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Women and girls facing severe and multiple disadvantage

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An interim report

Lankelly Chase

Foreword

Who is affected and what their lives are like

Since Lankelly Chase began working on the issue of severe and multiple disadvantage in 2011 we have known it is necessary to build a profile of who is affected and what their lives are like.

Initially this seemed like a straightforward proposition and we approached it in a logical way. We undertook a literature review which attempted to define the issue politically and provide data on its scope and scale. We then commissioned Hard Edges, a statistical profile, which was based on the premise that ‘severe and multiple disadvantage’ could be explained as the combined experience of homelessness, substance misuse and criminal justice systems.

“

If you have scars you can say: this is what he’s done – but no one can see what he’s done to your head

”

Hard Edges was significant in providing important new data which supported our core contention about the interlocking nature of disadvantages but more than that, it revealed multiple perspectives on the same apparently simple question, and drove us forward to consider other ways of understanding multiple disadvantage.

Perhaps most significantly, it quickly highlighted that the way the ‘who’ question is framed is subjective and that decisions about what needs or experiences are included will determine the profile and therefore the ‘group’ or ‘cohort’ that is arrived at.

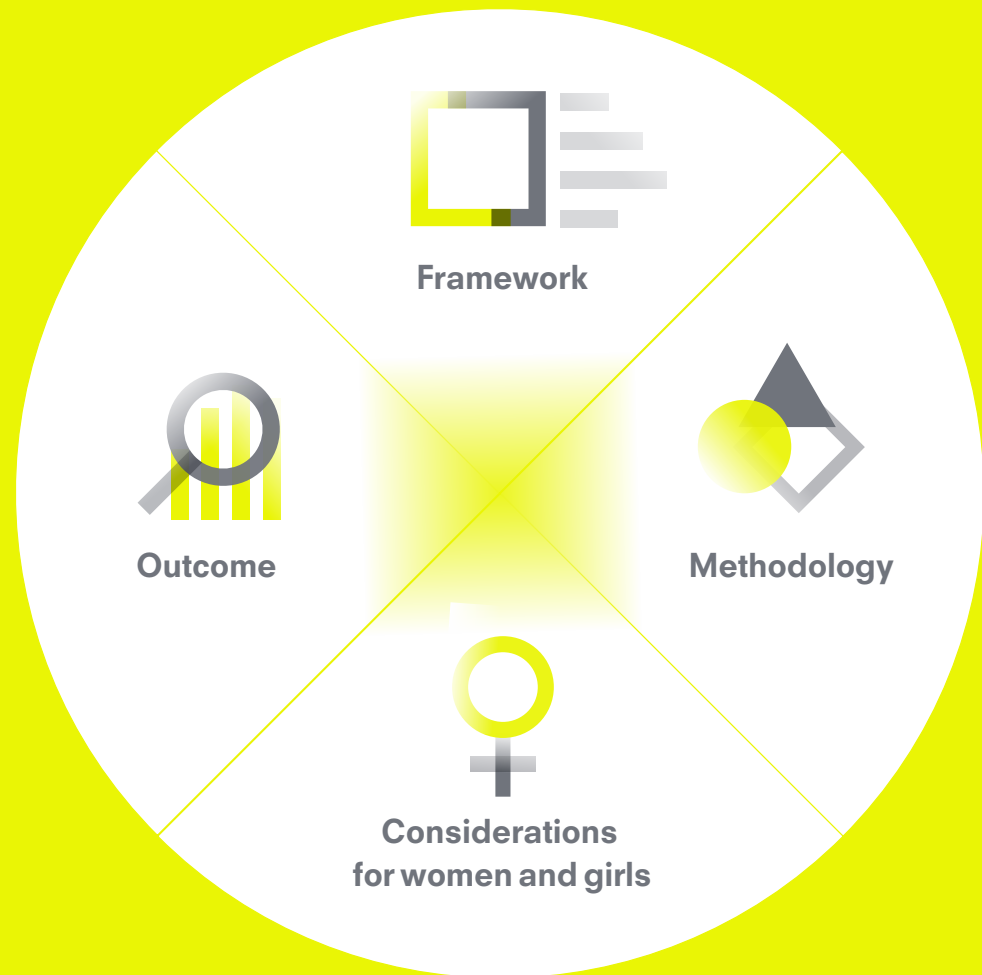
So, the question underpinning Hard Edges, ‘who is simultaneously in homelessness, substance misuse and offender services?’ had the answer ‘mainly white men’. Some might argue that there is indeed something uniquely severely and multiply disadvantaged about this cohort; but a different question might lead to a different answer more closely aligned to the experiences of other groups such as Muslim women or young Black men.

