



Applying trauma-informed care in supported housing services.

28th January 2026

What is a hostel in 21st century Britain?

Homeless Link event: 28 January 2026



Centre for
Homelessness Impact





Overview of the findings

Michelle Binfield

Director of Programmes and Implementation, CHI



Unpacking the modern hostel: insights and opportunities



Hostels play a significant role in the homelessness crisis response. But what exactly is that role in the 21st century?

Our project set out to shed light on the diverse landscape of hostels in UK.





What did we do?

We partnered with the Cambridge Centre for Housing and Planning Research to conduct a comprehensive survey of hostels across the UK. Gathered responses from 317 unique services In England, Scotland, Wales and Northern Ireland.

Our goal was to gather data on hostel characteristics and performance indicators, ultimately developing an evidence-based typology to better understand and evaluate different models.





Inside the modern hostel: size, space and facilities

Our research revealed that hostels vary significantly in size and structure. Many are relatively small, with a third offering 10 or fewer bed spaces. Larger hostels with over 50 beds account for about 15%.

Interesting to note that purpose built hostels tended to be larger on average.

Most hostels provide self-contained accommodation with private bedrooms, and around a quarter offer ensuite facilities and private kitchens.





Groups targeted and excluded

Most hostels targeted single individuals and excluded couples (39.2%), and people without a local connection (20%).

Many also accept people they are not necessarily equipped to support: for example, 79% accommodated people with learning difficulties, while only 39% targeted them; and 78% accommodated people leaving prison, while only 40% targeted them.





Pathways from hostels

The intended length of stay in hostels varies, but it is often longer than initially planned.

While many residents successfully move on to long-term housing, a significant proportion experience 'sideways' or 'negative' moves. This highlights the need for ongoing support and improved pathways to settled housing.

A fifth of hostels reported achieving successful moves for less than one in six people.





The range of support in hostels

Over 70% provide a range of support services, including help with housing, benefits, employment, and wellbeing. Over 90% say they offer psychologically informed support.

Most offer 24-hour staffing, with varying levels of support intensity. There is also significant variation in policies around substance use, with some hostels permitting managed consumption of drugs and alcohol.



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Applying trauma-informed care in supported housing services: animation

Jo Turner - Homeless Link



What is trauma-informed care (TIC)?



- A relationship-based approach that organisations can adopt
- Focuses on understanding trauma and its impact on people
- TIC ensures services provide effective support, and avoid re-traumatising people who use or work within services



Supported Housing Practice Forums



Frontline Workers

4th March, 2-3pm

- Session will focus on how we can ensure the intake process (how someone is welcomed into a service) is trauma-informed.
- How small intentional shifts in practice can have a huge impact.

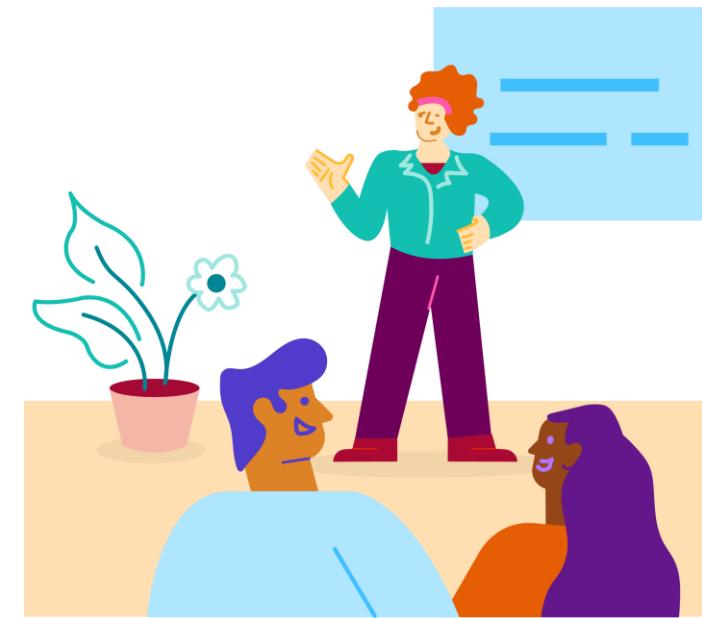
[Register for a place here](#)

Managers

19th March, 2-3pm

- Session will focus on how changes to policies and procedures during the intake process, can impact how someone settles into their accommodation.

[Register for a place here](#)



Scenario 1: Jamie is not engaging in support



Non-Trauma-Informed Response:

- Staff become frustrated and confront Jamie directly, telling him he must attend sessions or risk losing his bed space.
- Non-engagement with support leads to a first warning, which could end in an eviction if nothing changes.
- Jamie feels blamed, pressured, and shamed, increasing disengagement and his distrust of staff.

Trauma-Informed Response:

- Staff approach the situation calmly, observing Jamie's body language and mood
- Staff offer flexible options for engagement
- They explore barriers to participation collaboratively
- The focus is on building trust, supporting empowerment, and validating feelings rather than enforcing rules and expectations.

Scenario 2: Altercation between Amara & Sarah



Non-Trauma-Informed Response:

- Staff intervene immediately with authoritative commands, telling Amara and Sarah to stop or threatening consequences.
- Focus is on control and punishment rather than understanding what triggered the conflict.
- Amara and Sarah may feel embarrassed, threatened, or unfairly treated, which could increase tension or future conflict.

