

Meeting the Needs of Homeless Veterans



Inside
Best Practice
Recommendations



SPEAR
homelessness to independence

Executive Summary

Introduction:

This report is intended to inform and contribute to the knowledge base of organisations working with Veterans and their families, drawing on the work undertaken by SPEAR over a three year period, (2011 - 2014).

The report considers the support Veterans and their families need, (including in relation to housing, health, economic, and employment) and the wider issue of social integration. Also, recommendations to inform best practice in the provision of support services to Veterans dealing with the ex-Gurkha and British Veterans as distinct groups.

This report has been written by SPEAR staff involved in service delivery, with the support of Leapfrog consultancy. It draws on interviews with clients, partner agencies, as well as the staff delivering the service and references research and best practice in the wider sector.

This report is written in the spirit of the 'The Veterans' Transition Review' (Lord Ashcroft: 11/02/2014) to promote:

'collaboration within the charity sector, ending the confusing array of charity information Service Leavers currently encounter, and ensure those who need help can find it straight away without having to make several calls or being passed from one organisation to another'.

Background:

SPEAR is a homeless charity working in West and South London. The charity takes a recovery based approach, promoting community involvement and personal development, alongside practical outcomes. SPEAR has particular expertise working with rough sleepers and homeless people with a range of complex and challenging needs. SPEAR assists clients in accessing supported accommodation, training and employment, and addiction services.

SPEAR was funded by The Royal British Legion, (TRBL) in 2010 to set up a Veterans Support Service, covering South West London. The SPEAR Veterans Support Service supports ex service personnel and their immediate family members experiencing or at risk of homelessness. The SPEAR Veterans Support Service worked with around 140 Veterans over a three year period, 40 of whom were ex-Gurkhas. The support provided included:

- Brokering accommodation and preventing accommodation loss.
- Brokering education, training and employment.
- Addressing complex needs such as physical and mental health problems and addictions.
- Promoting social integration.

Recommendations:

- An assertive outreach model will engage isolated and invisible Veterans most effectively.
- A flexible and holistic service is required to co-ordinate effective engagement with other services.
- The Nepalese community require support and capacity building to help support ex-Gurkhas and their immediate families to integrate into UK society and access opportunities for education and employment.

A Word From Our Chief Executive



“It is my great pleasure to introduce this report. It has been a privilege to support Veterans in South West London struggling with homelessness these last three years. This report summarises our learning over this period and I hope that it proves helpful to other organisations supporting Veterans. I would like to thank the Royal British Legion, the many partners who we have worked with over the last three years and in particular the Veterans themselves. We have been repeatedly inspired by the courage of the Veterans we have met and worked with. I hope you find our report of value.”

Personal Message From The Royal British Legion

“The Royal British Legion were delighted to fund SPEAR to support Veterans struggling with homelessness in South West London for the last three years. SPEAR have worked passionately for this marginalised group, taking effective and innovative approaches to working with rough sleeping Veterans and the Gurkha Veteran community. It is my great pleasure to also introduce this evaluation report which I believe other organisations working with Veterans will benefit from reading.”

Daniel Elser, Head of Grants at Royal British Legion

Key Findings:

- There is a larger than anticipated (and largely invisible) group of Veterans in South West London struggling with homelessness.
- Most Veterans had served many years ago and, since discharge, have utilised Veteran or mainstream support services effectively to address often significant health and social care problems.
- Veterans responded well to a flexible, holistic and person centred service model, (and less well to services focused on specific issues).
- Many of the problems Veterans face pre-dated armed service and/or remained unaddressed during armed service.
- There are significant unmet needs in the ex-Gurkha community, such as:
 - Isolation from mainstream society.
 - Age related health problems.
 - Struggling with welfare benefits.
 - Poor prospects of financial improvement and social integration.

Identifying and Engaging Homeless Veterans

Our work with Veterans in South West London highlighted two distinct groups with varied and challenging support needs:

- **Ex-Gurkhas** and their families are generally older than their British counterparts. Their needs are mainly a combination of physical health needs and disability, housing issues, financial difficulties and low level mental health issues. Their situation is characterised by social isolation with poor or no English language skills, linked to a lack of awareness of their welfare rights and lack of opportunity to integrate with UK culture through employment and wider social opportunities.
- **British Veterans** tend to present with complex and inter-related needs. These are mostly a combination of physical health needs, mental health needs, substance misuse issues, relationship problems, behavioural problems, housing issues including homelessness and financial difficulties.

