

# Lived Realities

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by **Housing Inclusion Hackney**  
with testimonies from Hackney's  
SEND families

When SEND families navigate  
a broken housing system



This collection of case studies lays bare the disconnect between Hackney's housing system and the lived experiences of families raising children with SEND. It is a call to local decision-makers to address the urgent need for safe, appropriate, and accessible housing solutions grounded in equity, care, and legal responsibility.

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# INTRODUCTION

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This report documents the lived experiences of Hackney families raising children with disabilities in **unsafe, unsuitable, and overcrowded housing**. Through a series of case studies, it provides evidence of **systemic failures in housing allocation and safeguarding responses**.

Each case highlights the severe impact of unsuitable housing on children's development, parents' health, and families' ability to live safely and with dignity.

The testimonies reflect **recurring themes**: professional evidence being disregarded, families being deprioritised or mismanaged, safeguarding risks minimised, and households left in limbo for years.

These accounts are not isolated, but part of a wider pattern of **institutional inaction and discrimination**. Together, they demonstrate how current housing policy and practice in Hackney are failing to uphold statutory duties under the **Children Act 1989**, the **Equality Act 2010**, and the **Housing Act 2004**.

This report is presented as evidence to call for urgent systemic reform. Families have waited too long for suitable housing and fair treatment. Their experiences show why **accountability and meaningful change are urgently needed**.

# 1

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## Overcrowding & SEND needs

Overcrowding turns daily life into a constant struggle; disrupting sleep, routines, and safety. These cases show how lack of space intensifies SEND needs, heightens risks, and erodes family wellbeing.

# CASE ONE:

6

HIH / 2025

*“My experience with Hackney is so bad. I’ve done everything they asked. I’ve waited, I’ve asked, I’ve submitted letters. But I’ve not been heard.”*

Resident



## Household context

A single mother has been raising her two children, aged 12 and 10, in a one-bedroom Hackney Council flat since 2006.

The family has been assessed as needing a three-bedroom property and placed in Band B on the housing register. Despite this, the children have remained in the same overcrowded flat for all their lives.

## Medical and care needs

- The son (12) has diagnoses of ADHD, epilepsy, and autism. He has an active Education, Health and Care Plan (EHCP) and requires high levels of structure, routine, and care.
- His high activity levels, neurological needs, and disrupted sleep patterns have a major impact on the household environment.
- The daughter (10) requires peace and rest to meet her own developmental needs, but the family's overcrowded environment means her needs are constantly compromised.
- The mother is a full-time carer, having left her job following her son's diagnoses in order to provide the level of care he requires.

## Housing and safety risks

- The one-bedroom flat forces the children to share sleeping arrangements, creating constant disruption and sleep deprivation.
- Overcrowding undermines the son's need for structure and space to regulate his energy, while also depriving the daughter of a quiet environment to rest and study.
- The lack of space intensifies stress for the whole family and places the children's wellbeing and development at risk.

## Impact on the family

- The mother reports being in a constant state of compromise: if she takes her son out to regulate his energy, her daughter loses time for quiet rest; if she tries to prioritise her daughter, her son's behaviours escalate.
- She experiences deep guilt and emotional strain for not meeting her children's needs.
- The family's quality of life has been steadily eroded. The mother has lost her independence through work, her daughter's wellbeing is affected by constant disruption, and her son's needs remain unmet in an unsuitable property.

## Council response

- Despite being in Band B with a three-bedroom need identified, the family has seen no progress since 2012.
- The mother believes Hackney Council's housing policy changes introduced in 2021 unfairly disadvantaged long-standing applicants like her by applying new rules retroactively.
- Multiple letters of support from schools and medical professionals have been ignored, undermining trust in the council's safeguarding responsibilities.
- The mother feels she has been treated differently since becoming a full-time carer reliant on social housing, despite a history of secure tenancy and consistent rent payments.

**62%**

of parent carers have given up paid work or reduced hours, on average losing **£21,174** from their family income.

*Source: Contact Charity '24*

## Conclusion and ask

This case reflects the devastating impact of long-term overcrowding and institutional inaction on families navigating complex SEND needs.

### Hackney Council must:

- Urgently progress this family's rehousing to a suitable three-bedroom property, in line with the medical and developmental needs of both children.
- Review the retrospective application of housing policy changes that disadvantage long-standing tenants.
- Uphold its duties under the Equality Act 2010 and the Children Act 1989 to ensure that children's welfare and safety are prioritised.



# CASE TWO:

8

HIH / 2025

*“Our son has violent meltdowns and our daughter wakes at 3am; she’s written notes and saying she can’t stand living here.”*

Resident



## Household context

A Hackney family of four — parents, a 12 year-old daughter, and a 10 year-old son — live in a one-bedroom council flat on the 4th floor. The flat has an open balcony and is severely overcrowded. The parents and son must sleep in the living room, while the daughter uses the bedroom due to her health needs.

## Medical and care needs

- Son (10): Diagnosed with Autism, Sensory Processing Disorder, learning disability, and global developmental delay (Sept 2021). He has sensory-seeking behaviours, hypermobility, severe meltdowns, destructive behaviours, head-banging, and chronic sleep problems. He has an EHCP.
- Daughter (12): Awaiting ASD assessment, suffers from severe anxiety, asthma, and self-harm behaviours. She has expressed suicidal thoughts and remains at considerable risk.
- Parent: Suffers from mental health problems and is at risk of suicide.
- Medical professionals (Hackney Ark) have advised the family needs a three-bedroom property no higher than the first floor for safety reasons.

