

**SUBMISSIONS FOR THE FIRST PRELIMINARY HEARING OF MODULE 10
(IMPACT ON SOCIETY)
ON BEHALF OF SHELTER**

Introduction

1. These are the submissions of Shelter in advance of the first preliminary hearing in Module 10 of the UK Covid-19 Inquiry.

Shelter's background / purpose

1. Shelter is grateful for the opportunity to assist the work of the Inquiry as a core participant and it welcomes the inclusion of housing and homelessness as a topic to be covered in this Module. Shelter is a limited company and registered charity. Its work covers both England and Scotland (via Shelter Scotland). Shelter Cymru, who cover Wales, and Housing Rights, who cover Northern Ireland, are separate organisations.
2. Shelter works to seek to influence national and local government policies and legislation to tackle the root causes of homelessness and housing problems and carries out training, research, policy scrutiny and campaigning. Shelter's strategic plan for the 2019 — 2022 period included the following goals:
 - 2.3.Campaigning for increasing rights for renters and an end to discrimination.
 - 2.4.Supporting people who are struggling via Shelter's local hubs, helpline and digital advice.
 - 2.5.. Empowering communities and building a movement to stop the national housing emergency.
3. Shelter also provides legal and practical advice, support and services to people struggling with inadequate housing and homelessness. During the pandemic it assisted:
 - 3.3.People sleeping rough trying to get access to emergency accommodation while the requirement to self-isolate was in place;
 - 3.4.People living in overcrowded conditions and with disrepair;
 - 3.5.Renters struggling with arrears built up during the pandemic.

4. Shelter also carries out training, research and further policy scrutiny work related to rough sleeping and homelessness. It engages in public campaigning and also strategic litigation in support of specific law and policy changes. During the pandemic it regularly shared its expertise with government and parliament (including via select committees) in relation to the impact of the pandemic on homelessness and the privately rented sector. It also obtained information about accommodation that had been provided by authorities and arrangements for moving on through a FOI request sent on its behalf by Freshfields Bruckhaus Deringer LLP on 26th February 2021 (see further below).

2. These submissions address:
 - a. Scope and issues for the Inquiry
 - b. Evidence
 - c. Expert evidence

Scope and issues for the Inquiry

3. Shelter acknowledges that the outline of scope is provisional and that the core issues will be identified as the Inquiry progresses and as evidence is obtained. At this stage, and without intending to be exhaustive, Shelter suggests that the following issues, relevant to housing and homelessness, merit consideration and investigation.

Groups to be considered

4. Shelter notes that the Inquiry will examine the impact of Covid on the population of the United Kingdom with “a particular focus” on, among others, key workers and the most vulnerable, the bereaved, mental health and wellbeing. Later the provisional outline says that it will cover “the most vulnerable, including those outlined in the Inquiry's Equalities Statement as well as the clinically vulnerable and clinically extremely vulnerable”.
5. Homelessness and housing problems reflect and produce vulnerability. As outlined below disadvantage caused by housing conditions operates in a markedly discriminatory way. The

Inquiry rightly highlights this as a question that it is likely to consider (Counsel’s note para 19(a)) and this is consistent with the finding in Module 1 that:

“emergency planning generally failed to account sufficiently for the pre-existing health and societal inequalities and deprivation in society. There was also a failure to appreciate the full extent of the impact of government measures and long-term risks, from both the pandemic and the response, on ethnic minority communities and those with poor health or other vulnerabilities, as well as a failure to engage appropriately with those who know their communities best, such as local authorities, the voluntary sector and community groups.”.

6. However, it is also important fully to take into account the impact on those who were homeless or who lacked adequate or secure housing whether or not they had some other identifiable vulnerability. Private renting households living in overcrowded conditions increased prior to the pandemic, as did the numbers in temporary accommodation, many of whom also lived in overcrowded or cramped conditions.
7. Poor housing conditions such as overcrowding and high density are associated with greater spread of Covid-19, and people living in such conditions had to spend more time in homes that were overcrowded, damp or unsafe¹. Overcrowding, which had increased prior to the pandemic, also made it harder to self-isolate or shield and may have led to higher death rates.
8. The Inquiry is invited to take a broad view of vulnerability in the context of housing conditions. It is asked to consider the experience of renters and those living in temporary accommodation². It should also consider how far people living in unsuitable or overcrowded conditions were able to mitigate and the barriers they faced. This will include matters such as the ability of renters to find or move to suitable accommodation or to secure adaptations or repairs where necessary. In the social sector it will include access to priority transfers, how far people living in temporary accommodation were able to move to more permanent accommodation and the conditions they lived in pending a move. An investigation by Shelter in December 2020 found