Most of the clients worked with had not served in the Armed Services in the recent past:

We believe this is because many of these clients did not receive support when they left the service, so problems accumulated over time. Nowadays there is a better support network for Veterans and they have already been linked in with other services prior to their service ending.

- British Veterans had on average left the armed forces 16 years previously.
 - This finding is consistent with that of Combat Stress and Veterans Aid who report an average delay of 13-14 years post discharge before a Veteran accesses a service (Busuttil, Combat Stress 2010).
- Ex-Gurkha Veterans had on average left the armed forces 27 years previously.
 - This is largely because of 2009 changes in legislation extending ex-Ghurka immigration rights to Veterans serving before 1997. All of the Ghurkha's we worked with had entered the UK since 2009.

The reasons cited by Veterans for non-engagement with support services

A lack of awareness of services; shame in seeking help; fear of stigmatisation; isolation; and a lack of trusting relationships. These reasons are consistent with wider research, (Iversen, Dyson, Smith et al, British Journal of Psychiatry, 2005).

Our research also indicates that this is because most other Veteran services tend to focus on specific needs or issues such as mental health, or very recently discharged Veterans.

A significant proportion of the Veterans we worked with experienced profound difficulties reintegrating into civilian life. It was not uncommon for clients to report that since leaving the armed forces they felt ostracised from their previous social networks and lost contact altogether.

As a result, the Veterans we worked with tended to become isolated and would not approach services independently or, if they did, would not disclose all of their problems in initial assessments.

Outreach to Veterans

Because of the challenges outlined, it was found to be necessary to work on an assertive outreach basis initially to identify Veterans in need; to provide responsive engagement; and to support them in flexible locations, (such as their own homes and in community settings).

Key Finding:

We have identified a larger than expected group of hard-to-reach Veterans who typically left armed service some years ago and now require assertive outreach interventions to identify, engage, and support them effectively.

We have found that a person centred, holistic and flexible approach has been effective in supporting this group of Veterans to engage with our service as well as with other Veteran and mainstream support.

Client interventions were most effective when the service assessed and addressed the totality of the client's life situation, which in many cases required a co-ordination of support from other specialist agencies.

Engagement with other Veterans support services

The SPEAR Veterans Support Service engaged Veterans as clients effectively where other organisations providing support services did not:

- 30% of the British Veterans we worked with were referred to our service for additional support by other Veterans' organisations, because the other intervention was specialist and the client had wider supports needs.
- 20% of our clients who were engaged with other Veterans' services, approached SPEAR independently asking for additional support.
- 50% of our clients were not engaged with any other Veterans' services, (past or present).
- 85% of ex-Gurkha clients had not engaged with any other Veterans' services.
- 32% hadn't sought support from any other Veterans' organisations previously.
- 18% had sought support elsewhere, but reported that it hadn't been effective.



The Health and Social Care of Homeless Veterans

Addressing Physical Health Needs

Over the period of 3 years the SPEAR Veterans Support Service worked with 69 ex service personnel who required support to address physical health issues faced by themselves, or an immediate family member.

- 68% of British ex service personnel presented with physical health issues.
 - For a significant proportion, physical health needs were linked to mobility issues and personal care needs.
- 58% of ex-Gurkhas presented with physical health issues.
 - Amongst ex-Gurkhas, this was largely because the population was elderly.

Addressing Mental Health Needs

On average over the 3 years of the service, 52% of British Veterans were suffering from a mental health problem at the point of presentation. These mental health problems were varied but included Post Traumatic Stress Disorder (PTSD); depression; anxiety; and personality disorders. In most cases, these conditions had been formally diagnosed.

Around 15% of ex-Gurkha clients reported low level depression related to social and wider life problems, some related to difficulties in social integration or immigration.

Addressing Family & Relationship Problems

Our research indicates a high prevalence of relationship problems in the family, (including relationships with spouse/partner) amongst British Veterans:

- 40% of British Veterans reported that they had lost contact with immediate family, partners and or children, or else were suffering from domestic problems at the point of accessing the service; and
- 27% of ex-Gurkhas reported the same.

In almost all cases, Veterans reported that these relationship problems were related to wider problems, (such as housing; financial stress; addiction; mental health problems; and anger management problems).

Addressing Financial Problems

Our research indicates a very high prevalence of financial problems including: debt; unclaimed benefits; uncertainties related to welfare reform; benefits appeals; war pensions; rent arrears; and accessing grants.

