# Young People, Homelessness and Housing Exclusion

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*I'm trying to find me own person now because I don't know who I am like; I don't know who I am like. I want to be who I was when I was thirteen . . . it's like I want me childhood back.*

**Fiona, 19**

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# Background to the Study

The available evidence indicates that youth homelessness remains a significant issue in Ireland and throughout Europe. Children and young people who experience homelessness, or are 'at risk' of homelessness, warrant particular attention because of the specific legislation that affects them, the highly vulnerable position they hold by virtue of their age, and their limited access to education, employment, and housing markets.

This research aimed to build upon and extend earlier studies of youth homelessness in Ireland (Mayock and Vekic, 2006; Mayock *et al.*, 2008; Mayock and Corr, 2013) and to advance knowledge and understanding of the processes associated with young people becoming and/or remaining homeless. The research was also designed to examine facilitators to exiting homelessness and to enhance understanding of the dynamics of youth homelessness, with particular attention to unfolding processes of change over time.

The findings presented in this executive summary are drawn from Phase 1 of a qualitative longitudinal study designed to track the experiences of homeless youth over time. While the research privileges young people's accounts, it makes an innovative departure from existing research on homeless youth in Ireland by extending its scope to include the perspectives of the *families* of a sub-sample of the participants. The integration of the views and experiences of both young people and their carers has the potential to shed new light on the complex and under-researched family dynamics that may propel young people to leave home prematurely, as well as on those family processes that facilitate a resolution to their homelessness.

# Research Aims and Objectives

This research set out to generate in-depth knowledge and understanding of the life experiences of homeless or 'out of home' young people and their families in Ireland. More specifically, the study aimed to:

1    Identify young people's routes or paths out of home;

2    Examine their experiences (of accommodation, education/training, daily life, and so on) after leaving home;

3    Track young people's interactions with services and systems of intervention over time; and

4    Identify facilitators and barriers to housing stability.

# Research Methods

This qualitative study was designed to examine the phenomenon of youth homelessness through the collection of rich narrative data. Forty 'out of home' young people (25 young men and 15 young women) aged between 16 and 24 years were recruited to the study. Of these, 21 consented to a family member being contacted, yielding interviews with 10 further participants, including five parents and five siblings. The data collection phase of the research was conducted over an eight-month period between May 2013 and January 2014.

While the conduct of interviews with homeless youth and their family members was designed to make a stand-alone contribution to existing knowledge and understanding of youth homelessness, it is hoped that these data will constitute the first phase of a longitudinal study that will 'track' the young people and their families over a two- to five-year period.

## Recruitment and Inclusion Criteria

The participating young people were accessed through a range of statutory and non-statutory services in Dublin (34 young people) and Cork (6 young people) targeting homeless, 'out of home', and 'at risk' youth. The types of services contacted included: Supported Temporary Accommodation (STA) services; Crisis Intervention Services; drop-in centres; education, training and employment services; residential aftercare services; emergency short-term accommodation services; adolescent 'out of home' services; and residential settings for young people 'in crisis'. Both male and female, and Irish and non-Irish young people were eligible for participation in the study; in addition the young people had to be:

› Currently homeless or living in temporary, insecure, or unfit accommodation;

› 'At risk' of homelessness by virtue of having experienced housing instability or a previous episode of homelessness; and

› Aged 14–24 years.

## Data Collection

Following the broad methodological approach utilised in previous studies of youth homelessness in Ireland (see Mayock and Carr, 2008; Mayock and Corr, 2013; Mayock and Vekic, 2006; Mayock and O'Sullivan, 2007; Mayock *et al*., 2008), young people were interviewed using a *life history approach*. All interviews commenced with an invitation to the young people to tell their life 'story' and the following specific issues were probed as the interview progressed: housing/homeless history; family circumstances; schooling; health and mental health; and young people's perspectives on their situations, past, present and future. The life history approach allowed the researchers to capture relevant biographical details and also encouraged young people to articulate their views and to elaborate on 'critical moments', transition, and change in the telling of their stories.

Where appropriate, permission was sought from the young people to make contact with a family member. Qualitative in-depth interviews were subsequently conducted with those family members who agreed to participate in the study. These participants were invited to express their views on current service provision for 'out of home' young people and their families, as well as their perceptions of the young person's current needs (e.g. in relation to housing, education and health/mental health). They were also asked to reflect on their relationship with the young people (past and present) and to discuss their personal experiences of housing instability or homelessness where relevant. These interviews encouraged family members to raise personally relevant issues in relation to their son, daughter, sister or brother's experiences of housing instability and homelessness.

# Sample Profile

**The Study's Young People (n = 40)
(25 young men and 15 young women)**

### Age, Birthplace and Ethnicity

The young people were aged between 16 and 24 years (average age = 19.9 years) at the time of interview. Just under one quarter (n = 9) were aged 17 years or younger. Thirty-five were of Irish origin,

three of whom self-identified as Irish Travellers. The remaining young people were born in the UK (n = 2); had migrated to Ireland during childhood (n = 2); or did not know where they were born (n = 1).