On reflection, our current view is that there appears to be a fundamental problem with categorising people.

There is no clear ‘hierarchy’ of severe and multiple disadvantage, and that categories aimed at extending the inclusion of some people can inadvertently entrench the exclusion of others.

The experience of working on Hard Edges has profoundly affected how we see and approach the question of who faces severe and multiple disadvantage – not as a question with a right answer, but more as an ongoing inquiry. We now aim to encourage a more curious and open culture of engagement with a question that is both inherently complex.

Profiling severe and multiple disadvantage



What we think severe and multiple disadvantage ‘means’ influences where we look for people facing SMD; and where we look determines who we find. Different definitions of SMD – for example facing a specific set of problems right now, or having had a certain set of

experiences during a lifetime – give us different answers to the question ‘who faces severe and multiple disadvantage?’ and include or exclude different groups of women and girls living tough lives. Five different approaches to this problem are explained opposite.

Framework	Methodology	Considerations for women and girls	Outcome
1 Defined categories ...experience of particular disadvantages	Define categories of disadvantage and use available data to profile people in these categories.	Some categories of disadvantage are highly gendered. For example, women are more likely to have been victims of domestic abuse.	If data for the chosen categories is available, a clear profile can be created, fixed at a point in time.
2 Risk factors ...high exposure to risk factors	Identify relevant indicators of risk and examine population samples to estimate likely prevalence.	Many risk factors are faced by both genders, such as experience of abuse, but the trajectories for men and women differ.	Might arrive at a broader group, not all of whom would go on to face severe and multiple disadvantage.
3 Social inequalities ...inequalities and oppressions in society	Identify groups with least access to power and explore connection between social categories and hierarchical position.	Experience of women ‘at the margins’ is linked to gender inequality in wider society and expectations of ‘womanhood’.	This could lead to a narrow poverty-focused picture of inequality, since the focus on broader inequalities is not a good fit with datasets.
4 Rights-based ...inability to exercise human rights	Agree rights to be included and identify circumstances that undermine these rights.	Men and women value rights differently; women place high value on freedom from male violence and sexual and reproductive choice.	Measuring the absence of rights is difficult, but this inclusive approach could capture people not included in current analyses.
5 Capabilities ...limited opportunities for a good life	Define most important capabilities and identify whose freedoms to enjoy these are most compromised.	Core capabilities, such as voice and influence, physical security and independence, can be harder for disadvantaged women to experience.	Finding data sources that measure capabilities may be hard, but could provide a rich picture of what is feasible for different groups.

Introduction



Get women's voices heard; encourage women to share their experiences and views; emphasise the legitimacy of these; use confidence building workshops



Lankelly Chase commissioned Heriot-Watt University and DMSS Research to carry out work to conceptualise what severe and multiple disadvantage (SMD) looks like for women and girls in the UK and to assess the feasibility of developing a statistical profile. It builds upon two previous reports: **Hard Edges: Mapping Severe and Multiple Disadvantage**,¹ a profiling exercise carried out by Heriot-Watt University based on analysis of data

on people experiencing homelessness, substance misuse and involvement with the criminal justice system. This provided a picture of those living on the 'extreme margins' as predominantly male. **Women and Girls at Risk: Evidence Across the Lifecourse**,² a review by DMSS Research, highlighting the importance of understanding women's experience of SMD differently to that of men.