- 65% of British Veterans needed financial support.
 - For British Veterans, this area of need is linked to wider problems of housing, mental health, social isolation and subsequent difficulties in finding lasting employment.
- 98% of ex-Gurkhas needed financial support.
 - The combination of language difficulties and a lack of familiarity with complicated welfare systems meant that many ex-Gurkhas were likely to struggle to manage their finances without specialist support.

Gaining Qualifications and Securing Employability

Our research indicates a very high prevalence of unemployment in the Veterans we worked with. Some Veterans reported losing jobs as a result of mental or physical health problems.

- 90% of British Veterans were unemployed.
 - The main reason being support needs highlighted above.
- 90% of ex-Gurkhas worked with were unemployed.
 - The main reason being Veterans being of a pensionable age, although many had very poor English language skills.

Complex Needs of Ex-Veterans

Often clients reported that a number of problems they encountered before joining the Armed Forces were either compounded by their military experience or else didn't improve during their time in the armed forces, for example, alcohol use and problems in the family.

Some Veterans reported that trauma of combat, living in different locations, a drinking culture, separation from family, and a lack of community friendships made it harder to re-integrate into civilian life.

It was not uncommon for clients to report that since leaving the armed forces they felt ostracised from their previous social networks and lost contact altogether, resulting in isolation and a worsening of physical and mental health.

Most, if not all, of the clients worked with presented complex needs which they had been struggling with for many years previously, (whilst Veterans were not engaged and/or adequately supported) indicating that delayed engagement with support underpinned the more common complex presentations, with increasing loss of social and occupational confidence, isolation, poor relationships, and marital, family and economic difficulties and, over time, serious mental health problems.

In our wider experience, the same is true amongst the generic rough sleeper group.

Key Finding:

A significant proportion of Veterans worked with struggled with a range of complex needs, which had either existed prior to service, and/or had developed post discharge and worsened through long periods of non-engagement with services.



Veterans and Mental Health

Veterans reported high levels of reluctance in attending mental health assessment or otherwise engaging with statutory mental health services. In a large number of these cases, Veterans did engage, but only after staff in the SPEAR Veterans Support Service had developed a sufficiently high level of trust with them, encouraging and accompanying them and acting as their advocate at mental health agency meetings.

These support needs affected Veterans and their immediate family members, often causing relationship problems which tended to exacerbate mental health problems and social isolation.

Veterans and Employment

Many of the **British Veterans** had worked since leaving the armed services, but had not sustained their employment as a result of the support needs highlighted above.

Amongst the **ex-Gurkha** community, prospects of developing good English language skills and gaining employment were considered low.

Supported Intervention from SPEAR

Because of the complex and inter-related support needs of Veterans, it was found to be necessary to work in a holistic way to identify the totality of the client's situation, (including wider family issues).

Veterans responded well to having one point of contact, through which engagement with other specialist services could more easily be brokered.

Veterans made greatest progress when all their support needs were addressed in one co-ordinated support intervention.

The Housing Needs of Homeless Veterans

Homelessness or the imminent risk of homelessness was an issue for over 90% of the Veterans engaged by the service over the 3 year period.

More specifically:

British Veterans

- 52% required support to sustain their tenancies.
- 33% were sofa surfing or in inappropriate accommodation (overcrowded, or inappropriate for physical needs).
- 21% of British Veterans engaged by the service had slept rough.

Ex-Gurkhas

- 90% required support to sustain their tenancies.
- 52% were sofa surfing or in inappropriate accommodation (overcrowded, or inappropriate for physical needs).

In the wider context of homelessness in London, the latest Pan-London rough sleeping report, (CHAIN) indicates that only 3% of British rough sleepers report a Veteran status. In contrast, SPEAR worked with approximately 280 rough sleepers over the last 3 years, with 10% of this group being Veterans.

The average period that the Veterans we worked with spent sleeping rough before accessing our services was 1.5 years, which confirms what The Royal British Legion reported in 2008 'Homeless Veterans were found to be more likely to have slept rough and to have done so for longer'.

The SPEAR Veterans Support Service identified that there is a lack of targeted support and housing options for Veterans sofa surfing or living in inappropriate housing.

The Legality of Ex-Gurkha Veterans Living in the UK

In 2009, the rights of ex-Gurkha veterans to live in the UK were extended to those who had served in the British armed forces before 1997, with four or more years service.

The majority are over 50 years of age, with many over 60 years of age.

Census data indicates an increase in the number of ex-Gurkhas from 5,630 in 2001 to 60,200 in 2012.

The Centre for Nepalese Studies estimates the actual number at 80,000 with 37% (29,600) living in London.

