ❑ A number of meetings with the Dublin Simon Manager of the service were held.
- ❑ Gathered all key reports completed in the last year in Dublin that could help to inform the evaluation.
- ❑ An extensive online search was conducted.

I want to thank all the people that took time, with very short notice, to talk with me. Your insights have deeply informed this report.

What this evaluation indicated is that there is a real wish by key agencies to discuss, develop and deliver quality services for homeless women in Dublin.

34 interviews & meetings

Surveys

Reports

Online Research



3. Women who end up homeless – What's the Story?

'How do you stop being homeless? Women are judged harder than men when you're homeless.' (Woman interviewed.)

The specific service needs of women who become homeless has not been a topic of focused research in Ireland – and only recently has it been addressed internationally.

This evaluation was not intended to be a piece of research on gender issues in the delivery of services to homeless women, and it does not purport to be an in depth view of those issues.

Nevertheless, in the process of interviewing people it became evident that women had a different pathology of homelessness than men and their service needs needed deeper examination.

Both the research and the interviews indicated that although there are more homeless men than women – women experience a form of invisible homelessness and by the time they become visibly homeless they ' have to fall through a lot more hoops' (quote from interviews). Many women will stay housed in brutal and violent relationships because they may be economically dependent on their partner and they want to continue to provide shelter for their children. Single women with multiple needs may be more likely to find a couch or bed with a family member or friend than a single man.

52% of women offenders who had ever been homeless had been robbed ...

Women who become homeless are no more a homogenous group than men. They are all ages (although services are seeing more and more young women) – some have children and other don't – some have partners (of either sex) and others don't.

30% had been robbed or physically assaulted...

What is clear is that by the time a woman becomes visibly homeless she may have experienced one or all of these issues:

25% had been sexually assaulted

(Seymour Report 2005)

- Time in Dochas
- Drug misuse which includes prescription drugs
- Alcohol misuse
- Diagnosed mental illness
- Physical, sexual and emotional violence
- Rape
- Physical or learning disability
- Involvement in prostitution
- Fracturing of family and social connections
- Low levels of education
- Poor physical and mental health

Women, workers and managers that I spoke with all said that women were highly vulnerable when they became homeless. They didn't feel safe.



Let's take a slightly more in depth look at a few difficulties in these women's lives when they become homeless:

Emergency Accommodation

Currently the women only emergency accommodation in central Dublin is Middle Abbey St and Regina Coeli. Grave concerns regarding the safety and suitability of both accommodations were stated by everyone I interviewed. This evaluation is addressing issues with the Middle Abbey St service.

It appears that the Regina Coeli accommodation is not subject to the same conditions of service accountability as Middle Abbey St. The women I interviewed said they felt unsafe in this accommodation and would rather sleep on the streets. They told me of a number of incidences of unsafe behavior that they had witnessed or heard of from other homeless women. I cannot substantiate any of their comments but the number of concerns expressed by the women and other people I interviewed raises substantial questions regarding the suitability of this accommodation in this day and age. All services that provide accommodation and support to homeless people should be held to standards of service, accountability and transparency.

A number of services ring fence beds for single women in mixed hostels.

Women's refuges will not normally take in a woman with multiple needs.

Homelessness & Women Offenders

The Seymour Report on homeless persons before the court and in custody (2005); notes from a seminar hosted by the Homeless Agency and Probation & Welfare Services (2005); notes from Enhance 2004 meetings; and a number of interviews – deeply informed this section.

Here are a few thought provoking statistics:

- ❑ Women represent only 20% of referrals to Probation & Welfare services but almost half (43%) of those who were homeless were women.
- ❑ Women (70%) were more likely than men (43%) to stay in emergency accommodation
- ❑ Nearly 50% of women prisoners had experienced homelessness in their teens
- ❑ The key reasons for their homelessness was drugs (80%); family conflict (68%) and no affordable accommodation (24%)
- ❑ 76% of women prisoners who were ever homeless said that it was one of the reasons they got into trouble
- ❑ Nearly 50% of the women prisoners surveyed did not know where they would live on release
- ❑ 72% of women offenders who were ever homeless had alcohol issues and 76% used drugs prior to imprisonment.

'I'd rather sleep on the streets'
(woman's comment Regina Coeli)

'Although crime has not been an inevitable consequence of homelessness... some clear links have been exposed'
(Seymour Report 2005)



'...there is a close connection between traumatizing experiences of violence and substance abuse problems... often women's experience of violence is not addressed in substance use treatment centres (or accommodation services), which are generally mixed gender...in such settings women are confronted with the same structures of power violence and dependency...' (United Nations Report on Women and Drug Use. 2005)

Physical & Mental Health

A range of physical and mental health problems accompany women when they become homeless:

- ❑ Poor physical health, HIV and Hep C
- ❑ Women are twice as likely to experience depression as men
- ❑ Women have been exposed to more abuse (sexual, emotional and physical) in childhood and adulthood than men
- ❑ Other physical health issues include – eating and sleeping disorders; weakened immune system; personal hygiene issues
- ❑ Other mental health issues include – panic attacks; self harm; and a range of challenging behaviors

Substance Misuse and Addiction

A great deal has been written about this topic.