¹ Health Foundation 28 Dec 2020: Adam Tinson, Amy Clair. Better housing is crucial for our health and the COVID-19 recovery - summary

² Including those accommodated under the homelessness duties in Part VII Housing Act and in accommodation under the Immigration Act 1999 as an asylum seeker or failed asylum seeker.

that there were 253,000 people in England who were homeless and living in temporary accommodation. Of those 17% were placed in emergency B&Bs and hostels. The report described key themes as being “feelings of isolation...not being able to stay safe...struggling to eat properly...difficulties keeping clean...impact on mental well-being”³

Key workers

9. Shelter notes the focus on the impact on key workers. This excludes health and social care workers, presumably on the basis that this has already been addressed, in particular in Module 6 (care sector). The list of examples of key workers does not presently include homeless services front line staff and the Inquiry is invited expressly to add them to the outline of scope. This should include those in the council and charitable sectors and hotel staff at “Everybody In” accommodation.

The experience of rough sleepers and those at risk of rough sleeping during the pandemic. [Issues in counsel’s note 19(a)(k)(m)]

10. Covid-19 was a particular risk for people who were homeless. For example, homeless people are 3 times more likely to have a chronic illness such as COPD⁴ and are much more likely to have increased levels of frailty⁵. In autumn 2019 the Government’s annual snapshot estimated that there were 4266 people sleeping rough in England although these figures will have changed by the time lockdown restrictions were first imposed in March 2020.
11. Despite the eviction ban (see below) people could still become street homeless for a number of reasons including being evicted in cases where a court order was not needed (for example resident landlords) or because an exception applied (for example anti-social behaviour). Others

³ [253,000 people are trapped in temporary accommodation - Shelter England Homeless and Forgotten: Surviving Lockdown in Temporary Accommodation](#)

⁴ <https://www.bma.org.uk/media/3055/homelessness-and-covid-19-bma-position-statement.pdf>

⁵ https://discovery.ucl.ac.uk/id/eprint/10110813/1/Frailty_homelessness_2020.pdf

lost accommodation because of domestic violence or following a relationship breakdown. Unlawful evictions continued to take place. Where people became homeless then the impact on them was especially harsh because publicly accessible buildings were closed as were facilities such as toilets, night shelters and homeless day centres.

12. On 26th March 2020 all local authorities in England were asked to accommodate those who were or were at risk of sleeping rough. This became known as the “Everyone in” initiative and it was succeeded by Protect, Protect Plus and Protect & Vaccinate ‘initiatives’. These responses saved lives and there are positive lessons to be learned, for example, from the way that local authorities and others worked collaboratively to deliver a range of services. However, there was no sufficiently clear framework about how or when help should be provided. Shelter received reports of applicants being turned away or having difficulty in accessing assistance⁶. A particular problem was the position of people who were subject to immigration control and who were ineligible for homelessness assistance under the Housing Act 1996. Many authorities were unclear about what powers they had to assist in such cases and the position was only clarified following a judicial review judgment in March 2021⁷. Even then the judgment only identified a power and not a duty to act and some authorities remained unclear about how to exercise the powers that they had. Further uncertainty arose about when the initiative came to an end⁸.

13. Shelter considers that a key lesson to be learned from the “Everyone in” initiative is that there needed to be a clear legal framework providing for a duty to accommodate everyone at risk of

⁶ Subsequent information based on FOI requests suggested that for every eight people with NRPF conditions who were accommodated one was turned away or an estimated 493 people from March 2020. Shelter dealt with other cases where people didn’t want to bed down in order to be verified. They were too frightened. Research shows women, people of colour and young people are all groups who can be too frightened to bed down.

⁷ *R (Ncube) v Brighton City Council [2021] EWHC 578 (Admin)*,

⁸ *ZLL, R (On the Application Of) v Secretary of State for Housing, Communities and Local Government [2022] EWHC 85 (Admin)*

street homelessness without the need to consider matters such as immigration status. That should have no role to play in addressing a public health emergency and it may deter undocumented migrants from seeking help because they fear detention and removal. Powers under the Local Government Act 1972 and the NHS Act 2006 were able to be used but there should be a specific, and adequately resourced, duty to ensure that those at risk of street homelessness must be accommodated throughout any future pandemic.