### Current Living Situation

Young people were living in the following accommodation types at the time of interview:

| Accommodation Type | Male (n = 25) | Female (n = 15) | Total (n = 40) |
|---|---|---|---|
| Under 18s 'Out of Home' Provision | 9 | 0 | 9 |
| Temporary Emergency Accommodation (TEA) (ages 18–23 years) | 0 | 2 | 2 |
| Supported Temporary Accommodation (STA) (ages 18–25/26 years) | 10 | 6 | 16 |
| Semi-Independent Accommodation | 1 | 0 | 1 |
| Residential Aftercare | 0 | 2 | 2 |
| Adult Supported Temporary Accommodation (STA) | 1 | 0 | 1 |
| Adult Emergency Hostel (on a night by night basis) | 2 | 3 | 5 |
| Bed and Breakfast (B&B) Accommodation | 1 | 0 | 1 |
| Rough Sleeping | 1 | 0 | 1 |
| Private Rental Accommodation | 0 | 1 | 1 |
| Supported Lodgings | 0 | 1 | 1 |

### Education and Employment

Four young people were attending a second-level school at the time of interview. Ten had left school without any formal educational qualifications, while 21 had progressed to Junior Certificate level and five had completed their Leaving Certificate examinations. One young woman was completing a third-level course at the time of interview. None of the young people were employed (either full- or part-time), although a small number had been employed at some time in the past.

### Family Situation and Parenthood

Seventeen young people reported that a parent (n = 13) or sibling or half-sibling (n = 4) was deceased. The parents of eight of the young people were living together at the time of interview; however, a majority reported that their parents had separated and many had subsequently lived in 'blended' or step-parent families. Six of the young people in the sample were parents (mothers in four cases and fathers in two cases) and one young man was an expectant father.

### Inter-generational and Intra-generational Homelessness

Reports of inter-generational and intra-generational homelessness were commonplace. One-quarter of the young people (eight males and two females) reported periods of homelessness along with their parent(s) as children, while 12 stated that they were aware of a family member(s) (sibling, mother or father) who had experienced 'single' homelessness at some time in their lives. Overall, 17 family members were identified as either currently homeless or as having previously experienced homelessness.

### Care History

Twenty-six young people (65%) reported a history of State care and a further eight (20%) had spent lengthy periods in the (informal) care of a family member(s).

## The Study's Family Member Participants (n = 10) (5 parents and 5 siblings)

### Age and Current Living Situation

The study's participating parents and siblings were aged 39–57 years and 16–29 years, respectively. Three family members (two siblings and one parent) were homeless at the time of interview and living in either transitional housing (n = 2) or emergency hostel accommodation (n = 1). The remaining family members lived in owner-occupied residences (n = 3), RAS (Rental Accommodation Scheme) housing (n = 2), the private rental sector (n = 1), or were currently in foster care (n = 1).

### Employment/Training Status

Six family members were either engaged in education/further study (n = 3) or employed on a full-time basis (n = 3) at the time of interview. The remaining family members were retired due to illness (n = 1), caring for their children full-time (n = 1), or unemployed and not participating in education or training (n = 5).

### Experiences of Homelessness

Two of the participating family members (one parent and one sibling) had experienced family homelessness and a further five (one parent and four siblings) reported experiences of 'single' homelessness at some time in their lives.

# Key Findings

## Young People's Pathway's Out of Home

Following previous studies (Mayock and Carr, 2008; Mayock and O'Sullivan, 2007), the analysis aimed to generate typologies in order to capture the events and experiences associated with young people's premature home-leaving. It is important to emphasise that, while each of the four typologies has distinctive features, there were also many shared experiences across all four pathways, including experiences of poverty, economic disadvantage, social exclusion, housing instability, parental substance misuse, and/or domestic violence. The four dominant pathways identified are as follows:

**Pathway 1:**
**Histories of State Care**

**Pathway 2:**
**Household Disruption and Family Instability**

**Pathway 3:**
**Family Conflict, Family Violence**

**Pathway 4:**
**Problem Behaviour and Neighbourhood Stressors**

### Pathway 1: Histories of State Care (14 young people)

These young people had spent extended periods in foster and/or residential care settings. A majority reported high levels of anxiety and uncertainty at the point of entering care and most subsequently experienced placement disruptions and breakdown. Preparation and support for the young person for life after care was identified as crucial, particularly at the point of transitioning from children's (under-18's) services to adult services or in the event of returning to the care of a family member(s). These accounts highlight the complexities and challenges associated with the provision of care and aftercare services to 'out of home' children and young people, and reaffirm the need for children's perspectives to be placed at the centre of assessment and review processes.

> " *I think the social workers put like the children that are in care, I think they just throw them in there for a while just to see how you're getting on like. It's probably just what happened with me.*
> **Christopher, 16** "

### Pathway 2: Household Disruption and Family Instability (9 young people)

The impact of significant and often traumatic life events such as parental separation, bereavement, social deprivation, and housing instability dominated the accounts of these young people. Numerous overlapping adversities were typically reported and several also stated that their parent(s) had and/or continued to struggle with hardship and adversity in their own lives. Disruptions to schooling emerged as a common barrier to educational participation for many young people in this pathway. Exposure to traumatic life experiences and events appeared to be factors that 'pushed' young people towards negative coping strategies and behaviours such as truancy, substance misuse, and/or criminal activities. Engaging in these strategies often further complicated their already fragile family relationships.