We estimate in the London Borough of Hounslow alone, there are around 2,000 ex-Gurkha families, most of whom live isolated lives with few prospects for social integration or employment.

There is very little research into the living conditions of ex-Gurkhas. A Reuter's article (8.11.13) reported that ex-Gurkhas of working age have adapted well, but those of retirement age are struggling to adapt.

In the experience of this service, the ex-Gurkha population live in over-crowded housing; have no or little income, and tend to be isolated from mainstream services. Our experience echo's that of the Gurkha Welfare Trust:

"Our people, who have come here to settle, especially old people, they haven't got any relatives; they find it very difficult to integrate. They don't speak the language and don't understand the system, many ex-Gurkhas walk around like lost souls."

Key Finding:

There is likely to be a largely unidentified and growing number of Veterans at risk of, or struggling with, homelessness.

Best Practice Finding:

- As is the case with the wider population, rough sleeping and other forms of homelessness are closely related to other support needs.
- Integrating support for Veterans into rough sleepers services helps to identify and engage this hard-to-reach group.
- Housing issues should form part of a holistic support service for Veterans.
- Homelessness can be solved and prevented through holistic support.





Key Finding:

There are significant unmet needs in the ex-Gurkha community, such as:

- Largely isolated within wider mainstream society.
- Aging with associated health problems.
- Struggling to benefit from statutory entitlements and support
- Disadvantage as a result of poor prospects for financial improvement.

The Specific Needs of ex-Gurkhas

The SPEAR Veterans Support Service engaged 40 ex-Gurkhas, (in 50% of these cases, support was provided to their wider families as well). Of this group:

- 85% had not engaged with any other Veterans services.
- 45% presented in crisis or with complex needs, (in Year 3).
- 58% presented with physical health issues, (largely related to old age).
- 15% reported low level depression often related to social isolation and poor prospects.
- 27% reported family problems.
- 98% needed support around financial issues, (often related to language difficulties and a lack of familiarity with complicated welfare systems).
- 90% were unemployed, (language difficulties being a common barrier).
- 52% were sofa surfing or in inappropriate accommodation, (overcrowded, or inappropriate for physical needs).
- 90% of ex-Gurkhas required support to sustain their tenancies.

The Benefits Delivered by the Service

Engaging Veterans into Multi-agency Support

The flexible and holistic approach taken by the SPEAR Veterans Support Service has worked well in engaging and supporting the rising numbers of Veterans with complex needs.

Over the 3 years covered by this report, 100% of Veterans who presented with complex needs were successfully engaged and supported by the SPEAR Veterans Support Service. Successfully supporting Veterans to engage with a range of other agencies, (sometimes for the first time, and sometimes with services which had previously excluded a Veteran from that service on the grounds of eligibility or behavioural issues) proved an essential factor in improving the lives of many Veterans. This support included representing clients and co-ordinating the input of a number of agencies (typically with specific remits).

Without the support provided by the SPEAR Veterans Support Service, most of the Veteran clients with such complex needs would not have easily been able to engage with wider services and those services would not have managed to engage successfully with this hard-to-reach group.

Brokering Accommodation and Preventing Homelessness

Two of the key objectives of the SPEAR Veterans Support Service are to:

- Broker accommodation for homeless Veterans.
- Prevent homelessness amongst Veterans at risk of homelessness.

The SPEAR Veterans Support Service has worked well in achieving both of these objectives:

Homelessness / Housing Support Need	% of Veterans with this area of need	% of Veterans with area of need who experienced an improvement as a result of the support provided by the SPEAR Veterans Support Service
Rough Sleeping	<ul style="list-style-type: none"> • 21% (of British Veterans) • No ex-Gurkhas 	New accommodation was brokered for: <ul style="list-style-type: none"> • 86% of British Veterans
Inappropriately Housed, (i.e. sofa surfing; overcrowded housing; or housing inappropriate to physical health needs)	<ul style="list-style-type: none"> • 33% (of British Veterans) • 55% (of ex-Gurkhas) 	New accommodation was brokered for: <ul style="list-style-type: none"> • 72% of British Veterans • 63% of ex-Gurkhas
Tenancy sustainment (where support was needed to help a Veteran prevent a loss of an existing tenancy)	<ul style="list-style-type: none"> • 52% (of British Veterans) • 90% (of ex-Gurkhas) 	Tenancies were successfully sustained for: <ul style="list-style-type: none"> • 94% of British Veterans • 92% of ex-Gurkhas

Effective Service Interventions

The table below shows the high proportion of Veterans who presented with a range of health and social care needs. The majority of Veterans presented with complex need (defined for the purpose of this report as a combination of two or more significant areas of need and/or that the client presented in crisis) and shows the high proportion who reported an improvement in this area of need.

