

New conversations about
severe & multiple disadvantage

GENDER MATTERS

Summary Report

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severe & multiple disadvantage

CONNECTED

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MY

THE DISADVANTAGES WE FACE, AND OUR EXPERIENCE OF THEM, ARE SHAPED BY MANY FACTORS, INCLUDING ETHNICITY, GEOGRAPHIC LOCATION, SEXUALITY AND AGE. THIS STUDY EXPLORES THE DIFFERENCE THAT GENDER MAKES.

Our report *Hard Edges* (Bramley et al, 2015) proved an important resource for those wanting to understand how disadvantages cluster, escalate and perpetuate one another. It provided Lankelly Chase with a clear evidence base for our core contention that for many people problems do not exist in isolation. From the response to the report, it was clear that it resonated with the experience of people from all parts of the relevant systems too.



The findings point to a significant number of women who face combinations of severe disadvantage at least as serious as those faced by men and on an equivalent scale.

**Julian Corner
Cathy Stancer
Lankelly Chase**

Hard Edges' (2015) definition of 'severe and multiple disadvantage' included offending as one of the primary domains, alongside homelessness and substance misuse. This grouping of issues is undoubtedly significant and does play out in a cyclical, self-perpetuating way in people's lives. Including offending in the definition inevitably means that this particular form of severe and multiple disadvantage is a phenomenon that predominantly affects men (who are the large majority of those in the criminal justice system). We are very conscious that there are other forms of severe and multiple disadvantage – related but distinct – that affect women. For this reason it is important that the Hard Edges (2015) definition is not employed as the only basis for responding to multiple disadvantage.

Following Hard Edges (2015), we began a process to explore how disadvantages might cluster differently in the lives of women. This included consultation with women facing

multiple disadvantage about the experiences most relevant to them. They concluded that interpersonal violence and abuse and poor mental health would both cast more light on gendered differences.

In common with previous studies, 'severe and multiple disadvantage' is taken here to include experience of homelessness and substance misuse but violence and abuse and poor mental health are also included as primary domains. By using an alternative definition and different data sources a different profile of people emerges. The findings point to a significant number of women who face combinations of severe disadvantage at least as serious as those faced by men and on an equivalent scale. Part of the reason this hasn't been so visible before is because we have relied on administrative data from services, and so the experiences of people who aren't on their caseloads have remained hidden.

Perhaps the starkest finding of the report is the degree to which violence and abuse in the home are ongoing facts of life, from childhood onwards, for many people facing severe and multiple disadvantage, particularly women. This has been highlighted many times before, including recently by Agenda and Ava's National Commission on Domestic and Sexual Violence and Multiple Disadvantage. This issue clearly warrants more attention. Understandably much of the focus will be on the case for improved service responses to violence and abuse. However, we also need to consider who is responsible for this violence and what is happening in our society to create the conditions for the violence and abuse catalogued here.

We hope that the different domains profiled in this report will prompt some reflection on the way that data shapes responses. We believe this report challenges us all – not least Lankelly Chase – to notice how our ways of understanding complex social issues can either draw us toward or lead us away from models that take sufficient account of diverse experiences. Responding to this challenge requires deep reflection on the assumptions we hold, but equally it requires urgent correction of strategies that threaten to skew resources away from women for another generation.

This study explores the different ways that severe disadvantages coalesce and sometimes multiply in the lives of men and women.

