

A Place to Play

Children's Play Needs in England's Temporary Housing

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The Reach Alliance was created in 2015 by the University of Toronto's Munk School of Global Affairs & Public Policy, in partnership with Mastercard's Center for Inclusive Growth. Our global university network now includes: Ashesi University, the University of Cape Town, Tecnológico de Monterrey, Singapore Management University, University College London, University of Melbourne, University of Oxford, and University of Toronto.

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Executive Summary

England's long-running housing crisis has recently accelerated into a new and damaging phase, compounded by rising costs of living. Social safety nets are straining to match the growing need for affordable, decent accommodation. The consequences of this crisis risk hampering the development of an entire generation. At present, there are over 130,000 children living in English temporary housing.

This research builds on existing evidence from the UK's Champions Project, which began looking at the impact of COVID-19 lockdowns on children in temporary housing. We build on this body of literature to explore the challenges that families living in temporary accommodation face, especially ensuring time, resources, and space for their children to play. We interviewed three families living in temporary accommodation and sixteen professionals working across sectors to gain an understanding of how play is considered in health, housing, policy, education, and lived experience. Although it is well-researched that living in temporary accommodation is harmful for children's development, both physically and psychologically, there has been very little attention to children's need for play in these spaces.

England's Cost-of-Living Crisis and Its Effect on Housing

England is experiencing a "cost-of-living" crisis, with household budgets squeezed by huge increases in costs of essentials such as food and energy. According to the Office for National Statistics, the cost of living is now the most commonly identified problem by UK adults with around half reporting their rent or mortgage costs increasing in the last six months. 1 The crisis has also had a significant impact on local and national capacity to provide suitable accommodation, both temporary, for households at risk of homelessness, and permanent. Rising housing costs, limited affordable options, and increasing demand have placed immense pressure on local authorities and housing providers. As a result, the quality and availability of temporary accommodation (TA) have been affected, leading to inadequate living conditions, particularly for families.

Social safety nets are straining to match the growing need for affordable, decent family accommodation. There are now over 130,000 children living in temporary housing in England. With crucial phases of their early development spent trapped in unsuitable accommodation, these children are growing up without space to crawl and walk, let alone play.

International bodies like the World Health Organization (WHO) and United Nations (UN) stress that play is a fundamental aspect of childhood development not only for health but for joy and happiness. The UN advocates for play as a right, with reference to Article 31, saying: "Countries must recognize the right of the child to rest and leisure, to engage in play

and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts." As a member state of the UN, the UK is responsible for protecting and fulfilling this right which suggests that where food, water, shelter, and other means of survival are basic human rights for children, play should be considered in the same manner. However, play is far from a central concern in current UK child development guidance. A commitment to ensuring that play needs are met, along with the UN Sustainable Development Goals (SDG) 10 (Reduced Inequalities), 11 (Sustainable Cities and Communities) and 17 (Partnership for the Goals), act as a guiding lens for our research.

The UK is a composite of many cultures, ethnicities, languages, and heritages. We recognize that our definition of play is a Western concept derived from academic literature originating in and around the UK and the Global North. Play has many meanings, each based on a myriad of factors including cultural context, and this plurality should in no way be considered less valid. Living in TA is one form of marginalization that families face, but there are layers of complexity and oppression that make up people's individual experiences. How these factors interact can create a synergy of disadvantage.

Among families experiencing homelessness with dependent children, a large demographic is single mothers who make up more than 20 per cent of all households in TA.² In 2020, 24 per cent of homelessness applications to local councils were from Black, Asian, and minority ethnic communities. These statistics, while telling, fail to quantify the systemic and individual experiences these vulnerable communities may face in the way of racism, classism, and sexism.

^{1 &}quot;Public Opinions and Social Trends, Great Britain: 14 to 25 June 2023," Office for National Statistics (ONS), 30 June 2023, Statistical Bulletin, Office for National Statistics.

^{2 &}quot;Statutory Homelessness in England: January to March 2023," Department for Levelling Up, Housing and Communities, July 2023. 🗹

Context: Housing

Temporary Accommodation and English Housing

Limited supply and soaring demand have created an intense housing crisis across England, magnified in populated urban centres like London, Birmingham, and Manchester. Given the supply shortage of decent, secure, and affordable housing, a large and rising proportion of the population is now housed in unaffordable and insecure accommodation in the private rented sector, where rents are rapidly inflating, particularly since late 2021.³ In cities, home purchase prices are far out of reach for most, especially first-time buyers. Over the past 25 years, average property prices have increased from around 3.5 times annual income to over eight times.⁴

A failure to build sufficient council housing (a lowrent form of public housing), or to replace homes sold privately through the "right to buy" policy (which enables council tenants to purchase their homes at a subsidized rate), means that many local authorities have waiting lists of thousands of people, far in excess of their ability to provide homes. The combination of these factors leaves the privately rented sector as the only option for many people. This is the least secure and most costly form of housing, threatening tenants with homelessness at short notice should their landlord evict them or raise the rent above what they can afford. The shortage of homes compared to demand is causing rapid rent inflation and frequent evictions because tenants lack protection.

Individuals and families enter temporary accommodation for many reasons, from refugee status or evictions to relationship breakdowns or fleeing domestic abuse. The majority of those experiencing homelessness in the UK are not "rough sleepers" living on the streets, but are hidden homeless housed by their local authority in temporary or emergency accommodation, and those with informal arrangements such as "sofa surfing." Local authorities are responsible for securing accommodation for these "unintentionally homeless" households, especially those who fall into a priority need category, which includes anyone who is pregnant or living with dependent children. Authorities have both a preventative duty to try and help people avoid becoming homeless and a relief duty to house those who have become homeless.

Around 65,000 families currently live in English temporary accommodation (TA) — a figure that has almost doubled since 2010 and that continues to increase.⁵ Humanitarian reports and UN findings provide critical assessments of the state of TA and urge policymakers to address systemic issues. In a 2022 review, Human Rights Watch details how state funding for local authorities has steeply decreased, falling around 37 per cent in the last decade.⁶ Austerity has slashed family benefits. Starting in 2011, the Local Housing Allowance (LHA — government support for tenants renting private accommodation), reduced its rent coverage from 50 per cent to only 30 percent. The report identifies that this could be one of the reasons behind a 65 per cent increase of families living in temporary accommodation.⁷

According to the All-Party Parliamentary Group (APPG) on ending homelessness, the crippling effects of living in TA are often met with a lack of support from local authorities. Families must cope

^{3 &}quot;Index of Private Housing Rental Prices," UK Office for National Statistics, May 2023.

^{4 &}quot;Housing Affordability in England and Wales: 2022," Office for National Statistics, March 2023. 🗹

^{5 &}quot;Statutory Homelessness in England: January to March 2023."

^{6 &}quot;I Want Us to Live Like Humans Again," Human Rights Watch, 17 January 2022. 🗹

^{7 &}quot;Statement Made by Mel Stride," Written Questions, Answers and Statements," UK parliament, 17 November 2022. 🗹

with poor maintenance, lack of basic household goods, accessibility issues, and feeling unsafe when sharing accommodations with individuals who have antisocial behaviour. Children who live in temporary housing are more likely to have poor physical, social, and educational experiences than their housed peers.