Example of Service Interventions

- Referring, accompanying and advocating on behalf of Veterans with various health services.
- Brokering accommodation with improved accessibility.

- Referring, accompanying and advocating on behalf of Veterans with mental health agencies.
- Offering direct emotional and psychological support through generic key working interventions.
- Addressing wider problems such as debt and financial worries.
- Coaching clients around anger-management and communication skills.

- Providing housing related support to address a tenancy at risk (i.e. tackling debt or rent arrears).
- Brokering new accommodation through liaising with housing providers, private landlords and Local Authorities.

- Referring couples to counselling, mediation and local support services.
- Addressing wider complex needs that impacted relationships (i.e. financial, health or housing problems).
- Providing informal emotional support.

- Referring, accompanying and speaking for Veterans with debt advice agencies.
- Directly supporting clients to apply for and liaise with relevant agencies around benefits and grants.
- Coaching Veterans to improve their budgeting skills.

- Referring to SPEARs Education, Training & Employment service.
- Signposting clients to local education and training providers.
- Supporting clients to apply for education grants.

Support Need	% of British Veterans with this support need	% of Gurkha Veterans with this support need	% of Veterans who reported an improvement in this area of need
Physical Health: Support needs included: personal care; disabilities; liaison with health professionals and support groups.	68%	58%	90%
Mental Health: Support needs included: depression; psychiatric illness; post traumatic stress disorder.	52%	15%	95%
Homelessness / Housing: Support needs included: rough sleeping; sofa surfing; risk to tenancy.	63%	55%	75%
Family & Relationship: Support needs included: relationship problems with spouse and/or children; domestic violence; liaison with Social Services.	40%	27%	70%
Financial Problems: Support needs included: rent arrears; welfare benefit; debt, budgeting.	65%	98%	62%
Education, Training & Employment: Support needs included: poor literacy and numeracy; English language; unemployment.	90%	90%	40%

Conclusion and Recommendations

The Challenges of Engaging Veterans into Support Services

A significant proportion of the Veterans we worked with experienced profound difficulties reintegrating into civilian life. It was not uncommon for clients to report that since leaving the armed forces they felt ostracised from their previous social networks and lost contact altogether. The Veterans we worked with tended to become isolated and would not approach services independently or, if they did, would not disclose all of their problems in initial assessments. The SPEAR Veterans Support Service identified a group of hard to reach Veterans who require assertive outreach interventions to identify, engage, and effectively support them to address a range of needs, and to help them engage with other available services through the provision of holistic, person centred and co-ordinating support.

Analysis of Veterans Support Needs

Because of the complex and inter-related support needs of Veterans, it was found to be necessary to work in a holistic way to identify the totality of each client's situation (including wider family issues). Veterans responded well to having one point of contact, through which engagement with other specialist services could more easily be brokered. Clients also made greatest progress when all their support needs were addressed in one co-ordinated support intervention. The SPEAR Veterans Support Service found that a significant proportion of Veterans worked with struggled with a range of complex needs which had either existed prior to serving in the armed forces and/or had developed post discharge and worsened through long periods of non-engagement with services.

Housing and Homelessness Issues

The SPEAR Veterans Support Service identified a large and growing number of Veterans at risk of, or struggling with homelessness. As is the case with the wider population, rough sleeping and other forms of homelessness are closely related to other support needs amongst the Veterans engaged by the service.

The Specific Needs of ex-Gurkhas

There are significant unmet needs in the ex-Gurkha community such as: largely isolated within wider mainstream society; aging with associated health problems; struggling to benefit from statutory entitlements and support; and at a disadvantage as a result of poor prospects for financial improvement.

Best Practice Findings

An assertive outreach model helped identify Veterans in need and enabled a responsive and person-centred method of engagement, (for example, support was provided in flexible locations such as clients own homes and community settings).

Client interventions were most effective when the SPEAR Veterans Support Service assessed and addressed the totality of the clients' life situation, which in many cases required skilled holistic interventions and a co-ordination of support from other specialist agencies.

Veterans also responded well to having one point of contact, through which engagement with other specialist services could more easily be brokered and made greatest progress when all their support needs were addressed in one co-ordinated support intervention.

As is the case with the wider population, rough sleeping and other forms of homelessness are closely related to other support needs.