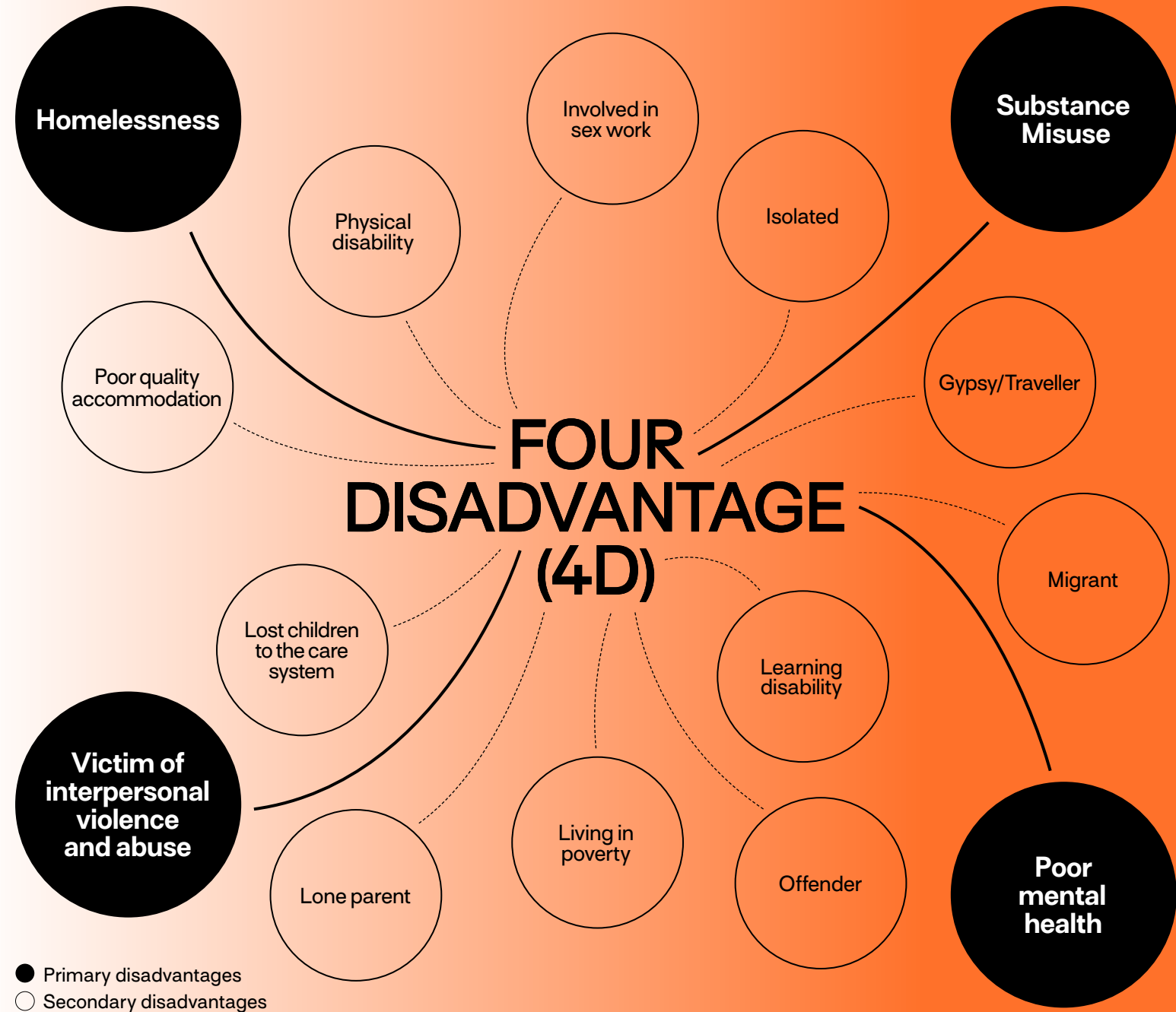


It uses a different definition of severe and multiple disadvantage from that employed in previous research (notably Hard Edges in 2015). This was in order to cast light on gendered differences in the experience of severe and multiple disadvantage – and the experiences of women in particular – given that the vast majority of people identified in the previous research were men.

The alternative definition used here is based on a predecessor study *Women and Girls Facing Severe and Multiple Disadvantage* (McNeish et al, 2016). It was based on an extensive review of potential data sources, consultations with women with lived experience of severe and multiple

disadvantage, and discussions with support providers. It includes experience of interpersonal violence and poor mental health, alongside homelessness and substance misuse, as ‘primary’ domains of disadvantages. The definition also considers a number of other ‘secondary’ domains of disadvantage including poverty, disability, and social isolation, among others.

Disadvantages experienced throughout adulthood (‘ever’) as well as current (coinciding) experiences are taken into account in recognition of their cumulative impact.



“People like us – we’re avoiding services. There’s a lot of people struggling but wouldn’t go for help. We’re seeing the tip of the iceberg with these figures.”

Methodology

Data was drawn from general population surveys and administrative data collected by services in order to cover both the private household and homeless populations in England.

Two approaches were taken to analysing the data:

A. The first started with the number and types of disadvantages. This is an ‘analyst-driven’ approach, where the analyst groups individuals depending on the number of primary disadvantages they had experienced.

B. The second used a method called Latent Class Analysis in which computer software seeks out patterns in the data and so highlights groups with similar clusters of primary and secondary disadvantage.

The resulting estimates are likely to be conservative. Some people, perhaps women in particular, actively avoid some services, often due to negative experiences, shame, stigma, and fear of losing children. Others facing severe disadvantage may not be the priority of services for a variety of reasons. And some people do not appear in household surveys or feature only in such small numbers that little or no useful analysis of their experiences can be conducted.