## Safety risks

- The flat’s open balcony poses a severe risk of falls. An occupational therapist has directly witnessed the son attempting to climb over it.
- Open-plan design and overcrowding increase risks, particularly during the son’s meltdowns.
- The combination of sleep deprivation, destructive behaviours, and self-harm creates ongoing risk of harm to all family members.

## Council response

- Before the son's dual diagnosis in 2021, the council refused support, stating no diagnosis had been provided.
- After the diagnosis, the family repeatedly attempted to submit medical evidence but were blocked from contacting the medical assessment team. Staff refused to accept reports, failed to provide contact details, and dismissed stamped records dating back to 2019/20.
- The family were previously in Band B "Significant medical need", but their access to bidding was suddenly stopped two years ago without explanation. Despite repeated attempts to resolve this, Hackney Council has not restored access.
- Reports and letters from schools, social workers, and occupational therapists since 2019 have consistently recommended rehousing to a ground or first floor three-bedroom property. Hackney Council has disregarded this evidence.

## Impact on the family

The housing situation is worsening both children's conditions: increasing anxiety, conflict, and risks of harm. The parents are under severe mental and emotional strain. The council's dismissive and obstructive behaviour has compounded the family's vulnerability.

**57%**

of 6-16 year-olds with SEND had a probable mental health problem compared to 13% without SEND.

*Source: Centre for Mental Health, 2020*

## Conclusion & ask

This family urgently requires a safe, appropriately sized property that meets medical recommendations.

### Hackney Council must:

- Reinstate the family's Band B status with immediate bidding access.
- Recognise the medical evidence already submitted and act on it.
- Uphold statutory duties under the Children Act 1989, the Equality Act 2010, and safeguarding frameworks to protect both children from significant harm.



# CASE THREE:

10

*“Raising a child with complex needs is hard, but the real struggle is being at the mercy of the system.”*

Resident



## Household context

A Hackney family of four — two parents and two children aged 6 and 4 — live in a one-bedroom privately rented flat. Both children and a parent share one small bedroom, while one parent sleeps on the sofa in the living room. The property is severely overcrowded, unsafe, and unsuitable. The family requires a three-bedroom home.

They are on Hackney Council's housing register, but their priority was downgraded from Band B to Band C following a medical team home visit

## Medical and care needs

- The eldest child has a diagnosis of a rare genetic condition and Autism Spectrum Disorder (ASD). He has learning disabilities, seizures, and suspected ADHD. They are non verbal, have an EHCP, and require constant supervision due to lack of danger awareness and cognitive delay.
- He experiences regular meltdowns, extreme hyperactivity, and sensory-seeking behaviours such as biting, climbing, jumping and pica (eating inedible items).



## History of disrepair & unsafe housing

During a crucial period for neurodevelopmental assessments, the family lived in severe disrepair: cracked floor tiles, damp, and black mould next to their bed, and leaks through electrical fittings creating direct safety hazards. The youngest child was hospitalised three times for respiratory illness, requiring oxygen.

Despite repeated pleas, Hackney Council has not provided the family with a link to the housing register for over a year. While partial repairs were eventually made, serious risks remain: windows cracked with rotten frames, and climbing hazards dismissed by the council as “mitigated” by restrictors; a doorless kitchen that exposes children to knives and appliances; a prolonged mice infestation with poison accessible to a child who eats non-food items due to pica; and persistent damp and mould in the bathroom.

## Impact on the family

- The eldest child’s needs escalate without a safe regulation space, putting the younger sibling at daily risk of harm.
- Chronic sleep deprivation results from inappropriate sleeping arrangements.
- Parents’ mental health has deteriorated, with exhaustion, burnout, anxiety, and strain on their relationship.
- Income has been lost as one parent gave up self-employment to cope with care demands.

**50 %**

SEND families are 50% more likely to live in **overcrowded or poorly maintained homes.**

*Source: DWP 2018*

## Council response

- Hackney Council downgraded the family’s housing band despite clear evidence of high medical and safeguarding needs.
- An OT recommended a separate safe space for the eldest child but was instructed by the housing register not to comment on overcrowding.
- Medical assessments were dismissive: the family reports interrogation style assessment, disbelief, and minimisation of needs, with risks termed as “non-medical.”
- Appeals to reinstate priority have all been rejected with policy jargon and no meaningful engagement.
- The council has failed to address safeguarding risks or acknowledge the link between overcrowding, disrepair, and the child’s needs.
- The family is escalating their case to the Local Government and Social Care Ombudsman.

## Conclusion and ask

This family urgently requires rehousing in a safe, suitably sized property.

### Hackney Council must:

- Reinstate higher medical priority, recognising both safeguarding and medical grounds.
- Accept that overcrowding, disrepair, and safety risks are inseparable from the eldest child’s SEND needs.
- Fulfil duties under the Children Act 1989, Equality Act 2010, and Housing Act 2004.
- Provide housing that allows the eldest child a separate, safe space to regulate and reduces risks to the younger sibling.

# CASE FOUR:

*“My son is terrified of the lift, so I have to carry the buggy and shopping up five flights of stairs with my arthritis and chronic pain.”*

Resident



## Household context

A Hackney family of five — two parents and three children aged 12, 5, and 3 — currently live in a two-bedroom flat on the 5th floor of a housing association block. The property is unsuitable, unsafe, and overcrowded. The family have sought support from Hackney Council since 2021 without success, despite escalating their case to their local councillor and MP.

## 80%

of parent carers say that trying to access local services causes **anxiety** and **stress**.