Research and women themselves will say that drugs and alcohol misuse have affected their lives in an adverse way. It has fractured relationships and blocked opportunities to education and employment – and eventually even a safe home.

If you're homeless and use drugs or drink then your chances of being in conflict with the law are high. This is due to the fact that your behavior becomes more public and you may steal to obtain drugs. If you drink and become intoxicated in public then you are more likely to be charged with disorderly conduct. If you are a sex worker to obtain money for drugs or alcohol then you will come before the courts eventually.

The cycle of abuse in childhood and adulthood, drugs/alcohol misuse, criminal activity and homelessness is one many of the women using Middle Abbey St would relate to in some way.

Children, Family & Relationships

The women I talked with who had children (and had access to them) spent nearly every day visiting them. Their goal was to get a home that their children could either visit or live in.

Connection with their children was at the heart of the women's conversation with me. It's important that while these women may be categorized as 'single homeless' they really aren't. Any services that are developed must take into account women's connection with their children.

Those women who have experienced abuse and violence in relationship with men will often have ongoing dysfunctional engagements with them. This has implications for the management of mixed-use services – and not only accommodation.



**Definition of
Multiple Needs for
homeless people:**

'encompasses 3
or more of the
following
problems...
misuse of various
substances,
personality
disorder,
offending
behavior,
borderline
learning
difficulties,
physical disability,
physical health
problems,
challenging
behaviors and
vulnerability
because of age'
(Dept of
Transport, Local
Government & the
Regions UK)

Financial Health

Poverty is part of the cycle of homelessness. If you don't have a job, have learning difficulties, a low level of education and substance use issues then there's a good chance you will experience poverty.

Also if you have substance use issues then your money may go to buying alcohol and drugs rather than rent, food and clothing.

Some of the women in their surveys said that the cost of private rented accommodation made it nearly impossible to get a home.

Some women will resort to stealing goods, which increases their chances of contact with the courts.

And – if a woman has multiple needs?

If you are a woman with multiple needs (terms used vary from dual diagnosis to concurrent disorders to multiple needs) and you are homeless – you will stay homeless longer than other homeless people.

Homeless people with multiple needs will find it more difficult to stay in treatment programmes than other people.

If workers find it hard to negotiate the labyrinth of the health, mental health and substance abuse treatment systems – how hard do you think it will be for a homeless woman with multiple needs? And there's the classic Catch 22 situation - that if you have multiple needs then certain services won't work with you until you've dealt with the other issues – watch people fall through the net! I know there are services trying to work on this issue but it's still very prevalent.

Combine the lack of system integration with a multiple needs homeless woman's sometimes – low motivation, non compliance with medication and treatment, fears of victimization, depression, ill health ... and all organisations are faced with a real challenge.

So – how do you feel?

It's no surprise that women who experience persistent homelessness aren't exactly jumping for joy. The feelings of the women range:

- ❑ Shame and self-blame which is reinforced by societal attitudes regarding women and particularly mothers – they feel and are often made to feel like they have failed as women.
- ❑ Anger that covers fear, sadness, regret and that Irish classic – guilt
- ❑ Low motivation and a sense of disengagement – after all why get your hopes up?



4. The Women who stay in Middle Abbey St B&B – A snapshot & their opinions

73 women used the B&B over 91 days

There were a total of 1736 (potential 2002) bodies in beds over 91 days

Average nightly occupancy is 19 women.

The range of nightly occupancy was 13 to 23 women

This section provides a snapshot of the women who use the Middle Abbey St B&B. A range of information was inputted for the period August 1 to October 31 2005. The nightly B&B sheets were used to analyse women's length of stay and age group. The Dublin Simon team also inputted any basic data on any needs that the women presented with over that time.

This data had to be developed from scratch and only further highlights the dearth of easily accessible data in the sector to make some informed analysis and decisions. This is not a criticism of the team, as their manager provided clear and accurate data to the Steering Group every 2 months or so. As an evaluator I find it very difficult to get any longitudinal data on the people that use services I review. I hope that eventually the LINKS system and organisations own internally data collection systems will provide better tracking and core data.

Having said that – I have been able to develop a series of tables that provide a reasonable profile of the women and their use of the B&B.

This section will also provide a sense of the women's opinions on the B&B and the Dublin Simon Service.