> " *I was staying out all the time and I was taking Es [ecstasy], I was smoking hash and all, I was blocking everything out, I didn't want to know anything like.*
> **Sophie, 20** "

### Pathway 3: Family Conflict, Family Violence (9 young people)

Experiences of childhood neglect, abuse, parental substance misuse, and/or domestic violence were central to these participants' reports of the events and circumstances leading to their premature home-leaving. Some had witnessed violence and/or

experienced neglect as children and these patterns had often persisted into adolescence. Some of these young people were often excluded from the family home, while others left voluntarily in order to escape increasingly volatile situations. Attempts to intervene by social workers were often reported to be unsuccessful due to the privileging of parental accounts of home-based circumstances. This was often compounded by fears of the negative repercussions associated with a full disclosure by the young person of the precise nature of their family situations (e.g. escalation of abuse, separation from siblings, placement in care). For these reasons, the full extent of their experiences often went unrecognised by professionals. These findings suggest that young people's perspectives on their situations do not receive adequate attention and highlight a need for increased understanding and support of young people who are vulnerable and seeking help.

"

*[Social workers] never listen to me, what I have to tell them or anything. Like when they ask me the reasons why I don't want to be at my ma's and I've told him the reasons and showed him the marks and the things that I've had while I was there and they never even bothered doing anything about it.*

**Aaron, 16**

"

### Pathway 4: Problem Behaviour and Neighbourhood Stressors (8 young people)

Substance use and the influence of negative peer associations made a significant impact on the lives of the young people in this pathway. Among them, deteriorating family relationships and school experiences were frequently described alongside reports of substance use and/or anti-social behavior, which sometimes resulted in criminal justice contact as well as exclusions from their local communities. The accounts also point to the limited responses and appropriate supports available to young people and their families who are presenting with high risk and challenging behaviours.

"

*I got arrested loads of times for drinking and a load of ASBOs [Anti-Social Barring Order] then as well. I found that nearly most weekends I was goin' out getting locked [drunk], I was getting brought home by the police for getting drunk; that was at the same age maybe 14, 15 . . . the fact that I was goin' out and sniffed out of me head and even the come downs, stoned, drunk—the arguments we used to have, you know like, I don't really blame [mother] for [putting him out].*

**Paul, 21**

"

## Young People's Pathways Into and Through Homeless Services

A large volume of data was generated on young people's movements, and the impact of various living situations on their lives, following what they identified as their first 'out of home' experiences. Their interactions with services featured strongly in their accounts but, for a large number, contact with services did not occur until long after they had left home for the first time. A considerable number reported multiple and often overlapping challenges—related to substance use, criminal justice contact, and mental health problems—issues that emerged as potential and/or ongoing sources of instability in their lives.

### Hidden Homelessness

Experiences of early childhood adversity, as well as difficult and often fraught family relationships, were strongly implicated in the early home-leaving of a large number of the study's young people. Very often, a pattern of leaving and returning home for short or more lenghty periods began during the early or mid-teenage years and the vast majority recounted at least one episode of 'hidden homelessness', that is, time spent living in the homes of relatives, friends or boyfriends/girlfriends prior to making first contact with services.

> *I suppose really since I left residential care, it was always in the back of me head really, you know. But like the times when, like I'd stay, the time I stayed with me auntie in England, the times I'd stay with me nanny and granddad, I'd be saying to meself, 'What are you talking about, like you know, I'm not homeless, I'm never going to be like that'. But then at the back of me head I'd be always sort of telling meself, 'Well, cop on Craig, you are homeless'.*
>
> **Craig, 22**

These temporary living situations were often perceived as positive 'stop gaps' and as a preferable alternative to sleeping rough or entering homeless or child protection services. Reported episodes of 'wandering' the streets throughout the night in order to avoid sleeping rough also emerged as a common practice among young people who were attempting to negotiate home-based conflict and simultaneously navigate early experiences of homelessness.

## The Out of Hours Service

Nine of the young people reported contact with the Out of Hours Service, which targets 'out of home' young people under the age of 18 years in the Dublin region. Experiences of this service were diverse: some reported long-term cycles of service use as well as the unsettling impact of frequent movements between emergency accommodation types; while others (particularly more recent users of the service) reported more positive experiences, describing relatively speedy responses to their situations and more immediate access to more stable accommodation options.

## The Transition to Adult Services: Narratives of Resistance

Thirty-one of the young people were over 18 years old at the time of interview and had accessed an adult hostel or other adult emergency accommodation, such as B&Bs, often on multiple occasions and over a considerable period of time. The transition from youth to adult services was typically abrupt and always identified by young people as a point when all supports were removed.