Facets of Temporary Accommodation

In theory, local authorities use TA to house people before they can access suitable secure accommodation. In practice, an individual or family may live in TA for years before being allocated a permanent home. Approximately 33 per cent of homeless families with children live in temporary accommodation for between two and five years.⁸ In some boroughs the wait time is worse. For example, in Westminster, people in TA wait for an average of ten years before they are rehoused in a two-bedroom unit.⁹

Depending on council resources, TA can take different forms including bed-and-breakfast hotels, hostels, private sector accommodation leased or paid for on a nightly basis by local authorities, and local authority or housing association accommodation. Some accommodations are less suitable than others, particularly for families, because they are overcrowded, lack facilities for cooking and washing, and have infestations and mould. The accommodation's location can also mean that families are pushed out of city centres to converted industrial parts of towns, far from support networks or resourcing services.

Refugee Housing

Refugees and asylum seekers make up a distinct subset of people living in TA. Some are entitled to state support while their asylum claims are decided, which may include a weekly stipend and TA. Their treatment is a point of significant political controversy in the UK. It is current policy to house asylum seekers in "basic accommodation." In the words of an immigration minister addressing the House of Commons "accommodation for migrants should meet their essential living needs and nothing more" as a deterrent to people arriving illegally. 10

Context: Child Development

Homelessness and Child Development

Homelessness, and life in TA, are adverse childhood experiences (ACE), defined by the Greater London Authority as "acute traumatic events or chronic stressors, experienced in childhood, which a child is unable to control."

The events leading to homelessness as well as the duration of life in unstable housing, qualify as ACEs and are associated with lifelong repercussions including poorer physical, mental, and social health. They also influence one's level of education, income, career, criminal activity, drug use, and risk of disease. In this way, if unsupported as children, young people can grow into adults reliant on state resources.

^{8 &}quot;H-CLIC 2021-22 Annual Release," Department for Levelling Up, Housing and Communities, 2022. 🗹

^{9 &}quot;How to Apply for Social Housing," City of Westminster, 7 January 2021. 🔀

¹⁰ Robert Jenrick, "Illegal Migration Update," 29 March 2023, Hansard (Vol. 730). 🗹

¹¹ Miriam Bullock, "Adverse Childhood Experiences in London. Public Health Specialty Registrar," Greater London Authority, 2019. 🗹

Play As Essential for Child Development

When children play, they to learn how to think, communicate, and interact with the world. Play in the early years lays a foundation for physical, emotional, social, and psychological well-being. For children with ACEs, play offers relief from negative stressors and opportunity for positive learning and modelling of healthy behaviours.

While the concept of play spans a variety of definitions and understandings, it is universally recognized as a central element of childhood — as interactions in an unstructured, recreational manner. Play is the act of engaging, pretending, moving, touching, observing, imagining, and expressing, all producing enjoyment and happiness. It facilitates the development of a child's social, communication, and physical skills and a host of basic human functions necessary for a healthy life, for example, fine and gross motor skills: eye tracking, learning balance, strength, and coordination. Having the opportunity to play with others allows children to learn the art of communication, empathy, and learning to

share. It also supports cognitive growth, allowing children to learn decision making, responsibility, and independence.

Champions of early childhood development validate the importance of play and environment as a child's brain forms. For healthy development to occur, children must have an environment that is safe, protective, and nurturing, which accounts for adequate nutrition, access to education, and access to play and leisure. Children experiencing homelessness may lack many of these elements given their uncertain environment. Children in TA fair no better, with most TA units failing to meet families' unique needs.

Play and Development in UK Policy

Although the UK deploys guidelines to promote population well-being, its attention to vulnerable children's play and leisure needs lacks a holistic approach. In 2015, the government published "All Our Health," a framework intended to guide health professionals to promote widespread well-being. The guide's "Healthy Beginnings"



Figure 1. Defining play for children under five (by Anna Pearl Johnson)

section recognizes the importance of giving every child the best start at life by reducing childhood health inequalities. This guidance centres healthy pregnancies as the start to healthy lives, but mentions play only twice: once, in the context of "tummy time," and then, in the importance of playing with other people.¹²

In 2021, the government published, "The Best Start for Life," stressing the importance of the first 1,000 days of a child's life as a sensitive period where babies learn to adapt to their environment. This 147-page report mentions play only three times, never as a priority focus area. The same is true for other national health strategies such as Public Health England's "No Child Left Behind" approach, which outlines leading guidance on improving outcomes for vulnerable children but mentions play only once — and only superficially, that there are "not enough" places to play. 14

Widely regarded as a landmark study in health, the "Marmot Review" describes how the earliest years of life set the tone for a person's entire lifespan, making childhood a time of both consequence and opportunity. In 2020, Marmot described how England faces a recent decline in health equity after years of improvement. Child poverty has increased, upwards of 70 per cent in workless families.¹⁵ Funding for childrenbased services like Sure Start have dramatically decreased. Negative outcomes are further heightened among those from ethnic minorities and those with disabilities. Marmot concludes that a combination of austerity and lack of action on the social determinants of health will have detrimental impacts for generations. Changes in policy can take years, if not decades. But

unfortunately, children experiencing housing insecurity or homelessness do not have time. Two or even five years can mean the difference between a healthy life or one of difficulty and distress for a child.

Context: Play and Temporary Accommodation

Despite evidence showing the importance of play for children's development, providing and supporting play in temporary accommodation and housing policy is widely neglected. Families and professionals gave a common reason for this neglect: play cannot be seen as a priority when temporary accommodation (TA) fails to meet a child's basic biological health needs. And yet, play is an essential component of development, if not as vital as food and water. The matter of play and children in temporary accommodation is thus systematically deprived of voice and perspective.

Play and TA in Literature

Various reports and initiatives formally profile the issues surrounding TA, but seldom with a focus on play. For example, Shelter, a London-based charity, reported five main findings related to temporary accommodation: the dangerous, "slum-like conditions," its paradoxical permanent nature, its perennial instability, how people are often moved far from their homes, and tenants' feelings of powerlessness. The report speaks only briefly to lack of space to play as a detriment to children's academic and social lives.¹⁶

^{12 &}quot;Healthy Beginnings: Applying All Our Health," UK Government. 🗹

^{13 &}quot;The Best Start for Life: A Vision for the 1001 Critical Days," UK Government.

^{14 &}quot;No Child Left Behind: A Public Health Informed Approach to Improving Outcomes for Vulnerable Children," Public Health England. 🗹

¹⁵ Michael Marmot, "Health Equity in England: The Marmot Review 10 Years on," BMJ 368 (2020): m693.

¹⁶ Deborah Garvie, Jenny Pennington, Hannah Rich, and Martha Schofield, "Still Living in Limbo: Why the Use of Temporary Accommodation Must End," Shelter, 2023. 🔀

Several city-wide strategies recognize play as a fundamental aspect of a child's life, one being the London Plan, a statutory spatial development strategy developed by the mayor and published by the Greater London Authority (GLA). In its most recent edition (March 2021), the GLA approved a London-wide "Strategic Housing Market Assessment" identifying the need for 66,000 additional homes to be built each year. The plan also codifies consideration around adequate external infrastructure for play and leisure. Under this strategy, boroughs should be informed by a needs assessment of children's and young people's play and informal recreation facilities when preparing property development plans.