Overall Scale

“Pretty much all of these are connected. Which comes first depends on where you are in this cycle. It might not always result in homelessness. There are often financial difficulties in there increasing stress – or financial abuse through gambling for example. But there will always be an element of mental health as a result of all the others”.

We found that each year around 336,000 adults in England experience at least three of the primary domains of disadvantage examined: homelessness, substance misuse, poor mental health, and being a victim of violence and abuse. Of these, there are approximately the same number of women as men.



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EXPERIENCE OF DISADVANTAGE IS GENDERED

“When you’re struggling with domestic violence it makes you feel so small it does fuck with your head, because it chips away at you – not just the physical but the mental... you tell yourself you’ve got control of it that the beating you had yesterday wasn’t as bad as it was last week and it messes your head up and even if you see it as a kid it messes you for the rest of your life. My[current] husband has never hit me but if he moves too quickly I still flinch.”

This analysis brings into view many more women than the original Hard Edges (2015) study, and shows the gendered nature of the various patterns of disadvantage experienced. For example:

1.1m

1.1million adults, a majority of whom are women, have experienced violence and abuse, mental ill health and either homelessness or substance misuse at some point in adulthood.

0.9m

0.9million people have ‘ever’ experienced the combination of poor mental health and substance misuse but in this case, three-quarters are men.

2m

Experience of ‘less complex’ combinations of disadvantage are widespread, with **2 million adults (4.4%)** experiencing two of the primary domains concurrently. Over **half of all women** (compared to 42% of men) report experience of at least one primary domain over adulthood.



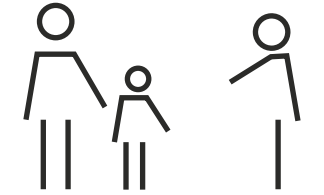
The way disadvantages cluster, in people's current experience or across the lifecourse, is also seen to be highly gendered.

4D

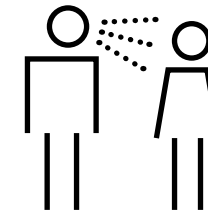
The number of people experiencing all four domains at the same time (within a single year) is approximately **17,000**, of whom **70% are women**.



In terms of household composition, **women with experience of the most complex combinations of disadvantage are much more likely to be in a family (single or dual parent) with children or living alone. Men with the most complex combinations are most likely to be in a large all-adult household or living alone.**



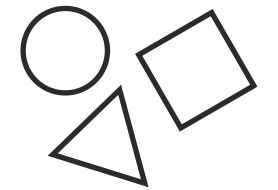
A substantial proportion of women with experience of complex combinations of disadvantage have lost children to the care system, itself a form of severe disadvantage.



Experiences of **poor mental health and having been a victim of violence and abuse are particularly common among women**. The two experiences are closely linked.



Striking differences are found between the profiles of men and women who have had contact with the criminal justice system. Although the number of women is relatively small, those reporting experience of other primary disadvantage domains is very high. **The sharpest difference is in experience of violence and abuse**, but these women are also much more likely to have had experience of homelessness and poor mental health.



Among men who are in contact with homelessness-related services, **there is a very strong association between being a victim of violence and abuse and having a learning disability.**

THERE ARE GROUPS OF PEOPLE WE HAVEN'T 'SEEN' BEFORE



“It’s a circle, one little problem but to solve that you got to do this thing, and to solve that you’ve to do this thing. Let’s face it if you had a million pounds you wouldn’t be homeless or drug dependent would you?”

This analysis also highlights certain gendered groups of people who have not previously featured in discussions of severe and multiple disadvantage:

A sizable group of men (6% of those aged 16–64) is identified who have experience of poor mental health (but not homelessness, substance misuse or interpersonal violence and abuse) and who are also very disadvantaged socioeconomically. Very few members of this group are living in families.

A group of women have been highlighted who have significant experience of primary and secondary disadvantage domains over the course of adulthood but who, despite that, are not disadvantaged socioeconomically.

Another group of women have been identified with experience of mental health problems but not other primary domains. These women are highly deprived in socioeconomic terms. Asian/Asian British and Black/Black British women are significantly overrepresented in this group.

“I was neglected as a child and I ran to the drugs world cos it made me feel better. When I had a child, I didn’t know how to look after him.”



“THINGS IN LIFE YOU CAN'T COPE WITH. FINANCIAL, LOSING JOBS, NOT ABLE TO KEEP TENANCY COS THINGS GO WRONG... ONE THING HAPPENS, THEN ANOTHER – IT'S A DOWNWARD SPIRAL”

MANY EXPERIENCES ARE ALSO SHARED



Despite these differences, men and women do share many of the disadvantages described, although they may not experience them in quite the same way or with the same consequences.