Length of Stay linked with Women's Ages – August to October 05

	<7days	1 to 4wks	1-3mths	Age totals
18 -25	11	3	4	18 25%
26 -32	6	10	5	21 29%
33 -40	8	5	3	16 22%
41 - 47	5	3	3	11 15%
48 - 55	2	1	1	4 6%
56 - 62	0	1	0	1 1.5%
63 - 70	0	0	0	0
71 - 77	0	0	1	1 1.5%
Stay Totals	32 44%	23 32%	17 24%	72

- ❑ 44% of women stayed for less than a week. Of those women - 34% are under 25 years of age, 19% are 26-32, and 25% are 33-40. So – 78% of women who stay for less than a week are under 40.
- ❑ 32% of women stayed for a week to a month – and - 43% of them are aged between 26 and 32.
- ❑ 76% of the women stayed for less than a month.
- ❑ 24% of women stayed for 1-3 months
- ❑ There's a nearly even age spread in the first 3 age groups.
- ❑ 61% of the 18-25 year olds stayed less than a week; 50% of 33-40's and nearly 50% of the 41 - 47's also stayed less than a week.
- ❑ Nearly 50% of the 26-32 year olds stayed for up to a



Drug & Alcohol Misuse - sample of 51 of the 73 women

Nearly 33% of the 51 women had issues with drugs

23% of the 51 women had issues with alcohol

10% of the 51 women had issues with both alcohol and drugs

Nearly 60% of the women had problems with drugs and/or alcohol

I had deeper data on 51 of the 73 women who stayed in Middle Abbey St from August to October 2005. This made it possible to get a sense of the issues affecting the women's lives.

Of the 51 women - 17 women were using drugs, 8 were on a methadone programme (although it was suspected that 2 of these women were still using drugs), and 12 had alcohol issues. Of that number - 5 women were misusing both alcohol and drugs. There were a number (4) of women where information on their drug and alcohol issues was not known.

57% of the 51 women had problems with drugs and/or alcohol.

This group of women would be more likely to have been barred.

Drug & Alcohol Misuse by age – from sample of 51 of the 73 women

Of the women using drugs nearly 50% were under 25. 73% were under 32

	Drugs	Alcohol
18-25	8	1
26-32	5	2
33-40	2	5
41-47	2	3
48-55	0	1
	17	12

- ❑ The majority of women who use drugs are under 32
- ❑ The majority of women who have problems with alcohol are over 33
- ❑ The women who have problems with both alcohol and drugs spanned 3 age groups (24,25,35,36, &44)

Of the women with alcohol issues nearly 70% were aged between 33 and 47

Time spent in Dochas with other issues – from sample of 51 of the 73 women

11 (22%) of the 51 women had spent some time in Dochas. The numbers could be much higher as the data regarding whether women had been in prison was full of don't knows – i.e. the team did not have this piece of information.

6 of the 11 women had drug misuse issues; 3 of the 11 were on methadone; 1 woman was on methadone but was also using drugs; and 2 women had alcohol problems. There was no crossover between alcohol and drug use.

Of the 11 women 1 had an assessed mental illness (of only 2 women in the sample of 51) and there were concerns for the mental health of 3 of the 11 women.



Of the 40 women there were concerns for the mental health of 17 and 3 more had a diagnosed mental illness- 50%

Mental Health Concerns – from sample of 40 of the 73 women

Of the 40 women (that's all the data I had) 3 had an assessed mental illness. One woman was in recovery from alcohol issues and the other 2 did not have identified issues with alcohol or drugs.

There were concerns for the mental health of 17 of the 40 women. One woman in this group also had issues with drugs and alcohol. Of the 17 women with some mental health concerns – 10 also had issues with either alcohol or drugs.

Of the 20 women with mental health concerns or a diagnosed mental illness nearly 55 % had issues with either drugs or alcohol

Of the 40 women there were no major concerns for the mental health of 20 and the mental health of 11 of the women was unknown.

Physical Health Concerns – from sample of 51 of the 73 women

There were concerns for the physical health of 13 of the 51 women. 10 of those 13 women had health concerns related to their substance use.

80% of the 47 women had support needs.

Children and Access – from sample of 37 women.

Of the 51 women there was only data on 37. Of those 37 women 19 had children and 18 did not. 15 of those 19 women's children were in the care of a family member.

43% Low
30% Medium
7% high

Of the four women whose children were fostered 2 of them had spent time in prison- and those two women had issues with either alcohol or drugs. Further – one of the women whose children were in care, had been in prison, and had drug issues also had an assessed mental illness.

Nearly 50% of the 51 women had shown some interest in linking with a keyworker.