The plan further stresses the importance of safe and stimulating play for a child's mental and physical outlook and validates it as something beyond an activity confined to playgrounds. It recognizes that play takes place in and outside the home and therefore it is crucial that children can access a range of opportunities for play. The London Plan is an important recognition of the built environment and play as an integral part of a child's life.

Research Approach

To understand the impact of life in temporary accommodation (TA) on children under the age of five, we used a qualitative approach, prioritizing the lived experiences of families housed in TA alongside the perspectives of professionals and stakeholders.

Our primary questions were: Within the context of the cost-of-living crisis, what impact does life in temporary accommodation have on the ability of children under five years old to play, as part of their essential development; and what can caregivers, service providers, and policymakers do to ensure children's play needs are met?

These inquiries were underpinned by three subquestions:

- 1. How are under-5s' ability to play affected by life in temporary accommodation?
- 2. How do caregivers, communities, service providers, and policymakers try to meet the play needs of under-5s, independently and together?
- 3. What could be done differently within the home, outside the home, and in the community to ensure these needs are met and that under-5s in temporary accommodation do not fall behind in their development?

Positionality and Preparation

The research team is comprised of North American, British, British-Pakistani Canadian, and Italian nationalities. Each of us has postsecondary education. Three members have advanced backgrounds in policy and one has a health background. Three of the four members have worked in the public sector. One researcher is a parent to two young children. None of the researchers have experienced homelessness.

After completing one-on-one sensitivity training, we spoke with research supervisors, academic advisors, and a group of health visitors (registered nurses or midwives who conduct home visits as part of public health provision in the UK) to develop sensitivity to the needs of parents. We also worked closely with a community facilitator in Manchester to anticipate the needs and comfort of the families we spoke to.

Then, to affirm findings from interviews, we completed two "transect" walks, one around a TA block in Balham, South London, and a second around multiple TA units in Oldham, Manchester. Transect walks are a group exercise of intentionally walking around a community or public space to explore the physical conditions of a system or topic.

While completing fieldwork in Manchester, we visited the Healthy Gems Hub Baby Bank (a centre where families in need can access basic resources, items, and other services) and the Justlife Centre charity for homeless adults. As with the transect walks, these visits enabled us to learn first-hand about support methods.

Professional Stakeholder Interviews

In the first stage of the research, we sought professionals with relevant knowledge spanning temporary accommodation, health, and development of children under five, and play. We used a semi-structured interview guide organized by topic (TA, play and child development, resources and support, and links between policy and community). All interviews closed with a series of questions envisioning the future and thinking about change.

We met with a total of 16 stakeholders: a mix of policymakers, third-sector professionals (i.e., nonprofits and charities), researchers, academics, teachers, and health professionals. We aimed for a range of seniority, from CEOs to officers, but to maintain their anonymity, the stakeholders are mentioned throughout the report using lettered pseudonyms. Specifically:

- early years educators (A, B, and C) represent a range of London-based professionals working in an educational capacity with young children, both directly as a teacher and in leadership and executive headteacher roles;
- an academic expert in urban studies and child-friendly cities;
- housing policymakers (A and B) who work directly in housing strategy and policy in local government. Housing Policymaker B has expertise in homelessness and domestic abuse.
- third-sector housing professionals (A, B, and C) working in nonprofits and charities addressing homelessness across England.
- a **council housing officer** managing several TA buildings for a borough in London.
- a health policymaker public health professional working at the national level.



Figure 2. Breakdown of study interview participants (by Anna Pearl Johnson)

- third-sector health professionals (A, B, and C) working with an organization that seeks to reduce health inequities by working directly with families experiencing homelessness.
- a clinical psychologist/trained therapist with expertise working with families and mothers experiencing homelessness.
- a research psychologist with a background in neuropsychology and a research focus on play in child development.

Caregiver/Parent Interviews

In the second stage of our research, in partnership with the Shared Health Foundation and North East and North Cumbria NHS Foundation Trust operating out of Manchester, we spoke with families living in TA. With the assistance of Rosie Austin, a trainee clinical psychologist, we recruited three family participants, all of whom identify as parents.

Initially, we planned to employ creative methodology, using a "play diary" to have interview participants document (text, photo, video) their child's play experiences over the course of a week prior to our interview. We would then use the diaries as narrative inquiry prompts in the interview. Time constraints, difficulty securing participants, and communicating prior to the in-person interviews did not allow for this.

As with the stakeholder interviews, we anticipated using a semi-structured interview guide, organized by topic (impacts of the cost-of-living crisis, TA, children and play in TA, links to community, accessing resources and support, and envisioning change). In practice, these interviews took the form of an extended conversation, letting participants freely tell their stories.

Data Analysis

We analyzed both sets of interviews using an adaptation of inductive content analysis and a rapid qualitative research method called RREAL (Rapid Research Evaluation and Appraisal Lab) sheets.¹⁷ This enabled us to note, examine, and share findings across the interviews in real time, coding the data as it emerged. The inductive method then allowed us to adapt our coding according to emerging themes from the data.

What We Found

Play and Development for Young Children

Keen to understand where play was situated in the health landscape, we spoke with professional stakeholders and families living in temporary accommodation (TA) about their knowledge of the links between development and play for children under age five. In their answers, we identified three key themes: physical health, social development, and psychological and mental well-being.

Physical space is crucial for children's physical development, supporting their gross motor skills and ability to engage in play.

For families living in TA, physical space is scarce. Young children want and need to move around, explore, and be energetic. A lack of physical space can be extremely harmful. Health experts in child development and play shared a similar narrative across most interviews. The small and crowded space in TA delays a child's ability to walk, impacting their gross motor skills. Early Years Educator C described how the combination of COVID-19 lockdowns and insufficient space

¹⁷ Cecilia Vindrola-Padros, Georgia Chisnall, Natalia Polanco, and Norha Vera San Juan, "Iterative Cycles in Qualitative Research: Introducing the RREAL Sheet as an Innovative Process, OSF Preprints, 25 June 2022.

in TA meant that more children were starting nursery school without being able to walk and lacking basic play skills. The built environment is critical to facilitate play for children. Space was the issue most mentioned in conversations surrounding physical health and play.

The space in TA is often inappropriate for children at the most basic level. According to Housing Policy Expert B, "the physical situation you're living in, which might be completely inappropriate for children — you know, not enough space to play, not enough space to have friends over, not enough space for young children to develop." There is also heightened anxiety around physical health for children in TA. Two stakeholders shared that mothers worry about the levels of mould and dampness in their TA, which tends to suppress their desire to engage in playful activities. Educator C said, "We did one home visit and there was a bed in the kitchen area ... lots of homes have damp."

Third-sector Housing Professional C further confirmed that the lack of space inhibits both play and fundamental development milestones.