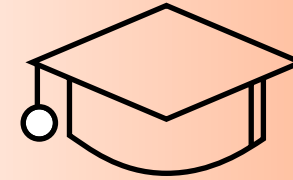
Both women and men who face the most complex combinations of disadvantages are highly likely to report having experienced abuse or neglect when they were children.

The children of parents experiencing more complex combinations of primary disadvantage domains are more likely themselves to be experiencing a higher number of adverse experiences than children of parents experiencing no or little such disadvantage.

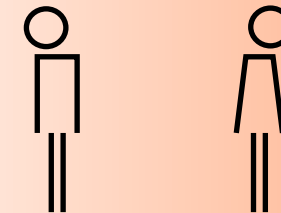
The likelihood of being a parent among women and men in the groups facing the most complex combinations of disadvantage (in the private household population) is slightly higher than in the general population.

There is a substantial gulf between those who have faced more complex combinations of disadvantage and the general population in terms of educational qualifications.

For most of the combinations of current experiences of primary disadvantages, the prevalence of learning disability is often significantly higher than the national rate.



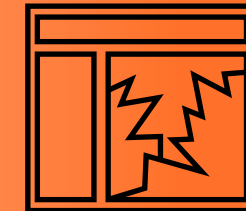
When compared to the general population **women experiencing the most complex combinations of disadvantage** have two-and-a-half times the chance of having no qualifications. **Men experiencing complex disadvantage** are three-and-a-half times more likely to have no qualifications.



Social isolation is around six times more prevalent for women and men experiencing the most complex combinations of disadvantage, than is true in the general population.



For the groups facing the most complex combinations of disadvantage, **the rates of disability are six to eight times higher than those not reporting primary disadvantage.** The prevalence of physical disability almost always increases as the count of primary domains of disadvantage increases.



There is a very clear concentration of people affected by more complex combinations of primary and secondary domains of disadvantage in deprived neighbourhoods.

WHAT THIS IS TELLING US

“The few families I know where women have become homeless, it’s to do with violence. Drink and drugs sometimes has led to the violence with the husband using drugs and later became violent to the wife”

There are strong commonalities and important differences in the patterns of disadvantage experienced by women and men. Men and women share many of the things described here – adverse childhood experiences, living in places characterised by neighbourhood deprivation, often (but not always) poverty, high rates of social isolation and disability, and insecure accommodation.

At the same time, experiences diverge and disadvantages coalesce in different ways. Poor mental health and violence and abuse are particularly significant in the lives of women, and poor mental health and substance misuse in men’s lives. Responsibility for child care, and the loss of children, also mark women’s experiences out as different. And there are important insights into severe disadvantages faced by BAME women and by women who do not live in poverty.

Our immediate responsibility is to acknowledge and engage with the reality of the differences revealed here, rather than relying on generic responses that serve few if any people well. And longer term, we need to better understand the dynamics underlying these gender differences, the interconnections between them, so that we can move towards more sustainable and fundamental shifts in response.



We would like to express our sincere thanks to the many groups and individuals who have contributed in various ways to the production of this report.

This project was undertaken as a collaboration between researchers at Heriot-Watt University and DMSS Research. DMSS led a series of consultations with a range of severely disadvantaged women – in order that this work would be informed by their lived experiences and their perspectives on gender and multiple disadvantage – and produced a conceptual report which has helped shape the analysis (McNeish and Scott, 2017). In addition we are grateful for the assistance of NatCen Social Research who ran specific analyses under their Adult Psychiatric Morbidity Survey (APMS) data use agreement with NHS Digital. The authors would like to acknowledge the support and advice of Di McNeish, Sara Scott and Sally McManus in the production of the report.

Particular thanks are due to the advisory group members, and to the six groups of women around the country who shared their varied experience of multiple disadvantage with us and whose perspectives and advice have been so important in shaping this study. The quotes in this summary are taken from consultation events with them

We would also like to extend our thanks to the following organisations for granting permission to use and/or facilitating access to data sources:

- NHS Digital for access to APMS data
- Department for Communities and Local Government for access to Supporting People data
- St Mungo’s for access to Combined Homelessness and Information Network (CHAIN) and Client Needs Survey data
- Department for Education for access to Children in Need data
- Public Health England for access to National Drug Treatment Monitoring System (NDTMS) data.

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The photography that is woven through this report emerged in part, from a co-designed, participatory workshop between people with lived experience of severe and multiple disadvantage, staff and volunteers in frontline services and the photographers. We would like to extend our warm thanks to everyone who participated so openly and enthusiastically.

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