*Source: DWP 2020*

## Medical and care needs

- The eldest child (12) has a diagnosis of ADHD and is undergoing assessment for Autism Spectrum Disorder (ASD). He experiences severe anxiety and has a phobia of lifts, making it extremely difficult for the family to leave the property safely.
- The middle child (5) has recently been diagnosed with coeliac disease and is undergoing assessments for ADHD.
- The parent has been diagnosed with arthritis, made worse by the physical strain of managing the children and unsafe living conditions.
- The eldest child’s application for an Education, Health and Care Plan (EHCP) was rejected; the family is appealing.

Despite clear evidence of need, Hackney Council rejected the family’s application for medical priority in housing, taking seven months to process and without conducting a home visit.

## Bias in medical assessment

The council's medical team minimised the child's difficulties by emphasising positive traits (e.g. good behaviour, progress at school) as if these cancelled out his SEND related risks. Parental testimony was given little weight and serious safety concerns (absconding, use of the oven, balcony risk) were reframed as "non-medical" issues. The report also speculated that ADHD symptoms may reduce in adulthood — irrelevant to the child's current needs.

## Housing and safety risks

- The property is on the 5th floor with an open balcony and wide-opening windows. The eldest child has challenging behaviours, poor danger awareness, and a history of absconding. A fall would be fatal.
- The eldest child refuses to use the lift, forcing the parent to manage three children, a buggy, and heavy shopping up and down five flights of stairs.
- The flat has an open-plan kitchen/living area, where the boiler and oven are located. The 12-year-old is obsessed with turning the oven on/off, creating significant fire risk.
- Hackney Council has suggested converting the open-plan kitchen into a bedroom. This is unsafe: the Gas Safety (Installation and Use) Regulations 1998 prohibit boilers in sleeping areas, and under the Housing Health and Safety Rating System (Housing Act 2004) this creates Category 1 hazards, including fire risk.

## Impact on the family

The situation is causing severe strain on the parents' mental health and undermining the children's development and wellbeing. The combination of SEND needs and unsuitable housing has left the family at breaking point.

## Council response

Despite filing an appeal, Hackney Council upheld its decision to deny the family access to the housing register and to consider judicial review. Their approach reflects systemic failings: a lack of SEND awareness, dismissive assessments, and failure to uphold statutory safeguarding duties.

## Conclusion and ask

This family requires rehousing in a safe, suitably sized property.

### Hackney Council must:

- Reconsider the case under medical and safeguarding grounds.
- Recognise that overcrowding and safety risks are inseparable from the children's SEND and health needs.
- Work with the housing association to secure safe accommodation that meets statutory duties under the Children Act 1989 and the Equality Act 2010.





# 2

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## Unsafe Housing & Disrepair

Unsafe homes put children at direct risk. Damp, mould, infestations, and poor layouts are not minor issues; they threaten health, development, and dignity. These cases reveal how families are forced to live in unsuitable conditions while their calls for repairs and adaptations go unanswered.

# CASE

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## FIVE:

*“I moved to Hackney from another borough. The community is great & inclusive but the council services are the worst. It’s as if they are set up to torture you.”*

Resident



### Household context

A single parent lives with her two autistic sons, aged 26 and 5, in the lower-ground floor of a three-bedroom property managed by a registered social landlord. The family relocated to Hackney after fleeing domestic violence. The parent has diagnoses of complex PTSD and is the sole carer for both sons.

### Medical and care needs

- The eldest son (26) is autistic with learning disabilities and needs daily self-care support. Until recently, he attended a day provision that provided structure and stability, but this has ended — leaving him isolated and without post-25 support.
- The youngest child (5) is non-verbal, autistic, and has profound needs. He spent a year without specialist provision, placed in a mainstream school on a reduced two-hour timetable. He is not toilet-trained, has no danger awareness, and displays behaviours such as absconding, hitting, and biting.
- The parent has complex PTSD and low-support-needs autism and is being assessed for ADHD. She describes accessing support as “excruciating” and often lacking trauma-informed understanding from officers.



## Housing and safety risks

The property has three bedrooms, but the internal layout creates barriers to care and independence:

- The toilet is located separately from the bathroom, with insufficient space for the parent to safely assist either child with self-care.
- This layout prevents effective toilet training for the youngest child and restricts the eldest son's ability to receive self-care support, develop privacy, and build independence.
- A small extension to the eldest son's bedroom would create a self-contained space, mirroring aspects of independent living while maintaining carer access — a vital step before any transition to supported accommodation, and enabling him to remain at home for longer.

## Council response

- The resident applied for a Disabled Facilities Grant (DFG) to adapt the property and extend the eldest son's room to support his care and independence needs.
- The council closed the application, citing "defective pipework," despite neighbours in the same block successfully receiving similar adaptations. The resident believes hidden disabilities are treated with less legitimacy than visible physical impairments.
- An independent inspection confirmed there was no defect, yet the council closed the case instead of referring it to an alternative body or follow-up support.
- This has left both children's needs unmet, without the adaptations required for safe routines and long-term stability.

## Impact on the family

- The eldest son's wellbeing has declined due to isolation and lack of independence. The youngest child's progress and self-care development have been delayed.
- The parent's mental health continues to deteriorate due to exhaustion, lack of respite, and bureaucratic obstacles.
- The family feel abandoned by a system that should enable reasonable adjustments but instead creates additional barriers through rigid and fragmented processes.

**12%**

of disabled families have applied for a Disabled Facilities Grant. **43%** of them found the process **poor or very poor**.