Basically a mum is spending all of her time and energy trying to meet the basic needs of food, clothing, shoes, and shelter and that doesn't leave a lot of time for play. A lot of our mums are living in a room the size of a parking space with a bed which takes up all the floor space, so we see a lot of homes where there's no space on the floor for a child to crawl or roll or play. Children are sort of doing everything on the bed, eating, sleeping, playing, trying to learn to walk, trying to learn to crawl.

Family C, a single mother with a sevenmonth-old child, described her experience of a studio TA flat, speaking about her daughter's development milestones:

There's no room: I don't have my own bedroom and neither does she. I think it will affect her development because she's at the age now where she wants to get up, stand up, and crawl around and there's no space for her to do that. It will only get worse as she gets older.

She hasn't crawled yet, but my worry is when she does crawl, how do I baby-proof this? Where should I put the playpen, on my head? I'm on my own, so if something happens to her, it will be my fault. How can I keep her safe when she gets mobile? There's open wires that I can't put away. When you do a load of washing, where do you put it?

She is limited to what she can play with because there's no space to pull stuff out. Half the stuff she's got she doesn't play with anyways, because she can't. She's getting where she should be doing the sensory play with paints and water. If you have a garden you can get stuff on Facebook for free. If I had a house, I could go pick that up. I feel like she's missing out on stuff that she should get. You can only do your best. It's frustrating.

Play stimulates social skills, personal agency, and healthy conflict resolution, mitigating some of the negative impacts of isolation associated with living in TA.

Each of our stakeholder interviews frequently described play as a tool to stimulate social

development and facilitate early communication. Each early years educator described play in the context of social skills, with one saying, "They're going to develop the kind of personal, social, emotional skills through exploring how you make relationships with other children and with adults." They viewed play as providing choice, agency, and empowerment: "Empowering children to learn the choices that they make — I very much see that as play." They further described play as a mechanism to develop the ability to handle conflict and disagreement while tolerating different opinions.

Family B, a single mother with an 18-month-old, described the importance of interaction through a play group: "The play group has been very helpful because I learn a lot of things from my child. When I see her play freely I can learn what she likes — what she prefers. I take lessons from that. Friday, I saw her do messy play with sand and oats, and I never saw her doing that before, because there are more resources here. Having the ability to play with other children is also great because she is learning skills like sharing, which she couldn't necessarily do by herself at the TA unit."

Third-sector Housing Professional C noticed an increase in social developmental disorders, suspecting that this rise may be in part a result of insufficient social interaction in TA and the pandemic's lasting effects. The other third-sector housing professionals observed that toddlers were facing a fear of strangers and found it difficult to be away from their mothers. The constant presence of a parent, particularly in cramped TA settings, impacts a toddler's attachment. Strict TA visitor policies often inhibit families from interacting with their friends, family, and other social networks. Professional A shared: "In the hostel you can't have visitors. So, it

means, obviously, kids can't have friends home from school and parents ... can't draw on the support that they already have."

Families living in TA described unhealthy attachment. Family A, a refugee mother and her two-year-old son, live in the suburbs of Manchester and encountered a barrier when inviting a friend to their home. Under a safety and antisocial behaviour policy, the TA building required proof of ID. Her friend described her situation as "just like a prison." The family now avoids inviting people over because of the shame and stigma surrounding her environment. As a result, all her time is spent with her child. She feels apprehensive about her son beginning school in the future, because it means for the first time, they will be apart.

Family C shared her sense of isolation living in a cramped TA studio with her newborn daughter: "You don't really want to bring people around. My family will come, but say if you had a partner, you wouldn't want to bring someone because it's embarrassing. I didn't use to live like this — I'm not used to it. I just fell on hard times."

TA affects the psychological well-being of both parents and children, leading to feelings of guilt, unhappiness, and a loss of agency, ultimately inhibiting ability to play.

Although we anticipated TA's impacts on mental health, we observed that the turbulent nature of TA and constant displacement can shatter one's psychological state. Health Third-sector Professional A shared their frequent "conversations with parents who carry an awful lot of guilt and shame about the fact that they're even in this situation." Parents' feelings of helplessness and guilt around not being able to ensure the best life for their child colour all other facets of life.

All three participant families described the effect of TA on their mental health. Family A said, "I just got sent for an assessment. I was just literally crying from inside ... I don't know what to do. I said maybe I need help or something." Family C explains: "I've had no news of when I'm moving onto the housing register. It's just the unknown. No updates. All I get told is that it's temporary, but that could mean anywhere from months to years — you just don't know. It has an effect on your physical and mental health to be honest."

Early Years Educator A shared how the rising costs of living mean that "there are a lot of unhappy parents out there raising unhappy children." The cost-of-living crisis heightens volatile emotional states, with parents feeling guilt, shame, or failure over the financial burden to provide basic items and experiences for their children. This translates into parental anxiety and worsens attitudes toward play. Almost a synergy of these incredibly difficult events and situations, the mental state of the parent seems to reverberate in their children. The constant proximity of children with their parents creates pressure where children absorb their parent's emotional state.

The toll of being a single mother in TA triggered Family A into a mental health crisis: "I just started overthinking. It just made me so depressed. Even my hands are like burning from stress and anxiety. I can't sleep." She describes a change in her son's emotional and behavioural state. We saw the walls covered in drawings, with toys strewn over the tiny living area. Her son is disruptive and withdrawn. "He's not emotionally well or behaving well. He was not like this before. He used to behave very well. It changed because of the environment and the surrounding people since we moved."

Parents and children in TA grow accustomed to lacking agency. A research psychologist mentioned how, "acknowledging that children have agency is really important. I think that's one of the things that gets lost first when you're in

temporary accommodation." Families voiced feelings of helplessness and a lack of control over their situations. Family B highlighted the lack of control and agency she feels living in TA: "You can't really consider it a home because it is temporary. I can't plan for the future in this way. I can't work right now."

Third-sector Housing Professional C said, "these children are being retraumatized day by day, which will obviously affect their ability to experience joy and play." At a critical time in their lives, when children need to play and simply enjoy their childhood, the adversity and distress of TA majorly inhibits their right to be children.

Temporary Accommodation's Impact on Play

Isolation and Insecurity

Temporary accommodation (TA) removes the activity of play from the social sphere, leading children to have less interaction and, consequently, a less sustained habit of playing with their peers. Early Years Educator A describes how it is empowering for children to attend a space where there are more children than adults on a regular basis, but TA hinders this long-term and sustained engagement. Without peer-to-peer play, children are more likely to become insecure or experience social developmental disorders, ultimately stemming from both a lack of understanding of play and prolonged periods of isolation.

Sometimes caregivers even discourage play. A perceived lack of safety in the surrounding environments can lead to parental anxiety, causing them to favour the child staying home as opposed to leaving the premises. Several stakeholders and families highlighted how parents are often reluctant to let their child play in a communal space when there is little to no knowledge of those who live in the same building. As Third-

sector Housing Professional C put it, if you have limited resources when it comes to clothes, for example, parents and caregivers can be reluctant to encourage messy play or let their children go outside to play: "When you're only allowed to do one lot of washing a week, you don't want your child to get muddy or wet or whatever."