> *I mean, just because I turned 18 [pause] I was supposed to move into [under-18s service] and obviously that didn't happen . . . but I mean the difference from before I turned 18 and when I turned 18; it was like, 10th June  I had my social worker and key worker and the staff in the [under-18s] hostel and then, on the 11th, like that all went away. There was no support there, there is no, I don't know where? I mean, the only reason I knew about the free phone to get a bed in a hostel was because when I was under 18 I rang it for other people so I knew the number.*
>
> **Maria, 23**

Issues such as the stigma of homelessness, lack of knowledge about available support services, and the fear of entering adult homeless accommodation dominated reports of first engagement with these services. Practically all accounts described some form of resistance to entering the adult service system and, very often, first access coincided with a personal crisis or transpired when all other options were closed. Furthermore, young people typically first entered adult hostels at a point of extreme vulnerability. These accounts highlight the numerous risks posed to young people as they attempt to negotiate the transition to adult homeless services.

## Adult Emergency Services: "They're just putting a band aid on it"

The experience of navigating the adult service system was frequently described in extremely negative terms. Typical accounts emphasised the transience and unpredictability that characterised hostel life and many feared for their personal safety and their personal belongings. Difficulties related to access, a lack of understanding on the part of staff members, and the poor standard of accommodation (overcrowding, unsanitary, and so on) were commonly reported and these experiences served to generate feelings of alienation, disconnectedness, and anxiety. A considerable number of young people also reported occasions when they could not access emergency accommodation because of capacity restraints. Negative coping strategies, including increased consumption of alcohol and drugs, were reported by most of the young people following their

entry to the adult service system. Young people and their family members were critical of the omnipresent drug and alcohol use in these emergency service settings and of the lack of appropiate accommodation targeting youth.

> " There needs to be more places like this [Supported Temporary Accommodation] than places like [lists three adult hostels]. They are not helping the situation. You know, they're just putting a band aid on it, you know, 'We'll figure it out later'.
>
> **Maria, 23**

### Experiences of Supported Temporary Accommodation

Almost half of the young people were currently accessing Supported Temporary Accommodation (STAs) and typical accounts of these accommodation settings were far more positive: they provided far greater stability and supported young people in their efforts to acquire essential living skills and to re-engage with education and training. Several young people emphasised the important role of indivdual staff members in supporting them to develop positively and gain confidence. Nonetheless, those currently living in STAs invariably expressed concern about the future and about their limited move-on options, in particular. Family members typically shared these concerns and a number highlighted the risks posed by the current structure of services, which was likened to a 'revolving door' response to young people's needs by one of the mothers interviewed.

> " It's [homeless support services] a recycle programme, they're taking people in to put people out. If they're putting people out, where's them people going to be in the next few weeks? Back in [adult emergency service] and back in their services. It's just going around, the problem ain't going away.
>
> **Tracy, mother, 39**

### Instabilities and Risks

A large number of young people reported criminal justice contact, as well as substance use issues and/or mental health problems. These difficulties were often overlapping and were invariably exacerbated by the young people's homelessness.

### Criminal Activity

There were notable gender differences in reported patterns and types of offending behaviour. All 25 of the young men interviewed reported contact with the Gardaí at some point in their lives and 10 had spent time in prison. Ten of the 15 young women reported contact with the Gardaí, although none had received a custodial sentence. First contact with the Gardaí was often linked to substance use and typically occurred in the young people's home neighbourhoods during their early to mid-teenage years. For most of them, involvement in criminal activity increased following their entry into the 'official' network of homeless youth.

### Substance Use

Thirty-seven of the 40 young people had experimented with an illegal drug at some point in ther lives and the vast majority first used a drug during their early to mid-teenage years. Polysubstance use was the dominant pattern of consumption and 22 young people reported the problematic use of drugs and/or alcohol. Young people invariably reported that their use of substances became more regular and intense following their first experience of homelessness, often because of their increased exposure to alcohol and drugs within the homeless service system. A large number also reported substance use as a coping or survival strategy.

### Mental Health Problems

Most of the study's young people recounted past and present experiences of psychological distress and a considerable number reported a diagnosed mental health problem(s). There were also numerous reports of suicidal ideation and deliberate self-harm. Issues related to unresolved grief and loss, traumatic childhood experiences, household instability, family conflict, and disruptions to care placements were frequently implicated in the distress experienced

by young people. Reports of a preference for self-medication through the use of illegal drugs and/or non-prescribed benzodiazapines and a corresponding reluctance to engage with psychological services featured strongly in their accounts, highlighting the complexity of delivering appropriate mental health services to 'out of home' young people.

## Young People, Family and Family Relationships

All of the young people reported unique family situations and circumstances. However, their accounts demonstrate the numerous ways in which family processes, dynamics, and mechanisms can shape and influence the lives and experiences of 'out of home' young people.

### Family Relationships and the Role of Family Support

Despite reporting difficult or fraught home-based circumstances, a majority of young people expressed a strong desire for family contact, highlighting the value they place on their connectedness to family and the perceived symbolic importance of 'family' and familial bonds. The process of renewing family relationships was typically incremental and was often depicted by young people as challenging. For many, finding a balance between distance and closeness appeared to be crucial to their efforts to re-establish relationships with their parents and/or other family members. Thirty-three of the study's young people had maintained some level of contact with their family, and typical accounts reveal the strong value they placed on maintaining family links.