Of the 19 women with children:

- ❑ 2 have no access – one woman had both alcohol and drug issues
- ❑ 8 have limited access – all these women had either drug or alcohol issues
- ❑ 8 have unlimited access

Of the 50% not interested in linking in - most of them had low support needs

Levels of Support needed – from sample of 47 women

Of the 47 women I had data on:

- ❑ 10 only wanted accommodation
- ❑ 20 needed low support
- ❑ 14 needed medium support
- ❑ 3 needed high support



Quotes
'has helped me
move on and
get things done'

'Helped when I
was in
crisis...talked
with me...found
courses'

'If Simon wasn't
here there
would be no
services'

'They helped me
deal with my
personal
problems'

Quote

'I feel she
(social
worker) is
working
against me
instead of
working for
me'

Women's opinions of Middle Abbey St B&B and the Support Service

A short survey was designed to gather the women's opinions of the B&B and the support service. Women were given an envelope to place their survey, which was sealed and then given to me. This was to guarantee a sense of privacy so the women could feel free to express their opinions.

Over a week 12 women completed surveys. This represents about 10% of the average number of women who would stay in the B&B over a week. The women who returned the survey had been staying in the B&B for between 4 weeks and 5 months.

I also interviewed 4 women in 1 to1 conversations over a cup of tea across the road from the B&B.

How have the workers from Dublin Simon helped you?

Of the 11 women only 2 women said that the support service hadn't done anything for them. They both said they worked with their own keyworker.

The other women said that the service helped in a number of ways:

- By listening
- Provide information on flats and let women use the phones
- Providing information and helping get things done

What else could the workers do to be of use to you?

A number of women said they just wanted more help getting a house. Five women said that they didn't need anything else and the service was fine.

The two women that were unhappy with the service said that the staff could be in more often and that some of the girls didn't want to talk with them

What other services do you use most? Rate them on a scale of 1 to 10.

A number of the women said that they didn't use other services.

When women did use a service it was:

- Merchants Quay dental staff
- Focus
- Aisling Clinic
- Social Worker
- Resettlement worker
- Anna Liffey

Most of the women did not provide ratings for services



Quote

'I ring everyday for flats and put my name in letting agencies and I feel I'm getting nowhere.'

'I go to Ana Liffey every day. They are very good people.'

'women sit around in the kitchen putting on make up and then taking it off ... there's nothing to do'

'There's no privacy here ... I started smoking since I came here ... I wouldn't bring my child here'

'It's hard to stay clean in here... I can't afford to take anything but it's hard to say no'

Tell me about a typical day in your life.

A number of the women visit their children. Two women are doing courses during the day.

Two women said that they get up, leave the B&B, drink all day and then come back and go to bed.

One woman is studying and said it was impossible to find the quiet and privacy to study.

One woman said she sat in the kitchen all day drinking tea and smoking.

What would make your life better in the future?

Every woman said that their life would be better if they had their own home.

What's blocking or stopping you from having the life you want?

The women identified a number of things that were blocking them having the life they wanted:

- Money and the cost of accommodation
- Finding accommodation
- Ex husband and family
- Lack of education and support from family
- Drinking

What's working in your life now?

Four women said that nothing was working in their lives.

A number of women said that their friends and child made their lives better.

One woman said '**I'm getting on the right road to get help and a house**'

Another woman said '**I don't want to be in this place anymore**'



5. The B&B and the Support Service – A sense of the work and the challenges

Quotes
about the
building
'It's
better
than
nothing'
(a woman
using the
B&B)

'There's
no
privacy'

'It's from
another
era'

'Horrible'

'Purpose
and clear
needs
should drive
structure
not the
other way
around'
Liz Lennon

The Building

The building is 4 stories with 4 bedrooms, 2 bathrooms and a kitchen/dining room. Up to 5 women share a room. There is an office and private interview room for the support service at the top floor. In the basement there are beds for up to 9 homeless men.

The kitchen is the only communal area and is usually filled with women smoking and making cups of tea.

The landlord employs 2 women – 1 worker is in the building at all times. A male worker is employed by the owners to manage the basement space and act as manager of the 2 women.

In 2003 I stated in my initial evaluation that the building was not suitable for long-term use as an emergency facility for any homeless person. I still believe that the building is unsuitable. This view was echoed in interviews with the woman and every person I interviewed.

Some work has been done to the building since Dublin Simon started the support service but it is really only cosmetic. There is only so much that can be done in the building without major reconstruction.

The women (and the men in the basement) deserve better. In years gone by organisations in the homeless sector took any building they could get and were grateful. The result of this is that often the services were built around inappropriate buildings.

Homeless people's needs should drive the services we create and the buildings we use.

Recommendation – That by June 2006 at the latest - alternative accommodation be found to house the women and the support service.