1. Bramley G and Fitzpatrick S with Edwards J, Ford D, Johnsen S, Sosenko F and Watkins D (2015) *Hard Edges: Mapping Severe and Multiple Disadvantage* lankellychase.org.uk/multiple-disadvantage/publications/hard-edges
2. Di McNeish and Sara Scott (2014) *Women and Girls at Risk: Evidence Across the Lifecourse* lankellychase.org.uk/women-and-girls



Five conceptual frameworks

The report explores five potential frameworks for conceptualising SMD and their implications for an understanding of SMD for women and girls. Identification of these conceptual frameworks is based on a desk based review of literature and consultation with a range of experts, including women and girls with expertise from lived experience, academics, and service providers.

1

A defined categories approach

2

A risk factors approach

3

A social inequalities approach

4

A rights-based approach

5

A capabilities approach

“

Women who have lots of things going on – poverty and when you’ve had bad childhood there’s a domino effect – it’s a vicious cycle

”

1

A defined categories approach

SMD is understood in terms of women's experience of particular (or clusters of) disadvantages. Using this approach statistical profiles would be developed by agreeing the categories of disadvantage to be included and using available data to analyse the number and characteristics of those who appear in these.

Each of the consultations came up with groups of women they thought were particularly disadvantaged including:

- Women with mental health problems
- Lone mothers
- Migrant women
- Women who speak little English
- Traveller women
- Women who are isolated
- Women with disabilities/learning disabilities

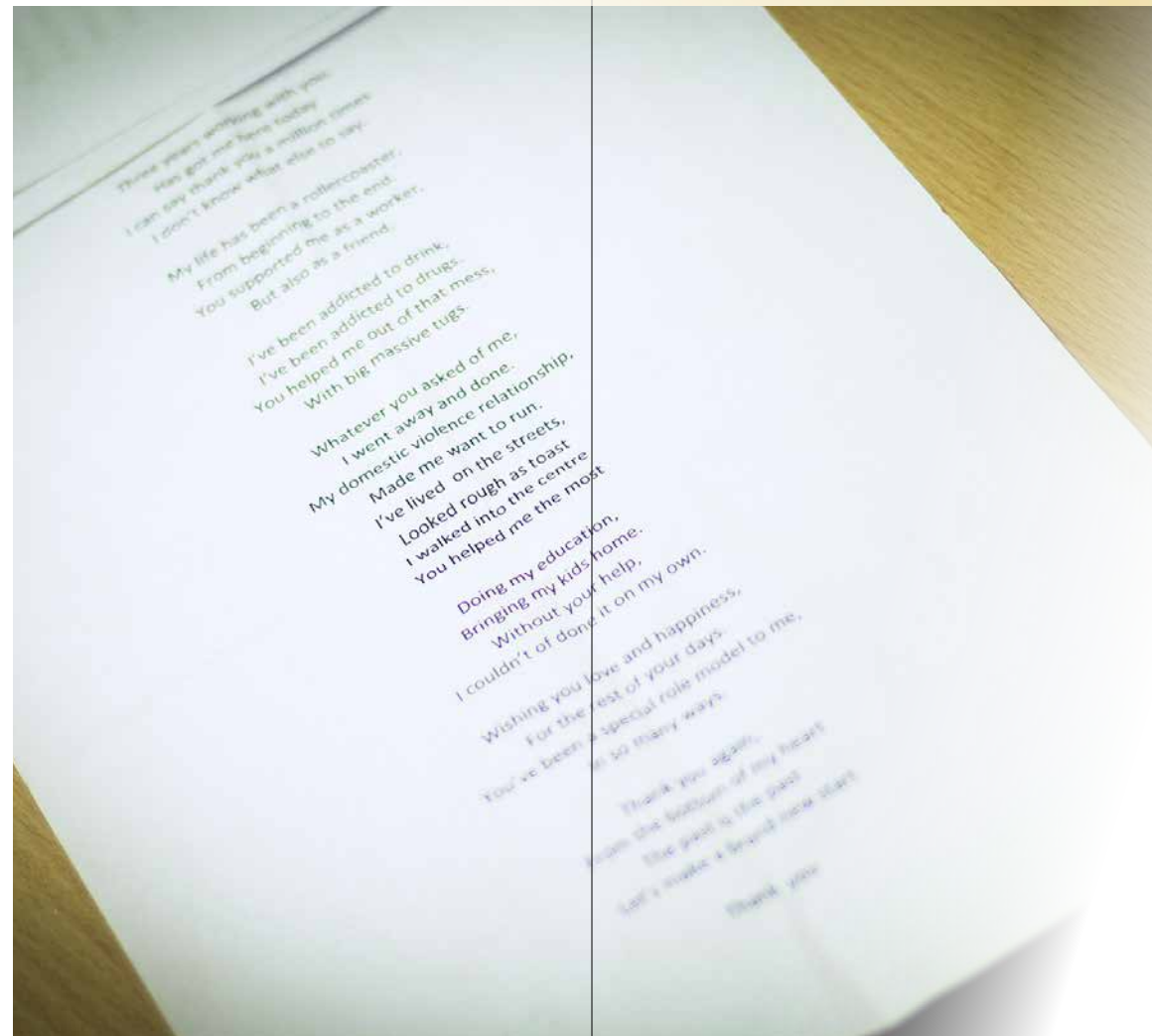
- Women who are homeless or in poor quality or insecure housing
- Women dependent on drugs and/or alcohol
- Women who are sexually exploited/involved in prostitution
- Women subjected to domestic violence and abuse
- Women who have lost their children to the care system
- Women involved with the criminal justice system.