❝

*If I didn't have my ma to help me I would be lost, I wouldn't know what to do, do you know what I mean.*

**Kevin, 23**

❞

However, many young people and their family members did not feel adequately supported by the existing service systems to re-build and maintain family relationships, and most expressed a desire for accommodation that would allow them to see their families more frequently and under better circumstances.

❝

*These young people, the parents should be allowed in to sit with them . . . why can't they do this? [That would actually be] teaching them for going into a living accommodation on their own, that they can have people with them . . . So you need to be doing that, and that needs to be brought in.*

**Tracy, Eric's mother, 39**

❞

The accounts of young people who reported little or no contact with family members (n = 7) reveal a distinct absence of material resources as well as a perceived lack of practical and emotional support in their lives in general. Very often, these young people attempted to form supportive attachments or 'family-like' relationships with adults or peers within care of homeless service settings.

### Young People with Histories of State Care: Concepts of 'Family' and Family Relationships

Young people with histories of State care described particularly complex understandings of 'family' and family relationships. Many recounted feelings of abandonment, rejection, and dislocation, as well as a fractured sense of belonging related to the lack of tangible familial bonds. A lack of intimate knowledge and understanding of family and family life also appeared to negatively impact these young people's ability to develop and maintain positive social bonds and/or supportive relationships, leading to feelings of marginalisation and dislocation.

*I felt a serious like lack of love, so like feeling unwanted constantly definitely had a serious effect on me. It still affects me in a way with my relationships— probably pushing them away and going; 'You don't love me' or you know? It hurts a lot, you know, it's hard to come to terms with that.*

**Chloe, 22**

Despite having complicated experiences of 'family', young people with histories of State care clearly attached emotional and symbolic importance to family ties. Of the 14 young people cateorised as having taken a care pathway into homelessness, 10 reported some level of contact, ranging from daily to yearly visits or phone-calls, with at least one parent. Maintaining links or re-establishing relationships with members of their birth family, particularly siblings, provided emotional support and also enhanced their ability to establish positive inter-personal relationships.

### Experiences of Inter-generational and Intra-generational Homelessness

One-quarter of the young people (eight males and two females) reported periods of family homelessness, which ranged in duration from many weeks to several years. Reports of intra-generational homelessness, that is, homelessness within families (among siblings or parents, for example) were also common. Twelve participants (just over one quarter) were aware of a family member(s) (sibiling or parent) who had experienced 'single' homelessness at some stage in their lives. Perhaps significantly, family members who had current or prior experience of homelessness appeared to provide valuable support to young people, often because of their personal knowledge of the homeless service system. Siblings, in particular, frequently 'connected' young people with the services and provided advice on how to navigate homeless support systems.

*My sister put me on to this place here [homeless support service for under 18s] as well you know, like she used this place before I did and like they help me now with everything.*

**Sam, 19**

A smaller number of young people had experienced 'single' homelessness during their late teens or early twenties alongside a sibling (in three cases) or their mother (in one case). In these instances, it appeared that entering homeless accommodation along with a family member engendered feelings of safety and protection and facilitated a smoother transition to hostel life. In some cases, however, young people became separated from a sibling at the point of seeking access to a service due to capacity constraints, a situation which generated enormous anxiety for both the young person and their family member. Whilst having a family member present had the advantage of reducing the stress associated with living in adult hostels, in particular, a number of young people also described the responsibility placed upon them to constantly "look out" for that family member.

*We weren't close sisters, but just became close, we had to, well I had to mostly because she's me little sister like, I had to look out for her. She hadn't got a clue what she was doing coming into town.*

**Susan, Alison's sister, 22**

### Young People and Parenting in the Context of Homelessness

Of the 40 young people interviewed, six—four young women and two young men—were parents and one was an expectant father. Five of the six young people reported patterns of housing instability and experiences of homelessness prior to becoming a parent, and five became parents (or learned of a pregnancy) when they were living in homeless accommodation or situations of hidden homelessness. Parenting in the context of homelessness was invariably depicted as difficult, disruptive, and distressing and several of these

young people expressed strong feelings of guilt and shame associated with their inability to provide a secure home for their children. A number highlighted the challenges of providing adequate care and material resources to their children whilst simultaneously attempting to address their own housing and financial needs under strained circumstances.

> *Like it's kind of mixed up, you can't actually do your own routine with [children], the way things are right now like [in emergency hostel]. Obviously you'd be happier in your own home where you can do your own thing, you know things like that.*
>
> **Collette, 20**

This was particularly the case for a number of young women who had experienced numerous adversities (such as domestic violence, mental health problems, post-natal depression, and/or substance use issues or problems) subsequent to moving from homeless support services to independent accommodation after the birth of their child.