*Source: Contact Charity '24*

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## Conclusion and ask

This case illustrates the systemic barriers families face when trying to access Disabled Facilities Grants and the absence of coordinated support between education, social care, and adaptation services.

### Hackney Council must:

- Reassess the DFG application and coordinate with relevant partners to complete essential adaptations.
- Strengthen oversight and accountability in DFG decision-making to ensure fair and consistent access.
- Provide timely social care, mental health support, and respite, as required under the Care Act 2014 and Children Act 1989.
- Recognise that accessible housing and adaptations are essential for long-term stability and independence; not optional extras.

# CASE

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## SIX:

*“Our home is over-crowded, inaccessible, and hostile. We just want a safe & suitable place for our children to grow up.”*

Resident



### Household context

A Hackney family of five lives in a two-bedroom housing association property. The household includes two parents and three children aged 10, 8, and 4. The home is overcrowded, and the family requires a three-bedroom property. They are currently on Hackney Council's housing register with Band A priority.

### Medical and care needs

- The youngest child (4) has a diagnosis of Autism Spectrum Disorder (ASD), is non-verbal, unable to communicate needs, and suffers from frequent meltdowns due to sensory overload. They have an active Education, Health and Care Plan (EHCP).
- The child requires a quiet and calming space to regulate, which is impossible in the current overcrowded flat.
- Both parents suffer from mobility issues. The resident has leg and back pain, while the spouse has chronic back pain. Carrying heavy items upstairs is exhausting and dangerous.
- The 4-year-old cannot tolerate shoes or socks due to sensory needs and must often be carried up and down the stairs, exacerbating the resident's health problems and creating risk of falls.



## Housing and safety risks

- Overcrowding: The lack of adequate space disrupts sleeping, studying, relaxing, and daily care, leaving the family in constant stress.
- Accessibility: The property has no lift, creating a major barrier given the mobility difficulties of the parents and the sensory-related challenges of the 4-year-old child.
- Neighbour harassment: Since 2018 the family has endured severe antisocial behaviour, including threats to kill, from a neighbour. The neighbour has been arrested 12 times but continues to harass the family. Despite countless reports to the Housing Association, police, MPs, Safer Neighbourhood Teams, and mediation services, no meaningful safeguarding action has been taken.
- Safety risks for the child: The persistent harassment has increased the 4-year-old's distress, meltdowns, and withdrawal, further compounding their SEND needs.

## Impact on the family

- The 4-year-old's meltdowns, frustration, and fatigue have worsened due to overcrowding, lack of safe space, and hostile living conditions.
- All three children are living in fear, and the family feels unsafe in their own home.
- The resident and spouse are both starting therapy with Talk Changes due to severe mental health impacts.
- Constant stress, poor housing conditions, and lack of safety have left the family emotionally exhausted and physically drained.
- The parents feel unvalued, disrespected, and dismissed by the council and landlord despite years of evidence and repeated requests for help.

## Council and landlord response

- The family has repeatedly reported antisocial behaviour and provided evidence (recordings, witness statements), but services have failed to act in a timely or safeguarding-focused manner.
- Despite being on Band A, the family's housing needs remain unmet.
- The Housing Association and Hackney Council have been dismissive, with delays, lack of communication, and responses that have left the family feeling ignored and neglected.
- The family reports that their struggles with overcrowding, harassment, and accessibility have been deprioritised despite statutory safeguarding duties.

## Conclusion and ask

This family urgently requires rehousing in a safe, suitably sized, and accessible three-bedroom property. Hackney Council and the Housing Association must:

- Address the severe overcrowding that directly undermines the wellbeing of all three children, especially the youngest with SEND.
- Take immediate safeguarding action regarding neighbour harassment and threats to life.
- Recognise the accessibility barriers caused by lack of a lift, which negatively impacts both parents' health and the care of their youngest child.
- Uphold their duties under the Children Act 1989, Equality Act 2010, and Housing Act 2004 to protect this family's wellbeing and safety.

# CASE SEVEN:

*“They make us feel like leeches draining housing stock, while prioritising a knife-wielding neighbour over our young SEND children.”*

Resident



## Background

- Family of four (children aged 8 and 3) fled a one-bedroom secure tenancy after death threats from a neighbour involving weapons.
- The violent threats were directed at the eldest child, who has ASD/ADHD. The neighbour targeted him because of the noise he made while self-regulating.
- This is disability-related harassment, which should have triggered safeguarding and priority rehousing duties.
- Prior to this, the family approached Hackney Council for overcrowding but were told they did not qualify. A mutual exchange also failed.

## 4X

People with learning disabilities and/or autism are four times more likely to experience **hate crime** than those with other disabilities.

*Source: Dimensions, 2024*

## Council Response

- Instead of facilitating a managed move, the council instructed the family to declare homelessness.
- They were placed in a homeless hostel: two small rooms, shared washing facilities, no living space, no access to visitors, and no room for OT aids.
- Despite this, the family were still required to pay rent on both the secure tenancy and the temporary accommodation.

## Children's Needs

- Eldest child (8): Diagnosed with ASD, ADHD, DCD, and dyslexia. Extremely hyperactive, poor danger awareness, aggressive towards sibling, and showing signs of PTSD from threats. Needs his own room for safety and regulation.
- Youngest child (3): Non-verbal, not toilet trained, developmental delays, under paediatric assessment. Requires specialist support not possible in hostel setting.
- Multiple medical reports and professional letters recommended suitable rehousing. All were ignored or dismissed.