A consensus across the consultation was that women who experience greatest disadvantage are those who have a multiplicity of such factors in their lives.

A profile of SMD would require data sources on as many of these groups/factors as possible and identify those who appeared in one or more.



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2

A risk factors approach

SMD is understood in terms of women's exposure to a range of risk factors (which may include structural, social or personal factors) which increase the likelihood of SMD. Statistical profiles would be based on identifying relevant indicators of risk (those factors which evidence has shown to be the most reliable predictors of SMD) and using data from population samples to estimate likely prevalence.

An understanding of risk factors for women and girls and the way that these interact with gendered expectations identifies groups who are more likely to experience SMD across the life-course. Extensive experience of violence and abuse is a key risk factor in women's disadvantage and gendered pathways which means that women and girls are more likely to become visible as clients of mental health, violence and abuse and children's services, than visible in the criminal justice system or as clients of drug and alcohol services.

Amongst those women who do fall into the drugs/crime/homelessness categories, experiences of interpersonal violence/abuse and mental health issues are likely to be of significance and particular gendered experiences (e.g. having been sexually exploited and having children taken into care) are likely to feature.

2.5%

Using household survey data it is estimated that 1.2 million people (2.5% of all adults) are multiply disadvantaged.

3

A social inequalities approach

SMD is understood in terms of women’s position in relation to social hierarchies and power. Profiles would be developed by identifying those women who experience the most toxic consequences of inequality and oppression: those with the most unequal access to power and resources and who are most oppressed by dominant ideologies and institutions.



These will be women whose significant relationships since childhood have been characterised by violence and abuse; who have experienced additional vulnerability over their lifetime because of their membership of additional disadvantaged social groups; who may have had high levels of contact with institutions and services that support social inequalities; who have experienced lifelong hardship, exploitation and discrimination arising from their gender, and been part of other disadvantaged social groups compounded by poverty and restricted access to resources and opportunities.

Whilst a social inequalities perspective has much to contribute to our understanding of why some groups of women face SMD and how their experiences are compounded by gender and other inequalities, it is less useful as a means of developing a statistical profile.