Four of the young people reported that their child had either been placed in foster care (n = 2) or was in the care of their ex-partners (n = 2). The experience of separation from their children was always distressing; it impacted negatively on young people's mental health and well-being and also contributed to increased substance use, in some cases. All of these young people expressed a strong desire to reunite with their child or, alternatively, to acquire housing that would allow them to see their child more frequently. Being a parent appeared to act as a motivating force in the young people's lives, with many detailing their efforts to find secure accommodation and/or address substance use issues in the hope that these positive changes would enable them to see their children more regularly.

> *My main priority is get an apartment and moving on out of [Supported Temporary Accommodation] so I can take my son for the weekend because I haven't been seeing as much of him and I miss him.*
>
> **Warren, 23**

However, parent-child reunification was generally depicted as a difficult and protracted process that was invariably exacerbated by the experience of housing instability and homelessness.

## Family Member Perspectives on Services and Service Provision

Family members identified gaps in service provision, particularly in relation to early intervention and the support services available to the families of young people who are living 'out of home'. Many emphasised the need for improved information, advice, and support for parents that might help them to better understand and respond to their children's situations and needs. The need for support was particularly emphasised by the parents of young people with mental health problems and/or engaging in 'risk' behaviours (e.g. substance use, criminal activity).

> *They [services] should be helping the parents as good as they're helping the child, you know. But they don't . . . I think they [services] could've been giving me more information, maybe a bit of counselling or something – help me, educate me towards the drink and the drugs like and help me to recognise what drugs that was available out there.*
>
> **Jacqui, Rebecca's mother, 57**

Some parents struggled to interact positively and effectively with service providers, often because they felt side-lined or not adequately informed about the nature of their child's problems. A number also noted that services were invariably less responsive and/or available to them when their son or daughter reached the age of 18 years:

> *To be honest with you I think when they're kids it's all about getting them to eighteen and that's it then. Once they're eighteen, off you go.*
>
> **Teresa, Paul's mother, 49**

Perhaps significantly, a number felt strongly that family was neglected and that there was little effort to engage with family members, particularly after the young people left home:

> *Family can help, they should be able to help*
> **Tracy, Eric's mother, 39**

## Young People Negotiating a 'Way Out' of Homelessness

Irrespective of the young people's circumstances and experiences, past and present, many were focussed strongly on the future and were actively seeking ways to achieve stability in their lives. Access to housing, education and training were almost consistently singled out by young people as critical to securing housing and employment.

### Education, Training and Employment

In general, educational levels were low for the sample; over half had left school before the age of 16, 10 of them without any formal educational qualifications, and a further 11 left at the age of 16 years. Only four young people were attending school at the time of interview. A majority reported negative school experiences, as well as high levels of disruption to their schooling, often related to difficult family situations, multiple housing transitions and/or conflict with teachers which, in turn, led to a perceived sense of failure and alienation, in many cases.

Twelve of the young people were attending a post-school education or training programme at the time of interview and a further 13 had completed a training programme (e.g. FÁS, Youthreach), apprenticeship, and/or FETAC accredited courses in the recent past. In general, young people valued the routine and personal sense of accomplishment that accompanied attendance.

> *My confidence would have been shot and my self-worth and my hope for myself going into a situation like that I would have been terrified. So, yeah, definitely that was a huge confidence boost.*
> **Conor, 21**

It was very often the case, however, that participation in education and training was compromised by the absence of secure housing, and most were acutely aware of the challenges they are likely to face in securing employment due to a lack of formal qualifications. A number of the young people were worried about the impact that histories of criminal justice contact and/or mental health problems might have on their employment prospects. None were employed at the time of interview, although several had endeavoured, without success, to find work. Believing that educational qualifications were critical to securing a better future, most had concrete plans to return to, or pursue further opportunities to engage in, education and training.

> *Like this is what life's all about; gettin' out on your own, gettin' your education and doin' it, you know? Just like doin' what you have to do. Because I always thought like, 'How am I gonna get out of this situation?', and I thought like, education is the best way out of poverty, you know?*
> **Bryan, 22**

### Finding a Place to Call Home

All of the young people interviewed expressed a desire to find a stable home. However, they typically expressed anxiety about the future as they contemplated a route to housing stability, and a large number articulated a need for support and preparation ahead of their move to independent living.

> **Q** *And have you ever tried looking for a place yourself?*
>
> **A** *No. I want to get everything going well first. Just in my head, you know . . . I'm not right in meself and I will just lose all motivation . . . gonna wait until I'm fully with it all and then.*
>
> **Patrick, 20**

Perhaps significantly, the family members of several of the young people questioned their readiness for independent living, and some particularly expressed concern about mental health issues such as depression and self-harm. A number also worried about their ability to cope with practical aspects of daily life, such as budgeting, cooking, and managing peer relationships—issues they felt could potentially compromise their future efforts to sustain housing.

> *I think Paul, I suppose you know . . . I think he wants, I suppose, he wants his own place that he can come and go and and have people in and, do you know? And I suppose the biggest thing, he needs support, like you know . . . especially at the beginning like to, to learn to manage.*
>
> **Teresa, Paul's mother, 49**

A large number of the young people had some experience of seeking accommodation, particularly in the private rented sector. However, all talked repeatedly about the multiple barriers they faced in securing housing and their accounts highlight multiple economic and systemic constraints of access, including: the challenge of saving enough money to pay a deposit; a rental market that discriminates against those in receipt of rent supplement; the poor standard of available rental properties; and discrimination by landlords due to age-related stereotypes and their status as homeless.