## Procedural Failures

- Homelessness application took 100 days, far beyond the statutory 56-day duty.
- Council tone described as “cold and robotic”, with delays, misinformation, and perceived victim-blaming.
- Stage 1 and 2 complaints upheld maladministration but offered only £225 compensation. Stage 2 response was late by over a month.
- Suitability review upheld hostel placement until legal intervention forced a move to a private rental. Family still pays double rent one year on.

## Impact

- Children's development, safety, and mental health severely compromised.
- Parents and children traumatised, isolated, and financially strained.
- Council's decisions deprived the family of secure housing rights and prolonged institutional neglect.

## Conclusion / Ask

### Hackney Council must:

- Recognise disability-related harassment as a safeguarding trigger, requiring immediate and safe rehousing.
- End the practice of forcing families into homelessness declarations where safeguarding requires a managed move.
- Stop charging double rent to families in temporary accommodation.
- Prioritise SEND children's needs in housing decisions, ensuring professional evidence are given full weight.
- Incorporate soundproofing as a standard option under Disabled Facilities Grants (DFG) for neurodivergent individuals.
- Commit to transparent accountability for delays and maladministration.





# 3.

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## Harassment, Violence & Systemic Failures

For some families, unsuitable housing is compounded by hostility beyond the walls of their home. Instead of protection, they face inaction and dismissal. These cases show how, when safeguarding fails, the system leaves them unprotected.

# CASE EIGHT:

24

*“I feel neglected & dehumanised. Hackney’s errors have erased six years of my children’s housing security.”*

Resident



## Household context

- A single mother lives with her two children, aged 14 (daughter) and 13 (son), in a privately rented ex-local authority two-bedroom flat on the fifth floor.
- Both children are autistic and require additional support.
- The son also has global developmental delay, an EHCP, poor sleep regulation, impulsivity, and no danger awareness — creating daily risks in a high-rise setting.
- The daughter, also autistic, attends mainstream school with support and experiences ongoing anxiety and mental health challenges.
- Both children are under CAMHS.

## Housing history

- The family joined Hackney’s housing register in 2016 and were awarded Band B for a three-bedroom property.
- Following the Council’s IT system cyber-attack, their application was suspended.
- When reinstated, their priority start date was changed to 2022 — erasing six years of bidding history.
- Despite repeated requests, supported by their councillor, Hackney has refused to restore the 2016 date, citing only a “new registration system.”

## Professional evidence

- Multiple professionals (CAMHS, occupational therapists) have confirmed the urgent need for safer, more suitable housing.
- Their recommendations have been repeatedly dismissed or ignored by Hackney Council.

## Additional concerns

- The mother recently bid on a first-floor property in her block, which was instead allocated to a family with children under five and no medical needs.
- She questions how this allocation was prioritised above hers, and argues that ground- and first-floor homes should be reserved for families with significant medical or safeguarding needs.

## Key issues

- Loss of six years of housing priority due to IT/cyberattack errors.
- Refusal to reinstate the original registration date despite evidence.
- High safeguarding risks in unsuitable high-rise accommodation.
- Repeated dismissal of professional medical and educational advice.
- Lack of transparency in allocation decisions, undermining fairness.

## Conclusion and ask

- This case highlights the severe harm caused when administrative failures intersect with SEND and safeguarding needs. Erasing six years of housing priority has left this family at ongoing risk, with no adequate remedy or accountability.

### Hackney Council must:

- Reinstate the original 2016 priority date.
- Recognise safeguarding risks inherent in high-rise accommodation for children with SEND.
- Ensure allocation decisions are transparent and prioritise families with urgent medical and safeguarding needs.



# CASE NINE:

26

HIH / 2025

*“We fled domestic violence, but after six moves and endless reports, my children are still without the safe home they urgently need.”*

Resident



## Household context

### Key Issues

- Mother is a survivor of domestic abuse with multiple chronic health conditions.
- Two children with high-level SEND and safeguarding vulnerabilities, one with an EHCP.
- Children's professionals (CAMHS + family support worker) have formally recommended separate bedrooms due to conflict and safeguarding risks.
- The family has not been awarded the additional bedroom and is only able to bid on two and one bedroom properties.
- Current housing not technically “overcrowded” under statutory rules but is unsafe and unsuitable in practice.
- Repeated relocations (6+ since 2021) have compounded instability and trauma.
- Mother struggles to navigate the system due to communication barriers and health challenges

## Conclusion

- Reliance on minimum space standards ignores the lived reality of trauma, disability, and safeguarding.
- Professional recommendations are being disregarded, leaving the family at risk of harm.
- Language barriers mean the mother's needs are not adequately understood or supported.
- Temporary accommodation has become long-term, unstable housing, without a plan to resolve safeguarding concerns.

## Possible Legal/Policy Duties

- Children Act 2004, s.11: Council must have regard to children's safeguarding and welfare — here, professionals have highlighted risks that are being ignored.
- Equality Act 2010, Public Sector Equality Duty: Multiple disabilities (ASD, ADHD, PTSD, Crohn's, arthritis) require proactive consideration, not blanket reliance on "suitable size" rules.
- Homelessness Code of Guidance: Temporary accommodation should be suitable for the household's needs — suitability includes health, disability, and safeguarding.