14. Further issues that arise here include:

15. Whether people accommodated under “Everyone in” were able to move into more settled accommodation. Information gathered by Shelter from an FOI request to local authorities in February 2021 showed that of the people accommodated under “Everyone in” 77% had not moved into settled accommodation and 22% were still in emergency accommodation⁹. Those with no recourse to public funds were disproportionately more likely to remain in emergency accommodation because they faced additional barriers to moving on. People not in this group also faced significant barriers including the benefit levels referred to below and a lack of support to help people sustain tenancies where they have multiple and complex needs. The FoI also found that by February 2021, almost 1 in 4 (23%) of the total number of people accommodated under “Everyone In” – and 1 in 3 (30%) of those not moved into settled accommodation – were no longer accommodated, either having left accommodation without move on accommodation or with no destination recorded. This equates to an estimated 8,800 people¹⁰.

16. The extent to which people who were homeless experienced other harms, for example, mental health impacts or alcohol and drug misuse and what measures could have been taken to prevent this. Often people who were accommodated during “Everyone In” and its successor initiatives suffered mental health impacts as a result of being accommodated quickly in hotels with no or inadequate support. There were clear risks to people’s health where they had to adhere to strict

⁹ Shelter, [Everyone In: Where are they Now](#)

¹⁰ Shelter, [Everyone In: Where are they Now](#)

hotel rules which resulted in sudden alcohol and drug withdrawal. People could then be asked to leave the hotels if there were deemed to have broken the rules. Research carried out by the Museum of Homelessness's Dying Homeless Project found that homeless deaths increased during 2020¹¹ but that the main cause of death was not directly related to people dying of Covid- 19.

The effect of pre-existing conditions in the housing market and discrimination . [19(k)]

17. At the time that the pandemic started there was already a severe lack of suitable housing in the social sector and this remains the case. At the same time there was an unaccountable and expensive private rental sector rendered even more inaccessible because of a weakened welfare system (including insufficient Local Housing Allowance (“LHA”¹²), the benefit cap, the spare room subsidy, and NRPF conditions on those with leave to remain). The effect was that many renters were already in a marginal or precarious position living in unsuitable or crowded conditions or in accommodation they struggled to afford. The pandemic was likely to impact more harshly on them as a result.

18. In this connection Shelter notes the Inquiry’s commitment to exploring issues of race and discrimination and inequalities. Structural racism and discrimination impact in different ways according to the modules and the topics under investigation. Shelter re-iterates calls by other core participants throughout the Inquiry for an overarching consideration of discrimination in all aspects. The impacts of the pandemic were not felt equally by all and its impact was compounded by pre-existing systemic inequalities (including both directly and indirectly discriminatory practices) and poor housing, including the following who are likely to experience particular difficulty in accessing suitable accommodation and/or exceptional harm if they cannot do so:

¹¹ [Museum-of-Homelessness-report-of-findings-on-homeless-deaths-in-2020-FINAL-2-compressed.pdf \(squareSPACE.com\)](https://www.squareSPACE.com/wp-content/uploads/2021/04/Museum-of-Homelessness-report-of-findings-on-homeless-deaths-in-2020-FINAL-2-compressed.pdf)

¹² This had been increased (having previously been frozen) to cover the lowest 30% of rents but this remained frozen at 2020 levels. For those under 35 LHA only extended to the cost of a room in a shared house.

- a. Those in receipt of benefits: unable to afford rents / blocks to accessing the PRS (“private rented sector”) due to income discrimination (“No DSS” conditions).
 - b. Those on low income / part time work / zero hours contracts experienced problems like blocks to accessing PRS due to blanket affordability assessments and/or requirements for guarantors and/or rent in advance)
 - c. Parents and children: disproportionately impacted by overcrowding, blocks to accessing PRS due to “No children” conditions.
 - d. Women (as lower income earners, majority single parents and other unpaid carers and as majority victims of domestic abuse).
 - e. People of colour
 - f. Disabled people and those with chronic ill health (including mental health / addiction)
 - g. LGBTQ people
 - h. Care leavers
 - i. Prison leavers
 - j. Migrants and those with NRPF
 - k. Older people
 - l. The digitally excluded
 - m. Single people / the socially isolated / excluded
19. Ultimately the impacts of the pandemic cannot be separated from a chronic lack of genuinely affordable housing and this needs to be addressed by a sustained investment in social housing. In any future pandemic in order to mitigate the public health risks as much as possible it is vital that people have access to secure, stable and settled accommodation which they can sustain. Without a secure home it is difficult for people to look after their health, both physical and mental. Having a home also makes it easier for people to register with a GP, attend medical appointments, including vaccinations, and access support services.