Uneven Development Trajectory

The difficulty of playing in enclosed outdoor environments is often compounded by the already-small areas where families live, which severely limits the ability to have a breadth of play experiences at the children's disposal. A council housing officer described a tenant whose young son with autism has resorted to playing in the bathroom for lack of an alternative space:

I was discussing various concerns with a resident the other day and she brought up to me that her son has autism and what he's doing at the moment is that he's going into the bathroom to have his own space to play. She's trying to manage that situation by explaining to him that the bathroom is not somewhere to play, but he doesn't have anywhere else.

Children in TA often have exceptionally developed fine motor skills, such as drawing, because that is what they are able to do in small spaces. Similarly, one child came to nursery already knowing how to read but was unable to walk around the garden path by themselves and didn't possess basic play skills. In many cases, playtime must fit (often unnaturally) around the schedules of parents, as

Family B described their struggles living in a hotel setting and stressed the importance of building community while in TA: "When I lived in the hotel I didn't cook — I just bought ready-made food. There was also no space for playing because there were no shared or outside spaces. It was just a room ... It's very helpful [to know someone in the unit] because if my child is sick or wants to cry, I take them to my neighbour's room (who has a baby of a similar age) and they instantly feel better. When I'm stressed I go over for a coffee and a chat and I also feel better."

Family C, a single mother with a seven-month old child, was housed on the third floor of a hotel (with no lift) during her pregnancy before being moved to a council TA housing unit just weeks before giving birth.

Before this TA, I was living in a hotel in the city where I didn't know anyone. There were drug users, alcoholics, rats, and nowhere for me to cook. There was a microwave but nowhere to store food. I was 30 weeks pregnant and couldn't eat properly. They told me that it was fine, that, "people come all the time with babies."

I wrote to the council and they said I wasn't a priority to be moved for another six weeks, but she was due to be born. Where should I take the baby's stuff? What if I have a c-section? What if I can't carry stuff upstairs? How will I carry a pram and a baby? I rang Social Services and asked them to assess the property. They came and they said it was unsuitable. Then they rang the council and the day after I got my current property.

I know what authority they've got. The council had told me no, but that doesn't mean nothing to me. I'll just go above you. It's a step up from a hotel, but this is not where I want to be. Because I wasn't able to eat properly, when she was born, she was dead small: only 5.11 lbs. She was tiny.

Third-sector Housing Professional B recounted: "We often have families where a parent works night shifts and has to sleep in the daytime. So you go up to the rooms and you find the kids sitting there in the dark, watching the TV with the sound off, because their dad is asleep."

The type of TA greatly matters for play. Third-sector Housing Professional A recounted how in one borough, it is common to see repurposed TA, for example, an old building that used to house nurses. These unique locations often have ample space within to be reimagined for other means. In this case, a spacious basement could host stay-and-play sessions (organized play activities where parents and their children can drop in) and be transformed into a common space for children.

But their experience with hostels in another borough made situations more complicated when it came to play. Draconian visitor policies that arise from having to manage buildings that house both families and individuals and prevent any potential "antisocial behaviour" lead to adverse consequences for families. The same charity worker told us: "In the hostel you can't have visitors ... It seems that policy developed because they shove families in with single adults in the hostels."

Without dedicated attention to children's play needs, it can be challenging to balance the needs of families and the private business and management of the accommodation in question. When asked to what extent play is a focus of housing provision for the council, a housing officer replied, "If I'm honest, there isn't much provision in terms of play that's been thought out."

Families' Play Needs Overridden

Neighbours may not like the noise of children playing, or the owners of an accommodation may not want to be liable in case a child gets hurt, so families are denied access to common outdoor space. Isolation and containment become a strategy for conflict mitigation.

There's been allegations coming from the ground floor flat in relation to one family's household and another household. It was decided that continued access to the garden could potentially inflame the situation. So we've had to restrict access at that time, but it's definitely having an impact on that family, especially their child. (Council housing manager)

Even when communal space is not restricted by management, it often isn't an ideal environment for children to safely play. Family C told us, "Where I live there is a communal outdoor space. There's all different sorts of people; there's people drinking. You don't really want your child around that. Mainly I take her to the park instead, but that's an effort."

Communal space, in many cases, doesn't exist. Family B said "There is no room for play. There's no space for babies. There should be a building for babies to play, or at least stuff like slides for children to be able to play with. More resources available would also help, like toys that children can play with. Right now, I walk 10 minutes to the park and playground area, and the road that needs to be crossed is very dangerous."

Even when hotels are equipped with communal space, they can be quite disinclined to let families use it because it might be a potential source of chaos. Families are more easily manageable if they stay in their rooms. A nonprofit health professional talked about a hotel they personally know of with a large outdoor space seldom used as a play area because the neighbours complained. A council housing officer who manages TA sites in private accommodation, hotels, and hostels echoed this sentiment explicitly: "With antisocial behaviour, we might limit the access to gardens just to ensure that we can manage any issue. Housing managers are

aware of the impact this has on residents and stated that they have voiced their concerns that it would be good to have that outdoor space to use."

While completing interviews at a local health clinic in Manchester, we had to cross multiple streets via a round-about intersection to enter and exit the nearest TA site. There was no crosswalk, footpath, traffic lights, or ramp. The TA building itself was enclosed by concrete, without secure green play space.

Efforts to Meet Children's Play Needs

We asked interviewees about efforts from families, public service providers, charities, and policymakers to address these issues. We also asked about links between families and



Figure 3. Aerial view of the surroundings of the temporary accommodation (circled in red), next to a busy multi-lane roundabout as well as an additional intersection in front with no zebra crossing (crosswalk) on either side



Figure 4. A busy round-about intersection between a TA block and its nearest health clinic, Manchester

policymakers to understand whether there were attempts to improve conditions and design services based on lived experiences.

Free and local services are highly valued

Many services try to help parents in TA meet the play (and other) needs of children. Interviewees stressed the importance of children's centres, stay-and-play services, libraries, leisure centres, and charity and faith-group projects. These are not necessarily aimed specifically at families in TA, but they provide places to go where children can experience good play and parents can get support from others.

Families in TA during the cost-of-living crisis stressed how important it is to have free or very low-cost services, for example, a scheme



Figure 5. Multi-lane road between TA block and local services, Manchester



Figure 6. Exterior of TA block, Manchester

providing free access to leisure facilities for children with disabilities or special needs, though similar provisions for children living in unsuitable housing are lacking. Early Years Educator B described working with the local library service to provide free sessions for families and that play sessions in churches have been important but often carry a charge for attendance and some have not reopened since the pandemic. "It needs to be somewhere that's really open and welcoming and that you don't feel you're going to be stigmatized for any reason and where there isn't a cost." Early Years Educator C said "If budgets are tight, you need things on your doorstep, don't you? That's why I think the children's centres are so important."

Charities create their own services to fill gaps in provision for play. Two third-sector housing professionals described their work to create play spaces within TA blocks where possible, for example, converting a derelict basement into a play club. Other public services advocate for an improvement in a family's housing. Educator C gave an example of escalating the family's housing situation to social care by saying the child's health and development would be severely impacted if they stayed in their accommodation. Such referrals from educators, doctors, and other experts can be made in relation to play, access to food, space, and safe living conditions.