In my 2003 report I also mentioned the men in the basement and stated that 'the men are long term and consistent long term users of the basement beds...that great care be taken in relocating the men'. I still maintain that **Recommendation** - these men should be linked in with key services and alternative accommodation found for them by June 2006 at the latest.



The Support Service

Two years ago the Dublin Simon Women's Support Service was established in the B&B as a result of recommendations in my 2003 evaluation report.

A PATCH CWO visits the B&B every week for a number of hours. Women must make an appointment before seeing the CWO. Dublin Simon settlement workers visit on a regular basis. Women can make an appointment or drop in and talk with the workers as they stay for a set time.

Currently there are 3 workers who work shifts between 9am and 7pm 7 days a week. There is a team manager who is also responsible for another Dublin Simon accommodation service.

In the 2 years women have moved on to:

- Private rented accommodation
- DCC housing (in 2005 52 single homeless women were housed – I don't know how many of them had used Middle Abbey St)
- DCC accommodation in 97 North Circular Rd and Beech House
- Tus Nua (Depaul Trust women leaving prison project)
- St Catherine's Foyer
- Back to their family
- DCC and Dublin Simon Canal Rd accommodation
- Other hostels (Regina Coeli and Haven House)
- Aungier St Wet Shelter
- Harcourt St Shelter
- Beech House
- Another country
- Transitional housing
- Dublin Simon detox and then the rehab service.

Women Moved on

While the reports by the manager to the Steering group provided detailed information on outcomes and referrals it was difficult to accurately create totals of women who had moved on to specific accommodation over a 12 month period.

Recommendation - That a clearer data collection system be developed so that information over a longer period of time can be tabulated.

Currently the only organisations with the power to refer people into the B&B are:

- The Homeless Persons Unit
- The Free phone
- The DCC night bus service

Recommendation – From Dec 2005 no pregnant women should be referred into Middle Abbey St. The Steering group should also explore whether there is a need to open other avenues of referral (self referral; referral from NGO's)



**Referrals
&
Outcomes**

The Support Service

In interviews with other agencies it was felt that the support service had made a real difference to many of the women's lives and that it should continue to operate.

The support service was initially established to work with a core group of 12 women who had been in the B&B for periods up to 5 years. All these women except one (who refuses to engage with the service) have found alternative accommodation. That's a solid outcome.

Here is a list of the nature of referrals and outcomes over the 2 years:

Given the range of the women's needs it would be expected that there would be a wide range of referrals:

- ❑ Medical card forms and help to register with GP's
- ❑ Linking with NAHB drugs outreach workers
- ❑ Linking with Ana Liffey Drugs Project
- ❑ MABS
- ❑ Multi D Team
- ❑ Access Mental Health Team
- ❑ Dublin Simon Detox
- ❑ Dublin Simon Employment and Training Programme
- ❑ Trinity Court
- ❑ Amien St drug programme
- ❑ CDVEC programme
- ❑ Business in the Community programme

Some women initially started programmes and then dropped out – particularly educational courses.

The waiting list to access drug treatments is acting as a deterrent for women who want to address their drug issues. The rules (residing in the B&B for up to 5 months) really aren't helping the women.

Two women were fast tracked into Trinity Court.

Links with other Services

While links have been made with other agencies (as evidenced by the list of referrals) it is agreed by the team and the agencies I interviewed that more effort could be made on everyone's part to link more formally. I know people are busy and that they often find it difficult to get calls returned (and return calls).

I believe that there is a need to create spaces for key workers to meet each other and take the time to develop working relationships and develop solutions to the perceived and real barriers to working together.



Linkages with other services

On a positive note – in the process of this evaluation I talked with the new Director of the Ana Liffey Drugs Project and we explored ways that their project and the support service could work together. Within 24 hours he and the manager of the service had met and were exploring ways to work together. In the short term there is the potential to use some of the Ana Liffey building for women only access mornings where the support service workers run sessions that are open to the Middle Abbey St and Ana Liffey women.

All other agencies I talked with were keen to explore how to forge closer links with the support service.

Recommendation – That the support service take the initiative by organizing meetings with key managers and project workers (there's two levels of work) to explore how to create even more positive working relationships. This is of particular relevance for:

- ❑ Regular meetings with the PATCH CWO
- ❑ Ongoing links with Ana Liffey Drugs Project
- ❑ Meetings with the ACCESS team
- ❑ Meetings with Probation & Welfare Services
- ❑ Linkages with drugs and alcohol projects
- ❑ Links with the Multi D Health team
- ❑ Meetings with key social workers

Food

Currently women either buy or cook their food and, in the main, their diet is not healthy. Due to health and hygiene concerns food cannot be cooked on a large scale in the kitchen.

Recommendation – In the short term the Steering Group should explore the option of bringing in healthy food for the women.