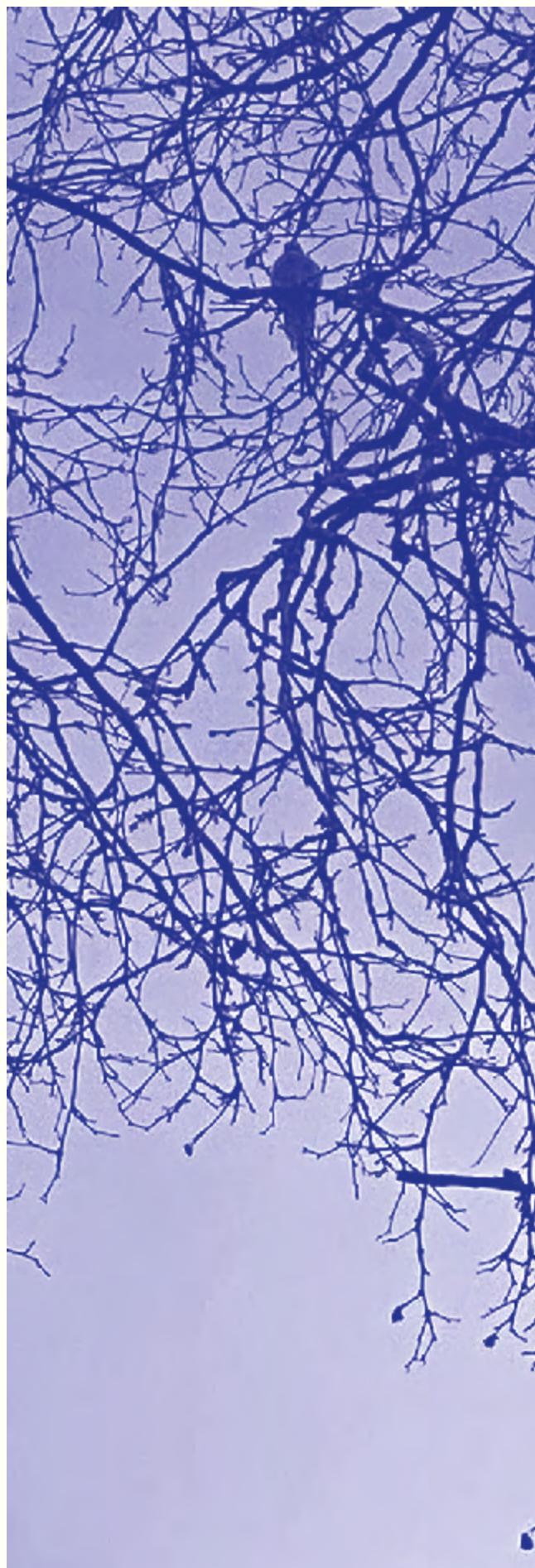
## Advocacy Ask

- Urgent reallocation to a 3-bedroom home where children can be separated, in line with CAMHS and family support recommendations.
- Provision of an OT assessment with translation/advocacy support to ensure the family's needs are properly evidenced.
- Recognition that "not technically overcrowded" ≠ safe or suitable, particularly for families with SEND and safeguarding risks.

**2X**

more likely for disabled women to experience **domestic abuse** as non-disabled women.

*Source: ONS 2024*



# CASE

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## TEN:

*“My children will never recover from the trauma. I am terminally ill, made worse by the council’s discriminatory housing policies that persecute vulnerable families like mine.”*

Resident



### Household context

A Hackney resident lives with her spouse (63), two adult children (21 and 19), and two younger children (15 and 12) in a three-bedroom housing association property. The household of six is severely overcrowded. The resident, who has an autoimmune disease and terminal organ failure, is the sole carer for all dependents, each with high care needs.

### Medical and care needs

- All dependents have multiple disabilities: Autism, ADHD, Oppositional Defiant Disorder (ODD), Global Development Delay (GDD), Sensory Processing Disorder (SPD), sleep disorders, mobility and coordination difficulties.
- Several also experience PTSD, chronic anxiety, and acute behavioural challenges.
- The resident provides full-time care while managing her own critical illness.



## Housing and safety risks

- Property condition: Severe damp, mould, and disrepair have caused respiratory illness in all family members. The property has no insulation and poor build quality. The landlord's own surveyor deemed it unfit for habitation, yet no action has been taken.
- Overcrowding: Six people with complex disabilities cannot be safely housed in a three-bedroom flat. The landlord advised the family to use the kitchen as a sleeping space — unsafe and in breach of standards.
- Safety risks: Faulty lifts restrict access; open-plan kitchen/living area creates fire hazards; disabled dependents of different genders must share bedrooms, disrupting care and sleep.
- Harassment and violence: The family has endured serious threats, assaults, and neighbour harassment since 2007, directly linked to their vulnerabilities. The landlord has confirmed tenancy breaches but taken no action.
- Safeguarding failures: The landlord has refused to install CCTV, preventing police from gathering evidence. No safeguarding measures have been implemented despite years of documented risks.

## Impact on the family

- The family lives in constant fear due to threats and harassment.
- PTSD, anxiety, and disabilities are worsened by unsafe housing and lack of support.
- The resident's terminal illness has been exacerbated by sleep deprivation, exhaustion, and ongoing stress.
- The resident cannot work, having lost income while providing full-time care in unsafe conditions.

## Systemic issues

The family joined the Hackney housing register in 2011 and actively bid until repeated mishandling:

- Housing account randomly closed, with false accusations of ignored correspondence (no evidence provided).
- Application lost in 2013, forcing reapplication.
- 2020 cyber-attack erased all case data, requiring another reapplication.
- Case later closed due to two expired documents, with no right of appeal or explanation of their relevance.
- In 2020 the council told the family no homes above three bedrooms were available, permanently removing them from the register.
- The family believes five-bedroom homes have since been allocated to households with significantly less need, raising concerns of discrimination and corruption.
- Despite support letters from CAMHS, children's services, adult services, and OTs, no action has been taken by Hackney Council or the landlord.