> *I don't know how I'm going to afford my own place like because with the rent allowance you still, it's still your responsibiltiy to pay at least €30 of the rent every week. I'm on €100, so that's €30 gone; then bills, then shopping, then college like.*
>
> **Michelle, 20**

> *I suppose like just more frustration about what's the situation with housing, what's possible and what's not possible. I think I got a bit of a run around . . . so I suppose I felt a bit left to the wayside that way or being treated differently . . . but to find residence is very tough, you know, to get somewhere in Dublin.*
>
> **Conor, 21**

Other problems that most young people encountered included their limited experience of dealing with landlords and agents, not having a trusted individual to help them to view rental properties, the inability to supply references from previous landlords, and the lack of regular or reliable internet access.

**Identity, Self and the Future**

Young people's perspectives on the future were connected to their past experiences and, in particular, with their ongoing struggles with stressful or traumatic life events such as bereavement, histories of State care, experiences of abuse or violence, and/or family breakdown. However, despite the challenges the young people faced, there was a strong sense from the narratives that they were actively seeking ways to re-build their lives.

> *I'm trying to find me own person now because I don't know who I am like; I don't know who I am like. I want to be who I was when I was thirteen . . . it's like I want me childhood back.*
>
> **Fiona, 19**

Many talked about the transformative effect of moving to accommodation that offered greater stability and provided them with a space to work towards the achievement of personal goals, such as addressing a substance use problem, preparing for independent living, or completing a training course. This experience tended to provide young people with a renewed sense of personal growth and also engendered (more) positive perspectives on the future, even if many continued to experience challenges.

"
_____

*Like I pay rent here [Supported Temporary Accommodation] every week and I have somewhere to come, you know. I consider this, while I'm here I'll consider this me home, you know. I keep me flat tidy and I have all me stuff, you know, I read, I do a lot of reading, I've got a lot of books and stuff, I've me own telly. Like everything in there is mine. I'm quite self-sufficient, you know, I look after myself. I try not to rely on people too much.*

**Craig, 22**

_____ "

However, the reflections of some of the other young people, particularly those who were navigating emergency systems of intervention, on their experiences and on their aspirations for the future, were complex, often replete with concerns about the past as well as anxieties about long-standing issues in their lives. Many were dealing with marginality and stigma on several levels, as well as associated problems of mental ill-health, alcohol or drug use, and abuse histories, in many cases. These young people's narratives frequently pointed to a strongly devalued self because of their homelessness and substance use problems, and a number struggled to see a 'way out' of homelessness. Furthermore, many considered that their situations had deteriorated and would continue to do so in the absence of a route to housing stability.

"
_____

*Where I'm going to end up? I don't want to be … homeless. I just don't know. Just to be able to see a way out sometimes.*

**Michael, 24**

_____ "

# Recommendations for Policy and Service Provision

The recommendations arising from the findings of this study address the following issues:

› **Prevention**
› **Early Intervention**
› **Crisis Intervention**
› **Aftercare Provision**
› **Education and Training**
› **Supporting the Family Relationships of Homeless Young People**
› **Housing and Housing Supports for Young People**

## Prevention

Preventative strategies focus on children and young people who may be 'at risk', but who are not actually homeless, and these measures and actions need to start at the earliest possible juncture. The *Youth Homelessness Strategy* (Department of Health and Children, 2001) placed a strong emphasis on prevention and this emphasis requires renewed impetus. All agencies working with children and young people within local communities have a role to play in preventing homelessness by providing early warning signs of risk factors and ensuring that there are referral arrangements with agencies targeting children, young people and their families. Since homelessness cannot be attributed to a single cause, multi-agency work, involving housing, social work, education, justice and health sectors, will be necessary components of effective prevention.

### Raising Awareness of Youth Homelessness

Raising awareness of homelessness among children, young people, parents and teachers is an important component of any attempt to prevent homelessness within local areas. A key challenge is to raise awareness about homelessness in a way that creates an understanding beyond 'rooflessness'. If this is not achieved, many recipients of messages that aim to raise awareness may well feel that they (and others) are invulnerable to 'homelessness'. Additionally, young people may not recognise that they are living in situations of 'hidden' homelessness when they find themsevles moving between the homes of friends and/or extended family members.

### Family Support Services

Family support services play a critical role in supporting children and young people 'at risk' of becoming homeless. Current thinking suggests that to be most effective, family support services must be integrated, community-based, and targeted at children and families who are most in need. More than anything, family support must seek to identify and encourage the strengths and problem-solving abilities of all families and foster confidence in their ability to overcome adversity.

The findings of this research indicate that earlier occurrences of homelessness during childhood pose a significant risk of subsequent homelessness during later life. This finding points to the fundamental importance of ongoing support for families who have experienced homelessness, particularly in relation to issues around early home-leaving and informal care arrangements, patterns which tend to precede young people's entry to the 'offical' network of homeless youth.