The Key Achievements of the Service

The SPEAR Veterans Support Service was successful in tackling and preventing homelessness and addressing related health and social care needs. This was because over the 3 years of the project, the SPEAR Veterans Support Service adapted to meet emerging and developing client needs and focused efforts on interventions which proved to be most effective. The following key success factors underpinned the success of the service:

- **Providing a service based on assertive outreach model principle enabled the SPEAR Veterans Support Service to engage the hard to reach group of Veterans.**
- **Offering a holistic service which assessed and considered the totality of a Veterans life circumstances allowed multiple benefits to be delivered.**
- **Playing a co-ordinating role with other agencies was key for clients who had multiple needs and had previously failed to benefit from engagement in other services.**
- **Developing partnerships with a wide range of relevant agencies, including rough sleeper services and local community groups was essential to success in many interventions.**

Commissioning Recommendations

The future commissioning of the Veterans' services in London should take the above key findings into consideration, specifically, that an assertive outreach model is considered as a positive means of promoting engagement and achieving co-ordination amongst various organisations to address a range of support needs.

There is an urgent need for a bespoke ex-Gurkha service to support and build capacity within the Nepalese community in London to promote social inclusion and address worsening health and social care issues.

There is scope for Armed Forces resettlement support to improve the way in which army leavers are assessed and supported post discharge.

Partner testimonial:

“You have gone beyond what you are expected to do. You have been asked to work with extreme complex and hard to engage clients who are very chaotic. You have stepped in at a short notice to help when needed, liaising with other agencies to help and support clients in order to accommodate them. You are seen as an extension of our service, someone whom I can depend on to provide help that provides an out-of-hours service. Without your service, the clients would not be picked up by mainstream services.”

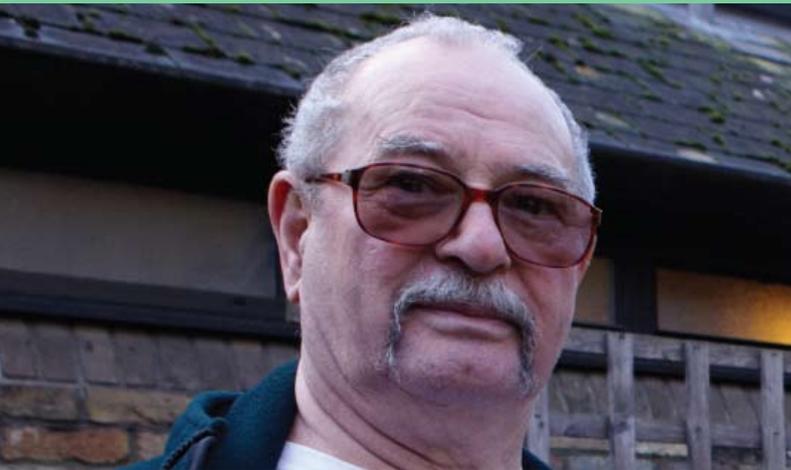
**Tariq Mughal, Social Worker –
Merton Drug and Alcohol Recovery
Team**

Case Studies & Testimonials

Dave approached the Veterans Support Service for help 14 years post-discharge. Following a relationship breakdown, Dave lost his job and became homeless. *“I lost everything - my partner, my job, my last support and my home. The counsellor said it would have been a surprise if I didn't have mental health problems!”* Dave was supported by a SPEAR Veterans Support Service worker into accommodation. As his difficulties were a result of mental health problems he was encouraged to obtain support from the Veterans Mental Health Service. He was then supported to focus on his goal of returning to work and was able to find a job as a driver, through SPEAR'S Skills Development Service.

Jack described being ostracised by his colleagues after an incident which directly contributed to his early discharge. His friendship and social circle which had depended on his service was terminated. He described the on-going anger regarding his treatment and his concerns about meeting ex-members of his regiment if he accessed support.

Tony is a 74 year old who had been sleeping in his car and in a friend's shed for six years following the breakdown of his marriage. He had no income and had numerous health problems. The Veterans Support Service supported Tony into sheltered accommodation and helped him to apply for the pension he was entitled to, resulting in Tony receiving a 10 year backdated lump sum. Tony says that he feels his life is “starting over again”. He has settled into his accommodation, his health has improved and he is attending the gym.



Client testimonial:

“SPEAR have been a life saver for me, I have been pulled out of a very dark hole, on the brink of just giving up. SPEAR's hard work led to the discovery that I had Parkinson's for over two years. I now receive the medication I need and attend a local support group”

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