“
Women will put up with domestic violence because of the kids. In the end I only left cos I knew otherwise I’d be coming out in a straightjacket or a body bag
 ”

4

A rights-based approach

SMD is understood in terms of women’s access to and ability to exercise human rights, using the example of a feminist rights framework. Profiles would be developed by agreeing which human rights should be applied and identifying those groups of women whose rights are most denied, undermined or threatened. This may include women who are drug dependent or involved with the criminal justice system, as well as asylum seekers, trafficked women and traveller/Roma women – and some of those living in restrictive families and communities.



5

A capabilities approach

SMD is understood in terms of women’s freedom to flourish through possession of defined capabilities (such as the capability to be healthy and participate in society). Profiles would be developed by defining the most important capabilities for women and identifying those whose substantive freedoms to enjoy these are most compromised. These will be women who have the least entitlement or the most restricted access to opportunities; whose capabilities are severely constrained by a lack of economic and social resources or whose capabilities are undermined by limited personal capacities as a consequence of their life experiences and circumstances.

Feasibility of building statistical profiles

Using the conceptual approaches, the report explores the feasibility of answering the following research questions:

- How many girls and women are experiencing SMD?
- How many women live with partners who are affected by SMD?
- How many girls live in households where one or both parents are affected by SMD?
- What are the overlaps between domains of SMD in the case of women and girls?
- What are the risk factors associated with SMD for women and girls?
- What is the quality of life of women affected by SMD?

Our overall conclusion is that it is feasible to apply the **defined categories approach** to build a statistical

profile of women and girls facing SMD and that it may also be feasible to apply a **capabilities approach** provided an agreed list of capabilities and associated indicators could be generated and agreed.

We conclude that the **social inequalities approach** is, in practice, not conducive to the task of building a statistical profile. Whilst it has explanatory potential (particularly its emphasis on ‘hidden’ power and intersectionality) and sensitivity to changes to social context over time, the approach is less useful at identifying SMD in practice. Counting those women and girls who are at the ‘intersections’ of social inequalities would produce an over-estimate of SMD as not all women disadvantaged in this way necessarily end up lacking resources or suffering from abuse or exploitation. On the flip

side, there are women who are not at the intersections of disadvantage but who end up experiencing SMD for other reasons. There is no satisfactory way of addressing these difficulties statistically.

We have also concluded that a **risk factors approach** is not appropriate for generating statistical profiles of those experiencing SMD. We have good evidence about the groups of women and girls who are at risk of disadvantage, but measuring risk (whilst important for planning preventative interventions) does not equate to measuring actual SMD. Identifying those at greatest risk of SMD will result in a number of ‘false positives’ – identifying women, who despite having multiple risk factors in their lives, do not become severely and multiply disadvantaged.

Potential sources of data

The feasibility study examined three types of data: **survey data**; **administrative client-level data generated by authorities**; and **organisational client data generated by non-statutory services**. Attention was paid to the types of data available, their strengths and weaknesses in addressing the research questions, the likely quality of data and the inherent biases in different data sources.

Applying a defined categories approach, our feasibility study has identified five datasets which could usefully be explored in developing SMD profiles for adult women. Collectively these offer data on the core domains of SMD which recurred in our consultation exercise and would generate data on many of the specific groups identified as most likely to be experiencing SMD. The five datasets identified are:

- Supporting People
- Adult Psychiatric Morbidity Survey
- Crime Survey for England and Wales
- Poverty and Social Exclusion
- Multiple Exclusion Homelessness.

With respect to specific populations known to suffer from high rates of SMD, the Combined Homelessness and Information Network (CHAIN) data could be analysed for rough sleeping women in London and OASys can be investigated for female offenders.

For girls, our feasibility study identified six datasets, including Children in Need, Supporting People, Crime Survey for England and Wales, the ‘Young Runaways’ 2005 survey, Mental Health of Children & Young People 2004 survey and ALSPAC or MCS Age 14 Sweep. The Looked

After Children dataset could be used for exploring SMD among the specific population of children involved with the care system.

If a rights and/or capabilities approach were to be adopted, the Understanding Society Survey and PSE survey can be employed. Considerably more preparatory work would be needed to clarify the indicators of capabilities but these datasets do provide data on potential indicators such as levels of participation in society.



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