The Little Essentials

In many shelters there is a store of hygiene products that clients can use for free – tooth brushes; toilet paper; toothpaste; soap; combs etc

Recommendation – that the Steering group provide funds for these essentials to be made available free to any women who uses Middle Abbey St

The Management Model

The current management model is a hybrid. There are 2 managers and 2 management processes:

- ❑ The Dublin Simon Support Service has a team manager and team that are responsible for providing a support service to women who choose to link in



- The owner of the B&B receives funding to employ a manager and workers to maintain security.

This is a recipe for role confusion and conflict. There are different working conditions for the 2 groups of workers and a different range of experiences and training.

On an informal level all the workers have made an effort to work together and on an informal basis the support service has developed a range of policies and practices.

The women who use the service are confused about the roles of the different workers and will often go to a number of workers with the same request without letting everyone know who they are talking with – confusion and frustration can arise.

Real efforts have been for the managers to meet but the B&B manager works nights and it can be difficult for him to be available for day meetings.

This model should not be used in the future development of any B&B services.

Recommendation – when the service moves to a new building that Dublin Simon and the Support Service be totally responsible for the service, workers and maintenance of the building - including all service and organisational quality standards of practice. That the Service contract with Dublin Simon be extended for a further 2 years.

The Steering Group

The Steering Group of the service consists of managers and senior managers from Dublin Simon, Dublin City Council Homeless Services Unit and the Social Inclusion Unit of the HSE.

The Group has met every 2 to 3 months over 2 years and is a good example of how partnerships (with the range of each organisations different strengths) can work.

The commitment of its members to this evaluation and the implementation of the report recommendations has been outstanding.

Recommendation – The Steering Group continue to meet to 2007 and play a significant part in forming the strategic plan, governance and transition to a new building. That the Steering Group reclarify its roles and responsibilities in the light of this reports recommendations. That the senior managers continue to be part of the Steering group. That the Steering Group take time to reflect on its progress and develop ongoing actions to maintain its momentum.



6. A Safe Haven – The Service of the Near Future

The women deserve better.

This whole section is one big recommendation.

The Service will be based in a new building that will be refurbished by June 2006 at the latest

The Service will run within the sectors strategic focus

It's no longer just about bodies on beds. The sector is committed to a strategic focus that includes:

- ❑ Eliminating rough sleeping
- ❑ Encouraging existing emergency accommodation to become more low threshold
- ❑ Focusing on Housing First with relevant tenancy sustainment supports
- ❑ Localising service delivery
- ❑ Developing cross agency and within agency multi skilled teams
- ❑ Using a Care and Case management approach to the work
- ❑ Developing organisation, worker and service quality standards
- ❑ Effectively resourcing services

Be based in another building that is still within Dublin city

There is a potentially available building that needs minor refurbishment that would be suitable for this Service. The refurbishment should be completed by June 2006 at the very latest – earlier would be even better.

At a minimum the following physical standards must be met:

- ❑ No more than 2 women to a room and where possible there will be single rooms available.
- ❑ All rooms will be ensuite
- ❑ A minimum of one room will meet key disability access standards
- ❑ There will be at least 2 if not 3 rooms that can be used by visiting services or for the women to have 1 to 1 conversations
- ❑ A kitchen that meets all health and safety standards for cooking 3 meals a day for the women. A laundry room.
- ❑ A number of group rooms – to be used for group work and also as dry and wet spaces
- ❑ A small room for harm reduction activities that aren't just about drugs. Harm reduction encompasses other harmful behaviors such as self harming
- ❑ Office space for workers
- ❑ Outside area landscaped for quiet and relaxing spaces
- ❑ Space for women to visit with their children

The current building should never again be used as emergency accommodation for homeless people unless substantial refurbishment takes place.



A Safe Haven for Women that creates a place to make choices about the lives they want to lead

Be for women only

The Service will be for women aged over 18 years of age.

The Service will be able to cater for up to 20 women at any one time.

The men who currently used the beds in the basement at Middle Abbey St will require a plan for support and alternative (and more appropriate) accommodation. They deserve a home with whatever support they need.

A range of values and principles will inform the service

A Safe Haven – physically, emotionally and spiritually

Respect, Trust and Understanding will inform all elements of the service

Be part of working with people to create meaningful lives

Motivational rather than confrontational approaches will be used

Women will be allowed to disengage from the service with the right to reaccess the service at another time

Women will be allowed choices in terms of the services they access

There will be a policy of non-exclusion

The service will run 24/7

There will be a focus on encouraging participation

Work with the women's strengths as well as their life issues

Accessible both physically and emotionally

Understand the challenges that exist in changing an old lifestyle

Reconnection into family and community

Open to principles of equality and diversity

Use of traditional and complementary therapies

Respond to the changing contexts (physically and emotionally) across a woman's life span

Avoid institutionalization

No curfew

The Service will be based on a low threshold and harm reduction models of practice

Given the profile of the women who currently use the service it is critical that the Service be low threshold and use models of harm reduction for both substance and process addictions.