The same educator stressed the value of having a social worker attached to the school who can help coordinate access to services and support. School social workers can invite playful experiences for vulnerable children through encouraging access to resources and activities, during both school and holiday times. The clinical psychologist also described trying to help families access services such as food banks and improved benefits so that mothers "have a bit more space to do what you really want to do, which is be available for your baby or your child."

Outdoor space is a point of inequality

Most interviewees mentioned outdoor playgrounds as a key facility needed in every neighbourhood. The academic stressed the need to maintain the built environment and public play facilities in the community more broadly. This may mean creating play space, formal and informal, especially near them. Most interviewees felt that playgrounds were essential infrastructure but that there are disparities in terms of provision. The research psychologist noted that a council housing estate would typically have "more of a community around it [and] will have more play spaces within the development."

Homelessness as a barrier to accessing support

Interviewees reported difficulties linking families with available services at times because families in TA are often in "crisis mode" and focusing on basic survival. Third-sector Health Professional A explained this as being "not really in the headspace where you think, 'what group can I go to today with my children; what library could we get to?' Some families might be, but not everyone."

The clinical psychologist shared that "often people who end up in temporary accommodation have had really not great experiences with professionals ... there's a lot of people who have experienced having their voices ignored." This can make people reluctant to take advantage of local provision and "it is no good just saying 'this thing exists' because it is massive to leave your accommodation and go there." Because of this, their service prioritizes building relationships and focusing on families' needs before trying to link them with services, including play sessions.

In contrast, the health policymaker offered a generally positive perspective on service provision from a national level saying that "through children's centres and family hubs and the volunteering and community sector there's a lot available."

Play is not a priority

Health, education, and social workers all place a high value on play for development but have limited influence on housing and report a lack of joined-up policy. Housing specialists, in particular, spoke about the difficulties councils face in meeting basic needs during the housing crisis. Housing Policymaker A reported councils "experiencing the same pressure as when families are trying to find suitable accommodation. It's a lack of good options." This leads to the use of unsuitable accommodation to keep families off the streets, though it overlooks any needs that are not deemed "essential," such as play.

Some took a less sympathetic view toward providers and argued that play needs are not considered because "it never gets to the top of the emergency list." There was also a view that opportunities are missed such as at the London-based TA accommodation where we held one of our transect walks. Educator C pointed out that "there's a big space that could be made into a really nice play area," and asked, "Why don't they just spend a bit of money?"

Policymakers and families are disconnected

Families have very limited contact with people planning services and making decisions on their

behalf, particularly when moving beyond the very local level. The health policymaker explained that "from an overhead perspective we know [play is] important, but it's often a bit tangential or a secondary consideration" and that TA is primarily seen through a lens of child safety.

Many interviewees raised concerns about a lack of connection between those setting policy and those living in temporary accommodation. This was set out most starkly by a third-sector housing professional who described a "professional entitlement" of policymakers existing in a different class to service users: "The policymakers just don't know how bad this is and it's because it's almost unimaginable that this is happening. I think people are scared of what they're going to find out."

Housing Policymaker A offered a sympathetic view to both families and providers whereby "the extent of desperation that people are working under drives quite an antagonistic relationship between housing officers and families. Everyone is kind of suspicious of each other's motives. Both sides feel like they are under attack for everything."

The council housing officer felt that since the pandemic there is less face-to-face contact, particularly during the sign-up process for temporary housing. Having said this, the interviewee did explain that there are frequent







Figure 7. The outside spaces of a TA block in London, mostly concrete with a bit of greenery. This specific TA block is located near a private square garden, juxtaposing access to opportunities in a ten-metre radius.

contact points with those living in councilmanaged housing (more so than people housed in private sector accommodation) and that families often mention play needs. However, they felt housing was siloed from other services and housing officers have limited ability to make improvements relating to play or link with other services that might be able to help.

Family C feels frustrated and overwhelmed when communicating with the council but has not let it stop her from fighting for a better environment for her child.

Literally no one is listening. There was mould in the property and they told me to clean it — it's fine. I got a letter from my GP to say the accommodation isn't suitable and still nothing. I think I will write my own letter to complain. They are telling me to jump. I say "how high?" and it's still not good enough. What more do you want from me? I'm doing what most people wouldn't do in my scenario — they just want something for nothing.

She believes policymakers are not incentivized to drive change because they are too far removed from the daily realities of life in TA: "It's like they are just not bothered. They haven't got a care in the world. She isn't interested because she goes to work, gets paid, and then goes home. Because she's got a house. It doesn't affect her life so she doesn't care."

Looking to the Future: Proposals for Change

At the close of each interview, we asked participants to think about change and how temporary accommodation (TA) might better support children's play needs in the future.

Stakeholder participants varied in their interpretation of these questions, with some focusing on systemic or structural change while others made more individual or family-level suggestions. Several key propositions emerged: increase indoor and outdoor space, dedicate focus on parental and child empowerment, prioritize people-first policymaking, better signpost aid facilities and amenities and broadly, and increase awareness around the urgency of these issues. Family participants were less unanimous in their proposals, with responses ranging from hopeful visions of TA playgrounds to disillusion and apathy about change.

Prioritize children in TA to receive safe, local, private, and shared space

Participants affirmed the need for families to be given homes with greater amounts of space, both inside and around their temporary accommodation units. Despite being a straightforward proposal, it is by far the most complex. All participants acknowledged the immense financial and ideological barriers to accomplishing it.

TA suitable for children and families cannot simply be "four walls and a roof," as Thirdsector Housing Professional C believes is the current vision. TA should have adequate floor space for children to safely lay, roll, tumble, and stretch. Before people move in, the space should be rid of mould and damp and free of pests like cockroaches, mice, and ants. Children should have bedrooms separate from their parents or caregivers, allowing for sleep rituals, independence, and stress relief. Unit location within buildings and within cities should also be a consideration, for elements like proximity to communal green space, flights of stairs to climb with young children and strollers (or "buggies"), space to park strollers outside of the unit, and distance to children's centres and ageappropriate schools.

When asked what qualities the space would need to be effective, participants were clearly aligned on the necessity of safety and ease of location. Parents should feel safe within the places they take their children because, as Housing Professional C said, "there's a big risk emotional, financial, and physical — in terms of trying to go out and find areas and opportunities to play." This administrator further likened these desirable outdoor qualities to a 15-minute city model, but critiqued the density of "building up" models for TA housing, saying, "Everybody wants to live within walking distance of a shop and a playground and a park. Putting people in containers stacked up one on top of the other ... That's not a home. That's not where our children should be living."

Participants were divided on the purpose of communal outdoor space, with some saying outdoor space could be a supplement for those in cramped living conditions, and others concerned that communal space was not a worthy or humane alternative to a family's right to private space for their children to play.

Even with interventions identified, governments must accept measurement metrics that are not innately financial. Housing Policymaker B explains, "You have to speak to policymakers in terms of cost savings." Meanwhile, the academic explained the problem as: "[policymakers] want to know how much money can be saved ... so the fact that children are more capable, emotionally intelligent, sociable, or experience joy ... doesn't necessarily translate."