Trauma-Informed Response:

- Staff ensure the safety of all individuals
- They separate Amara and Sarah calmly if needed
- Staff listen to each person individually to understand the trigger
- They may offer to facilitate a conversation between Amara and Sarah
- Focus is on restoring safety, supporting emotional regulation, and promoting respect

*HOW WE EMBED TRAUMA INFORMED PRACTICE
INTO DIRECT ACCESS ACCOMMODATION SERVICES
WITHIN NEWCASTLE.*

-HANNAH CARMICHAEL

Welcoming someone to the service

- Cup of tea
- Tour of the service and demonstration of available appliances/facilities
- Introduction to the team
- Asking preferred name/pronouns
- Identify possible language need
- Explaining the safety of the building
- Refrain from overwhelming the individual
- Availability of staff



Assessment and Admit Paperwork

Admit Assessment

CHANGING LIVES

Working together - What would you like us to call you? Pronouns? Anything happening in your life that is worrying you or causing you stress <i>at the moment</i> that we can support with? Do you feel safe <i>at the moment</i> ? Is there anything we can do to help you feel safe? Preferred way of communicating messages – face to face / note under door / text message?	Physical Health - Any current health concerns? Registered with GP? Seizures? Allergies? Struggle to eat or sleep? Sexual health? Mobility in case of fire, lift access? Any longstanding health issues? Disabilities? Is there anything we can do to support with your physical health? On any medication?
Mental Health - History? Anxiety? Depression? Self-harm? Suicidal ideation? Recent or historic attempts? Psychotic symptoms? Involuntary hospitalisation? Official diagnosis? Medication? Triggers? Any current support? Is there anything we can do to support you with your mental health? Any side effects staff need to be aware of?	Social functioning - What school did you go to? any problems with reading or writing? Anyone who supports you? Do you have a bank account? what income do you receive? Any debts outstanding you might need support with? Can you cook? Employment history? Dream job?

Admit Assessment

CHANGING LIVES

Working together - What would you like us to call you? Pronouns? Anything happening in your life that is worrying you or causing you stress <i>at the moment</i> that we can support with? Do you feel safe <i>at the moment</i> ? Is there anything we can do to help you feel safe? Preferred way of communicating messages – face to face / note under door / text message?	Physical Health - Any current health concerns? Registered with GP? Seizures? Allergies? Struggle to eat or sleep? Sexual health? Mobility in case of fire, lift access? Any longstanding health issues? Disabilities? Is there anything we can do to support with your physical health? On any medication?
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- During admit assessment we make sure to notify people that this is a safe space and what protective factors are in place, also questioning what further a person needs to feel safe whilst residing in accommodation.
- Completion of only core paperwork on immediate arrival.
- Identifying support needs with reading and writing.
- Changing how we ask sensitive questions, the importance of trauma informed language.
- We try to complete support needs paperwork with keyworker to improve consistency of support and to reduce the individual having to reshare their trauma with multiple people.
- Only share what feels safe to share.
- Private space
- Try to involve the person as much as possible in their support paperwork and support plan to improve person centred care.
- Promote healing by integrating principles like safety, trustworthiness, choice, collaboration, empowerment, and cultural respect.

Physical Space and Environment



- At Changing Lives within our accommodation services, we know and understand that the physical environment people live in can affect them both positively and negatively.
- We prioritise the physical, psychological and emotional safety of the people entering and residing in our services.
- Prioritising the psychological safety of team members.
- Creating a homely environment that feels warm, friendly and most importantly safe.
- Office open door policy
- Asking what they want the space to look like, suggestions box and feedback forms.
- Welcome pack including sanitary products.
- Reduce loud noises/banging and shouting to avoid retraumatisation.
- Notice board.

THANK YOU, ANY QUESTIONS?

-HANNAH.CARMICHAEL@CHANGING-LIVES.ORG.UK

Embedding Trauma-Informed Care in Homelessness Services

- ▶ Sandra Ferreira
- ▶ CEO – The Ferry Project
- ▶ 15 Years using TIC
- ▶ Sandra.ferreira@ferryproject.org.uk



Positive Impact

**What
trauma-informed
care made
possible**

Safer Services Stronger
relationships

Ferry  **Project**





The Journey

REFLECT – LEARN – REPEAT

The Power of Language

Words can retraumatise, escalate... or heal

Non-compliant

Aggressive

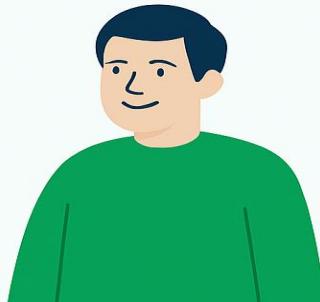
Failed tenancy



Struggling to engage

Distressed

Tenancy ended



Resistance and Unconscious Bias: What's underneath?

Resistance is information.





A moment that changed everything
FROM CONTROL TO CONNECTION

What TIC is Not and what it is

- ▶ Removing Boundaries
- ▶ Lowering expectations
- ▶ Avoiding difficult conversations
- ▶ Chaos or 'anything goes'
- ▶ Clear Boundaries
- ▶ Understanding behaviour in context
- ▶ Curiosity before judgement
- ▶ Safety dignity and accountability

START SLOWLY – STAY CURIOUS