Up to 4 beds will be ring fenced for women who stay for 1 to 7 days. Ideally the maximum length of stay will be 6 months. Women will be linked into settlement and tenancy sustainment programmes.

The Service will employ skilled and experienced staff on relevant staff client ratios for the needs of the women who use the service

The staff to client ratios in what will be a low threshold service is set at

around 1:7. Basically there will need to be at least 2 staff in the service at all times. For a 24/7 service that means 3 shifts of people.



Given that the women have a range of issues regarding men I recommend that all staff are women.

In keeping with current sectoral practice and recommendations in Simon Brookes report on staffing - the competencies of the day workers will be different from those of the night workers. The day workers are project/keyworkers and the night workers ensure the Safe Haven is just that – safe and secure.

There will be a need for ancillary staff for the kitchen and laundry.

I recommend that from January 2006 the manager of the Service be fulltime. In the transition to the new building there is a lot of internal and external management and linking work required. If this service is to be of the quality standard that we all want – then it require the fulltime attention of a manager.

Dublin Simon will use volunteers only when it is deemed appropriate and they are skilled/trained to work in the Service.

The Service will be underpinned by explicit service standards and within the sectoral case and care management framework

Dublin Simon currently audits its services using the Homeless Agency Putting People First Standards framework. This should continue to be the practice for this Service and audits should be done every 6 months.

When the Homeless Agency report on Case and Care Management is launched in 2006 and the Case Manager is employed – the Service should adhere to all the key recommendations and participate fully in developing all elements of good practice.

The Service will implement good practice in terms of data collection and inputting data into the LINKS system.

The Service will be provided by Dublin Simon and governed by the existing Steering group

It is recognized by all agencies I interviewed that the Support Service provided by Dublin Simon was working well and should continue.

The Steering Group has also proved to be a good example of partnership in action and should continue to operate with each organisations Senior Managers still being involved.

The Steering Group should act as a strategic focus and governance body for the Service. In the transition to a new building it is important that the



Steering Group meet as often as is necessary to implement its plan of action (which they will develop in January 2006).

The Service will be well resourced by all key agencies

The Steering Group will need to discuss in greater detail the resource requirements for this service – people, building, and money.

Monies currently given to the B&B owner by DCC to employ staff could be redirected to employ night and maintenance staff. Dublin Simon should also be given monies for maintenance of the building. The HSE will be responsible for accessing monies for key staff and programme activities. Dublin Simon will be responsible for recruiting and managing staff and maintaining the building.

It would be useful to explore new avenues of resourcing particularly the Department of Justice as a number of the service clients have been in Dochas.

The Next Steps

The momentum created by this evaluation and the commitment of the Steering Group must be maintained.

This Service is vital and there is the opportunity to really put in place a range of good practices in terms of service deliver and cross agency partnership.

There are a number of key steps needed in the next few months:

1. The Steering Group meets to discuss this report and develop a clear plan of action with stated responsibilities and timed outcomes
2. The current service explore ways of utilizing other spaces (e.g. Ana Liffey Drugs Project and Capel St) to deliver its programmes
3. The service and Middle Abbey St workers explore the option of closing the B&B for 2 hours (11 to1) a day a week and encourage the women to go to activities run by the service in Ana Liffey and Capel St. It's just an idea.
4. That Dublin Simon and all its relevant services work with the manager of the B&B to develop alternative accommodation options and supports for the men in the basement
5. That the Steering Group and manager of the service visit the building option in January to gain an insight into the opportunities to redevelop the building in line with the recommendations in this report
6. That the Steering Group develop very clear monitoring processes to ensure everyone is meeting their relevant roles and responsibilities



Recommendations

The Building

Recommendation – That by June 2006 at the latest - alternative accommodation be found to house the women and the support service.

Recommendation – These men (who use the basement beds) should be linked in with key services and alternative accommodation found for them by June 2006 at the latest.

The Support Service

Recommendation - That a clearer data collection system be developed so that information over a longer period of time can be tabulated.

Recommendation – From Dec 2005 no pregnant women should be referred into Middle Abbey St. The Steering group should also explore whether there is a need to open other avenues of referral (self referral; referral from NGO's)

Recommendation – That the support service take the initiative by organizing meetings with key managers and project workers (there's two levels of work) to explore how to create even more positive working relationships. This is of particular relevance for:

- ❑ Regular meetings with the PATCH CWO
- ❑ Ongoing links with Ana Liffey Drugs Project
- ❑ Meetings with the ACCESS team
- ❑ Meetings with Probation & Welfare Services
- ❑ Linkages with drugs and alcohol projects
- ❑ Links with the Multi D Health team
- ❑ Meetings with key social workers

Recommendation – In the short term the Steering Group should explore the option of bringing in healthy food for the women.