Family A hopes that in the future, TA units are equipped with easy access to outdoor spaces that are designed with play in mind: "I would love if there was a garden outside with a slide, a playground. If I'm not feeling well (referring to her physical disability), I can't go far. At least I could just take him outside."

Empower parents to play with their kids

Repeatedly, proposals suggested that parents should be better supported to understand just how fundamental play is to their child's learning and development. Educator A described the urgency of embracing play opportunities: "Sustained engagement starts from birth. We need to bring that into the classroom, really bring parents on board to understand the value of sustained play. If all you've got is 15 minutes to play a game together then absolutely use that 15 minutes."

Parents need to be empowered to play with their children in whatever way is feasible, without being deterred by the limitations they might face financially or spatially. One challenge was how parents might avoid community building because they wrongly think that TA will be temporary and short term, and therefore isolate themselves because they anticipate moving. The educator explained, "It's called temporary accommodation, but really they are there for the next two years. They are living under this assumption that it's gonna change very quickly and then it doesn't."

Some participants who work in homeless communities offer play role modelling, guiding parents into low- or no-cost play interventions. Third-sector Housing Professional C shared their advice to parents in TA, saying, "You are your child's biggest toy. You don't need any toys; you can play with your fingers, your faces, your bodies."

The same empowerment recommended for parents needs to extend to children, through play as a tool for agency. Participants described how the instability of TA leads to children lacking control and spiralling into either extreme codependency or unsafe independence. Play should be understood as a way for children to have choice, and problem solve, develop social skills, and build empathy with others. Particularly for open-ended play, or opportunities where a child can initiate playing, play becomes an act of ownership for children. To

some extent, play empowerment can counter the deprivation that TA creates.

Restructure TA policy as peoplefirst to better reflect practice

All participants working in policy articulate the disconnect between national policymaking and local policy delivery. They emphasize the need, not for copious amounts of additional funding, but for street-level bureaucrats privy to local need to guide the provision of funded services. Injections of funding can be harmful to vulnerable communities, without purposeful, well-considered allocation.¹⁸

As an example of the misalignment between policy and practice, Housing Policymaker A said: "It's not legal to put children in a bed and breakfast for longer than six weeks, unless it's an emergency. In practice, it happens routinely." Many participants questioned whether certain types of TA, such as bed and breakfasts and hotels, ought to be legal placement for families at all.

Stakeholder participants struggled to name policy champions for children's housing well-being at the national level. The academic described the UK's national mindset as inherently unfriendly toward children given the dissolution of coalition governments. Others see this phenomenon as a shift in generational norms: children and family relations are no longer at the centre of society or of policy. These participants call for a return to a lost ethos where children are considered a collective responsibility.

By placing children at the forefront of proactive decision making, interviewees felt that cities might evolve to be safer, collaborative, and more joyful. The academic called for play to be given a "civic identity," where the built environment and public space embody playfulness across age groups. One research psychologist we spoke with further summarizes this sentiment: "The more parents

Family C shared nuanced emotions about living in crisis and witnessing the lack of related state investment:

I don't think [TA] could be changed, to be honest. It is what it is. It's my own fault — I put myself in this situation, which I understand. But then I think, there's people that just get things handed to them and I've worked my whole pregnancy and paid my taxes. It's annoying how they prioritize people and you aren't a priority even though you've got a baby.

They're spending like 2 million, doing it all up, putting benches out. And it's like, why is the council putting money into a new shopping centre when you've got a housing crisis? It's stupid to put money into something we don't need. I don't know who makes the decisions.

I think the issue is that they don't have enough houses to put people in. But the way they prioritize people is wrong. Who is making these decisions? I just don't understand it.

Family A shared a similar reflection on the disconnect she feels with policymakers and service providers: "From the day I came, I just feel like no one is understanding or listening to what we are going through. So it's just ... like they are watching but they are not understanding."

feel able to let their kids go unsupervised, kids can engage in the good old-fashioned way that used to happen a couple of generations ago." Such an ethos would require a governmental shift away from "treating the symptoms of a problem

¹⁸ Mel Nowicki, "Temporary Is the New Permanent: Temporary Accommodation Policy and the Rise of Family Homelessness," in *Bringing Home the Housing Crisis: Politics, Precarity and Domicide in Austerity London* (Bristol: Bristol University Press, 2023), 61.

for short-term gain," toward shaping the direction of long-term growth.¹⁹

Others see positive change as less of a return to the past and more of a restructuring of priorities. Educator A witnessed unprecedented vulnerability in families experiencing homelessness, explaining how students are being "moved out of their boroughs and away from the support network that's in place." This experience left the educator thinking that it was time for the government to "reevaluate what's important."

So what is important? Many participants said that keeping families close to their support networks is a necessary first step. Parents should not be moved away from the existing relational resources they have because these connections are critical for mental health, social mobility, and parenting support. This sentiment can be understood through Educator A's story about a family significantly affected by the unpredictable nature of TA. To enter a new TA, they were moved out of their home borough and were thus no longer considered residents in an area that was well resourced. Because of the move, the family was out of range for previously accessed services including speech and language support and health visitors who had been checking in on the family regularly. The children were uprooted from their original schools, and the commute to the new school was much longer so each day they arrived exhausted. "The bureaucracy of it all is really dangerous," the educator said.

Better signpost council support facilities; create new channels for families to communicate with government

Getting resources to those who need them most is a significant challenge. To increase access

to and use of community services, participants unanimously agreed that services ought to be local, free or low-cost, and with flexible attendance and commitment. Participants suggest additional parks, playgrounds, stay-and-play sessions, and free passes to leisure centres.

Community organizations, often charities, bridge government services and the local families who most need support. However, the onus of maintaining this relationship often falls to organizations. One clinical psychologist paired this struggle with her recommendation to use a buddy system to reduce isolation: "It wasn't that [homeless families] didn't want the help — they just didn't know where to go to get it. Signposting is really important and then any kind of befriending or buddy system or something so that you don't feel quite so isolated. I think that would be really powerful. It's about planting the seeds, really."

A housing officer showed the flip side to this sentiment, "That [signposting to community play resources] is not something that we [as a council] have currently. We do signpost to family support agencies, but nothing specific to space and play." While the issue of community support links is being talked about, the problem is diagnosed without action. "We had a 'team away day' a couple of weeks ago and one of the topics was how temporary accommodation and being placed in hotels is impacting families and children. That was mentioned quite significantly. We're pretty sure there are services within the council where we can link residents to, but we're not aware of those services."

Council and community trust building cannot wait for better civic infrastructure, or the next user consultant review, or a national policy statute. Third-sector Housing Professional C said it best: "These children are growing up now. Two years is such a short time in policy, but in terms of a

¹⁹ Nowicki, "Temporary Is the New Permanent," 62.

child's development, that's it. A lot of their brain chemistry is set by the time of two, and it's very difficult to undo trauma and adverse childhood experience. Are we doing what we can to help these children now?"

Lessons Learned

Temporary Accommodation (TA) does not adequately consider the play needs of children, resulting in insufficient space, distress from instability, and mental fatigue that does not provide a conducive environment for play. The impact of this deficiency may have lasting consequences into adolescence and later life. Despite play being perceived by some as trivial, its profound impact on children's development can fundamentally alter their life course.