## Conclusion and ask

This family urgently requires a five-bed property to meet their medical, safeguarding, and disability needs. Hackney Council and the landlord must:

- Acknowledge and remedy years of maladministration, lost records, and systemic failures.
- Reinstate the family's housing register application with correct priority.
- Take immediate safeguarding action to protect the family from neighbour harassment and violence.
- Fulfil duties under the Equality Act 2010, Housing Act 2004, and Children Act 1989 to ensure safety, health, and dignity.





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## Long-Term Neglect & Loss of Trust

When families spend years in temporary or unsafe homes, the damage is lasting. Delays, errors, and systemic neglect erode trust and deepen trauma; not only harming housing outcomes, but family life itself.

# CASE ELEVEN:

*“I understand there is a housing crisis and that options are limited. I can meet the council halfway. But we still need to be treated with dignity and respect.”*

Resident

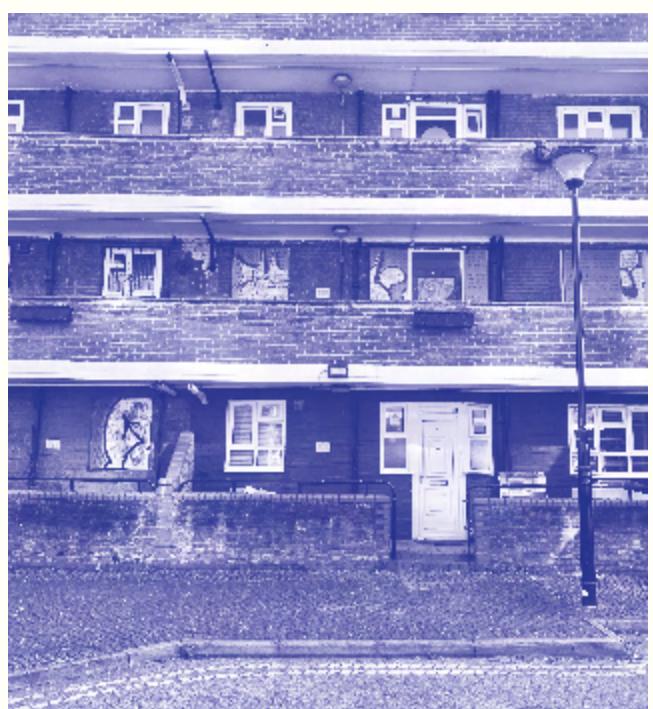


## Household context

A single mother raising three autistic children under ten, two of whom have significant needs and attend specialist education. The family spent a decade in temporary accommodation in Hackney before being offered a permanent tenancy. Despite professional advocacy, medical evidence, and safeguarding concerns, the housing process has been characterised by delay, unsafe conditions, and systemic failings.

## Medical and care needs

- All three children have diagnoses of Autism Spectrum Disorder with complex behavioural and sensory needs, including pica (ingesting non-food objects), which creates acute safety risks in unsafe and unsuitable housing.
- Two children attend specialist education placements with EHCPs; all require high levels of care and structured environments.
- The mother has faced severe mental health strain from prolonged instability and repeated housing disputes.



## Housing and safety risks

- The family was allocated a three-bedroom property, despite a confirmed medical need for four bedrooms. One room fails minimum space standards and cannot accommodate adaptations.
- The home was handed over unfinished and unsafe, exposing the family to asbestos during an OT visit.
- Multiple hazards were identified: broken fencing, exposed wiring, disturbed asbestos in flooring and ceiling, and unsafe electrics.
- The council acknowledged repairs were needed but failed to complete them in the timeframes given, forcing the family into emergency housing without furniture or beds.
- The occupational therapist described the property as the worst case she had seen in terms of condition and unsuitability.

## Systemic issues

- Hackney Council ignored medical evidence confirming the four-bedroom need, relying instead on its own medical adviser to dismiss NHS professionals' recommendations.
- The housing register date was altered without explanation, disrupting the family's priority.
- Safeguarding was overlooked: at one stage, the family was offered temporary accommodation near the children's abusive father.
- The formal complaint process was delayed; requests for review of suitability were mishandled.
- The mother reports being pressured into accepting the tenancy under threat of homelessness, despite its unsuitability.

## Impact on the family

- The eldest child's safety and wellbeing remain compromised.
- The mother reports feeling disbelieved about her domestic abuse history, retraumatised by the process, and at times suicidal due to the strain.
- Instability has compounded the children's additional needs, leaving the family without the secure base required for their care and development.

# 62k

disabled households faced homelessness in 2024.  
A 73% increase since 2019.

*Source: BBC 2025*

## Conclusion and ask

This family urgently requires:

- Allocation of a safe, suitable four-bedroom home that meets medical and safeguarding needs.
- A transparent review of maladministration — particularly where internal medical advisers overrule NHS professionals' recommendations.
- Proper accountability for exposing a disabled family to unsafe, asbestos-contaminated, and incomplete housing.
- Fulfilment of duties under the Housing Act 1996, Children Act 1989, and Equality Act 2010.

This case shows how rigid interpretations of "suitability," disbelief of vulnerable residents, and repeated administrative failings can cause lasting harm. Even after a decade of waiting, this family's right to safe, appropriate housing remains unmet.