The effectiveness and long term effects of measures to stay possession proceedings and to prevent evictions. [19(k)(m)]

20. Between March 2020 and September 2021 various measures were put in place in connection with possession claims, being a stay on possession proceedings, a stay on evictions and

extended notice periods. There were exceptions and these measures covered different time frames. While they were in force the number of possession actions and evictions fell. However, these measures did not address underlying problems such as rent arrears and there is substantial evidence that renters, as opposed to homeowners, were more adversely affected. For example, research by the Resolution Foundation found that 8% of homeowners failed to cover their housing costs but that rose to 13% of private renters and 17% of social renters who had fallen into, or further into arrears¹³.

21. After the restrictions on possession claims and evictions were lifted then possession actions and evictions started to rise sharply. However, from the statistics available at the end of 2024, such actions had still not reached their pre-pandemic levels with the exception of the private rented sector. In contrast to the position before the pandemic private renters have now replaced social renters as the most likely tenure to experience a possession action against their home¹⁴.

22. The Inquiry is asked to consider as part of this Module:

- a. The effectiveness of the measures described above including whether the exceptions to the stay on evictions (for example in the case of high rent arrears) were appropriate in the context of a measure intended to secure public health.
- b. The long term impact of the measures and the reasons for the disparity between homeowners and renters.

Evidence- gathering

23. Shelter understands that the Inquiry intends to conduct roundtable events, appoint experts, obtain witness statements, review existing research, carry out internal research and consider individual experiences as captured by “Every Story Matters”. We look forward to receiving further detail on each of these methods.

¹³ Cited in Coronavirus: Support for landlords and tenants 20 Dec 2021 House of Commons Library Wendy Wilson p. 43.

¹⁴ The Health Foundation [Trends in eviction and mortgage possession claims in England | The Health Foundation](#) 7 December 2014;

24. Shelter anticipates providing evidence that will include, but not be limited to:
- a. Analysis of the legal framework before and during pandemic
 - b. Analysis of the relevant decision-making and policies including both about the process by which decisions were made, and the substance of those decisions.
 - c. Analysis of our regular tracker / daily analysis of the calls we were receiving during the pandemic to identify trends and particular issues
 - d. Representations made and evidence given to the Ministry for Housing, Communities and Local Government (MHCLG) including during the Select Committee inquiry into the impact of Covid-19 on homelessness and the private rented sector and the Public Accounts Committee Inquiry.
 - e. Analysis of Freedom of Information requests to Local Authorities
 - f. Analysis of data obtained from the MOJ on the effect of everyone in on possession claims, and consideration of the effectiveness of the MOJ's management of the courts and possession claims during the pandemic?
 - g. Case studies
25. Shelter understands that further details will be provided in due course as to how the “Every Story Matters” listening exercise will work for this module. Shelter would be grateful for the opportunity to make further submissions at that time about how this is to be conducted in relation to those who experienced inadequate housing and homelessness during the pandemic. We understand that this will be a non-legal process which will not require those who wish to engage in it to have legal representation, however Shelter's view is that it may be appropriate or necessary to provide additional support or assistance to those who experienced homelessness and poor housing during the pandemic as a vulnerable group.
26. Specifically, in relation to housing and homelessness issues we believe the Inquiry should also consider evidence provided by organisations on behalf of individuals and/or anonymous evidence. Often people who have experienced street homelessness, for example, and other groups who have suffered the most during the pandemic will be very socially / digitally isolated and may not be able to share their experiences without the assistance of specialist organisations

to support them. Similarly, many vulnerable groups, such as those who have survived domestic abuse, people who have experienced homelessness or people with uncertain immigration status, may be unwilling to share their experiences if it means having to reveal their identities.

27. Shelter has no observations to make at present as to the proposed approach to Rule 9 requests for information.

28. We note the commitment by the Inquiry to consider systemic issues but hope that there will also be a careful consideration of the evidence of individual impacts in both the short and long term.

Expert evidence

29. Shelter welcomes the Inquiry's intention to call expert evidence across a range of topics. In addition, Shelter considers that this module would be assisted by expert evidence addressing the intersection of homelessness and poor housing with race and other inequality issues.

30. Shelter would be grateful for the opportunity to be provided with further updates about the proposed expert evidence in respect of this module and to consider these proposals in more detail once further information has been provided and thereafter to make some practical suggestions to the Inquiry about relevant expertise in due course.

31. Shelter annexes to this statement links to specialist articles and evidence that it considers may be of use and relevance to the topics raised in this submission.

Conclusion

32. Shelter proposes to supplement these written submissions with brief oral submissions at the preliminary hearing on 18th February 2025 in order to deal with other matters arising from the Inquiry team or other Core Participants

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5TH February 2025