At the heart of public sector change lies a core tension: whether to focus on dismantling dysfunctional systems such as council temporary housing and the broader housing policy landscape (a process that may take decades), or to direct resources toward improving the immediate situation for those facing the everyday consequences of systemic failure. While stakeholders may aspire to system-level change, when given the task of envisioning tangible steps toward change, they describe localized interventions like parental knowledge-building around play and easier access to playgrounds.

A broader policy shift is necessary to attend to vulnerable children and ensure they are not overlooked. Play has a recognized potential for empowering these children, though it first requires parental empowerment to be initiated and supported. Local governments have a crucial role in providing support and signposting play support services for families in crisis. Strengthening links between councils and community services can offer much-needed support.

While families and other charity and community services endeavour to meet children's needs, the housing sector itself is in such a state of crisis that play cannot be prioritized above basic necessities like shelter, food, warmth, and safe conditions. Even interviewees who valued play highly and worked to ensure children could access it advocated for these other needs to be dealt with as the priority. Addressing the housing crisis to meet these essential needs could alleviate some of the impacts on play and child development. However, there is limited evidence of direct collaboration between policymakers designing services and allocating budgets and families living in TA, despite the potential benefits and improved outcomes such collaboration could bring.

Recommendations

While systemic, national policy change is needed, localized actions can be implemented with less strain on resources to make play in TA feasible in the shorter term. The following thematic recommendations are purposefully oriented toward policymakers.

Implement low-cost, positive interventions to support the immediate play needs of those currently in TA. Retrofit existing TA with opportunities for play, particularly outside spaces.

- Preserve and prioritize children's access to communal play space.
- Support management referrals to community service providers with play support specialities.
- Maintain and expand stay-and-play provision in local neighbourhoods. Stay-and-play groups are an invaluable resource for parents, not just offering that outlet to their children, but also nurturing community bonds between parents in difficult circumstances.
- Create secure, accessible storage space for strollers. This space should be external to the TA units and dispersed evenly throughout TA buildings.

- Introduce transect walks as a co-design tool for policymakers to identify spaces where play areas can be adequately developed, where those in TA are invited to actively show policymakers proposed changes to their surroundings, and giving those affected agency in the process of institutional change.
- Provide those in TA free access to local services that support play needs, such as leisure centres and private park areas.

Encourage play in TA as an interdisciplinary focus area for collaboration across public, private, and third-sector authorities. Recognize children's play needs as spanning the housing sector and the health, economic, and social spheres. Align housing policy and urban planning with children's health insights.

- Resource play and leisure as a pillar for healthy social and psychological development, alongside other basic needs around children's health and well-being.
- Ensure minimum standards are in place for play in new builds and conversions.

- Provide outdoor play opportunities near TA accommodations.
- Break down policy silos within local authorities: housing, health, leisure, youth.
- Departments across local authorities need to innovatively work together in approaching problems related to TA and play, fostering a set of collaborative capabilities that can be transferred to action on other policy issues.

Place human bonds and relationship building at the forefront of tackling the housing crisis and better supporting children's play needs.

Prioritize relational, caring service provision.

- Bring back face-to-face check-ins with housing unit management when families (and individuals) move into a TA.
- Do not let the council's first interaction with those in crisis be because of a conflict.
- Develop an induction pack for people in TA with local information, that is, the resources available to them (e.g., the closest parks, any possible public services like play and stay, etc.).



Figure 8. Core recommendations from study (by Anna Pearl Johnson)

- Separate the needs of families living in TA from the needs of individuals.
- In the case of TA units (such as hostels) that house both families and individuals, a visitor policy more lenient toward family units would reduce children's isolation and offer opportunities to engage in shared play.
- Be intentional and considerate with visitor policies: prioritize the needs of people over buildings.

Limitations

Families living in temporary accommodation represent a vulnerable population, each with unique experiences, traumas, and willingness to share. With our constrained timeline, we had limited time to build meaningful relationships and connections with those we interviewed. Our conversations, particularly with the mothers in TA,

were facilitated with the support of pre-existing community relationships. We would have liked more time getting to know the mothers before asking about private aspects of their life. With a stronger foundation of trust, the mothers might have felt more comfortable to share their stories.

We also sought to interview a range of professionals with various expertise to gain a comprehensive understanding of the issues. While we managed to broadly cover areas of health, community, policy, housing, and education, there are relevant professionals we did not have the opportunity to speak with. The lack of ethnic and racial diversity within the stakeholder pool serves as a further limitation. (The majority of our 16 professional participants were White British, between the ages of 25 and 54, and do not currently live in TA.) Further research in this area would greatly benefit from increased diversity of backgrounds.

Research Team



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Safaa Yaseen is a master of science candidate in Global Health and Development at the University College London. With a background in health sciences and public health, Safaa is passionate about reducing health inequities by addressing the social determinants of health through innovative health policy. She is currently a medical student at the University of Birmingham.



Monica Lakhanpaul is an academic researcher and practising pediatric consultant. She is currently a professor of integrated community child health at UCL Great Ormond Street Institute of Child Health and a global strategic academic advisor for India (following her role as Pro Vice Provost South Asian). She is committed to improving the lives of those in the most vulnerable communities through holistic, cross-sectoral, interdisciplinary interventions that encompass health, environmental, and educational factors. Her research tackles some of the most pressing issues facing families experiencing marginalization in the UK and globally such as early years, nutrition, asthma, child development, and mental health while addressing important societal issues such as homelessness and poverty. She uses participatory research, citizen science, and arts-based approaches ensuring that communities are involved in co-developing holistic integrated solutions.



Celine Lewis is a senior behavioural scientist working in the field of genetic and genomic medicine. She is currently a principal research fellow in genomics with the UCL Institute of Child Health and Great Ormond Street Hospital NHS Trust. Her work focuses on how patients and families relate to, communicate, and make decisions around personal genetic information, and the subsequent behavioural, psychological, and social outcomes. She has expertise in both qualitative and quantitative research methods including qualitative interviews and focus groups, observational work, and the development and validation of quantitative surveys and measures. She contributes to advisory boards such as the National Genomes Programme Evaluation Working Group, and the Institute of Child Health (ICH) and frequently supervises students.



Founded at the University of Toronto in 2015, with support from the Mastercard Center for Inclusive Growth, the Reach Alliance has since scaled to seven other leading universities around the world. As a student-led, faculty-mentored, research and leadership initiative, Reach's unique approach uncovers how and why certain programs are successful (or not) in getting to some of the world's hardly reached populations. Research teams, comprised of top students and faculty from across disciplines, spend nine to twelve months investigating each case study. Once the data collection process is complete, teams write case reports that are published and disseminated across the Reach Alliance's diverse network of policymakers, practitioners, academics, and business leaders.

Inspired by the United Nations' call to eliminate global poverty by 2030 as part of a set of Sustainable Development Goals (SDGs), our mission is to pursue the full achievement of the SDGs by equipping and empowering the next generation of global leaders to create knowledge and inspire action on reaching the hardest to reach.



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