Recommendation – that the Steering group provide funds for these essentials to be made available free to any women who uses Middle Abbey St

Recommendation – When the service moves to a new building that Dublin Simon and the Support Service be totally responsible for the service, workers and maintenance of the building - including all service and organisational quality standards of practice. That the Service contract with Dublin Simon be extended for a further 2 years.

Recommendation - The Steering Group continue to meet to 2007 and play a significant part in forming the strategic plan, governance and transition to a



new building. That the Steering Group reclarify its roles and responsibilities in the light of this reports recommendations. That the senior managers continue to be part of the Steering group. That the Steering Group take time to reflect on its progress and develop ongoing actions to maintain its momentum.

**Thank you
all for the
time you
took to
share your
views.**

**Particular
thanks to
the Team
for inputting
3 months
data onto
excel sheets**

**Special
thanks to
Babs, Sean
and Caroline
for the time
you gave to
lengthy
meetings**

**Finally,
many
thanks to
the Steering
Group for
answering
all my
emails
-and your
real
commitment
to
improving
the service
for the
women**

Organisations that participated in interviews

Many thanks to all the people who participated in this review. There were people I could not interview due to time constraints – I'm sorry and hope this report reflects your key concerns. If it doesn't then contact the manager of the support service.

4 women who stay in Middle Abbey St B&B
Sean Moynihan – Dublin Simon
Barbara Corcoran – Dublin Simon
Caroline Maher – Dublin Simon
Amanda Bradley – Dublin Simon
Vicki Fermoye – Dublin Simon
Annette ONeill – Dublin Simon
Michelle McCullough – Dublin Simon
Catherine Kenny – Dublin Simon
Dave Maguire – Dublin Simon
Mandy xxx – Middle Abbey St worker
Eamon xxx – Middle Abbey St manager
Marina xx – Patch CWO
Vincent Healy – DCC Homeless Services Unit
Derek Healy – DCC Homeless Services Unit
George Finglas – DCC Homeles Services Unit
Eddie Matthews – HSE Social Inclusion Unit
Mary Martin – HSE Social Inclusion Unit
Sam Priestly – Depaul Trust
Tony Duffin – Ana Liffey Drugs Project
Catri OKane – Simon Communities Ireland
Vivian Geiran – HOST Probation & Welfare Services
Joanne Fenton – Access Mental Health Team
Simon Brooke – Housing and Policy consultant
Derval Howley – Homeless Agency
Jo Ahern – Homeless Agency



Bibliography

I have most of these papers on computer and would be happy to email them to you. Let me know which ones you want by emailing me at focusedsolutions1st@gmail.com

Homelessness and Women Offenders. Developing and delivering an integrated and comprehensive response. Summary of a daylong seminar run in Jan 2005 by the Homeless Agency and Probation and Welfare Services

Working Group to examine the developing needs of a psychiatric service for homeless people in the HSE Northern Area/HSE South Western Area. Jan 2005.

Innovative approaches for providing services to homeless people with concurrent disorders – a review of literature. Canada. Kraus & Serge. 2005 (pdf)

Strategies for reducing chronic street homelessness. US Dept of Housing and Urban Development (HUD). 2004 (pdf)

Partners in Prevention. Speech to Glasgow Homelessness Network Conference by the Director of the Scottish Assoc. for Mental Health. Oct 2005 (pdf)

Voices from the Frontlines –women centred care in Manitoba and Saskatchewan. 2003. (pdf)

Common Occurrence – The impact of homelessness on Women's health – Toronto Community Care. 1997 (pdf)

Integrated health services for women who are homeless and at risk of homelessness. The situation in Toronto. Whitzman and Herlihy. 2003 (pdf)

Good practice in working with women – Homeless Link UK (pdf)

Struggle to close the gap in resources for homeless women. The Portland Alliance. May 2005. (pdf)

Staffing in Homeless Services. Simon Brooke. Unpublished draft copy.

Review of Temporary Accommodation in Dublin. Roger Courtney. 2005. unpublished draft copy.

Substance abuse treatment and care for women – case studies and lessons learnt. United Nations Office on Drugs and Crime. 2005 (pdf)

Dublin Simon Community – Permanent Supported Housing. An evaluation. Simon Brooke. 2002. internal document

Key working in Dublin. Liz Lennon. 2003. On Homeless Agency website

A study of the number, profile and progression routes of homeless persons before the court and in custody. Seymour and Costello. 2005. (pdf)



Comments to Liz on the Draft.