# RECOM MEND- ATIONS

These recommendations outline a pathway to move from crisis response to crisis prevention\*

## 1

### Strengthen Coordination of Services — *the Corporate Offer*

- Establish clear pathways between Housing Needs, SEND services, Children's Social Care, Early Help, and Adaptations/DFG teams.
- Create a multi-disciplinary housing panel (similar to EHCP panels), coordinated by a housing officer, for families with SEND.
- Deliver joint training across teams on safeguarding duties, the Equality Act, and reasonable adjustments.

## 2

### Reform the Medical Assessment Process

- Phase out the current in-house medical team to reduce safeguarding risks.
- Replace with a multi-disciplinary panel (SEND, housing, health, social care) for all medical housing assessments.
- Give due weight to evidence from NHS clinicians and parental testimony.
- Introduce a clear, independent appeals pathway for medical assessments.

\* Crisis prevention is more cost effective. For every £1 spent on early housing support, it saves at least £2.40 from health and social care costs.  
(National Housing Federation, 2017)

# 4

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## Improve Data, Transparency, & Access to the Housing Register

- Restore and backdate all lost housing register records caused by the cyberattack.
- Launch a preliminary online eligibility tool so families know immediately if they meet criteria.
- Provide SEND-friendly face-to-face appointments at Family Hubs, not just council offices.
- Ensure timely processing of all new applications.
- Publish regular data on wait times, outcomes, and the number of SEND households on the register.
- Guarantee that all eligible households are placed on the register, reflecting true borough need.

HIH / 2025

# 3

## Introduce a Reasonable Adjustments Policy

- Adopt a formal, corporate-wide policy, as recommended by the Housing Ombudsman.
- Embed awareness of the Public Sector Equality Duty across housing and children's services.
- Publish clear guidance for families on how to request and escalate adjustments.

*Moving from fragmented services to co-ordinated care*

# 5

## Expand and Adapt Housing Solutions

*The status quo is no longer a viable option*

- Pilot a points-based allocations system to reflect holistic need (medical, safeguarding, overcrowding, time waiting).
- Explore creative, low-cost reconfigurations (knock-throughs, soundproofing, dead-space use) to relieve overcrowding, where possible.
- Provide officer support to facilitate mutual swaps, addressing under-occupancy vs overcrowding.
- Streamline process to accessing relevant adaptation funding.
- Open up UC/disability-linked grants (e.g. DFG) to adapt empty stock for families in need.
- Pilot a Hackney Community Housing Renewal Fund using a skill-share model: local residents, apprentices, and traders contribute to improving stock while lowering costs.

# 6

## Strengthen Accountability and Resident Experience

- Introduce “mystery shopping” or service testing to monitor housing and SEND services.
- Expand site visits for councillors and scrutiny members to SEND families’ homes.
- Ensure maladministration cases lead to system-wide change, not just individual remedies.

# 7

## Improve Access to Alternative & Private Sector Housing

- Strengthen support for families seeking alternative accommodation within the borough, to maintain school, health, and community links.
- Provide SEND family priority for shared ownership schemes, and reserve ground and first-floor units for households with safeguarding or accessibility needs.
- Enforce tighter control on landlords and estate agents to prevent “No DSS” discrimination.
- Incentivise private landlords to offer genuinely affordable rents with longer, more secure tenancies for families with SEND children.
- Ensure any private sector incentives are conditional, transparent, and independently monitored, to avoid loopholes or exploitation.
- Introduce tighter regulation to protect tenants from eviction, disrepair, and excessive rent increases.

*Change is not only  
necessary —————  
———— It is possible.*



These case studies expose a **consistent pattern** in which Hackney's housing system is failing its most vulnerable residents. Families raising disabled children are being left to survive in the most **unsafe and unsuitable conditions**. The notion of home, instead of being a place of safety, has become a **source of trauma and instability**.

# CON -CLU SION

## Across these testimonies, the same themes recur:

- **Minimisation and dismissal:** professional evidence is overridden by in-house medical advisers, using a so-called “positivity prism” to downplay risk.
- **Policy jargon over people:** overcrowding and disrepair are reframed as “non-medical” to deny priority.
- **Administrative failure:** lost records, altered dates, IT errors, and delayed complaints erode trust and prolong crisis.
- **Safeguarding gaps:** repeated warnings about risks to children’s safety are ignored.
- **Lack of empathy:** families report feeling gaslighted, dehumanised, and abandoned by the very services meant to protect them.

These are not isolated mistakes but **systemic choices**, choices to minimise, to delay, to deny. The Council has clear statutory duties under the **Children Act 1989**, the **Equality Act 2010**, the **Housing Act 2004**, and the **Homelessness Code of Guidance**. **Meeting these duties is not optional**.

The families in this report are not asking for special treatment — **only for fairness, dignity, recognition, and a safe home** in which their children can grow and thrive. **Continued inaction puts children’s lives, health, and futures at risk**.

What is missing is not **evidence or legal obligation**, but the **political will to act** and the **courage to place future generations at the heart of decision-making**. Hackney must move beyond **delay and procedural denial**. The **burden of inaction** will continue to fall on children who cannot wait a lifetime.

**Hackney now has both the opportunity and the responsibility to lead change.**

**That change must begin now.**

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**Housing Inclusion Hackney**

is a grassroots movement of parent carers campaigning for safe, secure, and suitable housing for families raising children with special educational needs and disabilities (SEND). We formed in response to families repeatedly facing barriers in housing support, often feeling overlooked or unfairly treated. Our aim is to highlight how housing pressures and systemic failures disproportionately affect disabled children and their carers, and to push for accountability, inclusive policies, and long-term solutions rooted in lived experience.

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