### Engaging Young People

This study's findings suggest that young people frequently rely on peer and family networks and 'word of mouth' for information about available services. It is also significant that many of the study's young people conveyed little or no sense of entitlement to help and assistance at times when they felt they were 'in trouble' or having difficulties in their own homes. Children and young people need to know more about services and they also need to feel that seeking help is a positive step toward resolving home-based difficulties.

**Recommendation 1**

**School and youth services are settings where work on raising awareness can potentially be achieved. Schools in local areas where there is a known high risk of youth homelessness should be identified and engaged with. A prevention package should be designed and delivered to these schools, in collaboration with teachers. This awareness raising process should be youth-friendly.**

**Recommendation 2**

**The Child and Family Agency (Tusla) should establish a Working Group to:**

› **Prepare a training pack for family support services to support them in identifying and recognising the early warning signs of young people 'at risk' of homelessness. This pack should also identify processes to enable family support services to respond to the needs of 'at risk' young people.**

› **Develop a communications strategy which sets out a plan to raise awareness among young people of available services and their rights/entitlements. This awareness campaign should involve a range of communication approaches (such as the use of social media, youth cafés etc.).**

## Early Intervention

While the aim of preventing youth homelessness is clear in Irish youth homelessness policy, the language and concept of early intervention is far less visible. Early intervention involves providing assistance to young people who are obviously 'at risk' or who are in the early stages of homelessness (McKenzie and Chamberlain, 2003). Young people who live on the streets or in hostels are just one segment of the homeless youth population and there are many more who alternate between unstable living situations (the homes of family members, friends and so on). This study's analysis of young people's early trajectories into homelessness indicates that a very considerable number lived in situations of 'hidden' homelessness, often for considerable periods, prior to making initial contact with homeless services. Their reports

also suggest that at least some young people (and their parents) may have been motivated to resolve their difficulties at this juncture. This finding strongly suggests that a substantial number of young people could be prevented from entering the homeless service system through earlier intervention to resolve problems within their families.

**Parent and Young Person Mediation Services**

This research has identified family conflict and arguments with parents or carers as key factors leading to a pattern of young people moving 'in and out' of home and, ultimately, to their becoming homeless. In the immediate aftermath of a family argument, it is understandable that young people may think that the breakdown is permanent. Where there has been physical, emotional or sexual abuse a return home is unlikely to be a suitable option. However, for others who leave home after a family argument, it is often feasible to seek to resolve these underlying problems. Parent and young person family mediation provides a good mechanism for the exploration of relationship difficulties. Young people may perceive mediation to be less threatening than individual counselling, as the focus is on the family as a unit and not on them personally.

**Information, Advice and Guidance for Parents**

The study's findings indicate that the parents of participating young people frequently felt isolated in their efforts to deal with challenging issues— including mental health problems, substance use and/or anti-social behaviour—that appeared to become more marked as their children transitioned from early to late adolescence.

Very often, parents were reluctant to disclose problems because they feared getting their children into 'trouble' or being taken into care.

Many parents in this study did not understand, or had no access to information on, the homeless service system. Information on the range of services and supports available to 'out of home' or homeless young people needs to be more accessible to parents (see also later recommendations on Supporting the Family Relationships of Homeless Young People). It should not be assumed that parents are not in contact with their children, or that young people have limited or no contact with family members.

**Recommendation 3**

**The Child and Family Agency should fund, on a pilot basis, a Parent and Young Person Mediation Service to support families. This model of mediation work could be provided by a family resource centre.**

› **Parent and young person mediation should consider the involvement of extended family members where appropriate, as many young people who are 'at risk' of homelessness appear to maintain relationships with grandparents, aunts, uncles, and others in their extended families.**

› **Where possible, fathers need to be included in family work. Likewise, young fathers, such as a number in this study, need to be supported and encouraged to maintain contact with their child(ren).**

**Recommendation 4**

**The Child and Family Agency should develop a handbook for parents on the homeless service system and on the rights and entitlements of 'out of home' young people.**

**Recommendation 5**

**Homeless services should ensure that staff engage and work with family members with the consent of, and on a basis deemed appropriate by, young people. Services also need to be aware that young people's perspectives on family may change over time, which means that family reconnection and/or reconciliation is a *process* for many.**

## Crisis Intervention

Where preventive measures and early intervention initiatives fail, there will be a need for emergency or crisis intervention. Crisis intervention services are also required for young people who suddenly or unexpectedly find themselves out of home. There is clearly a need for continued investment in crisis/emergency accommodation. However, our findings

suggest that consideration needs to be given to community-based services and interventions in particular. While Garda stations are visible in local areas and remain open and accessible for longer than most community-based services, their use as the venue of first contact for 'out of home' children and young people is problematic and requires a policy change (as recommended on numerous occasions over the past decade or more).

**Community-based Services and Interventions**

It is rarely in the interest of young people 'at risk' of homelessness to leave their home neighbourhoods. However, this study's findings indicate that the vast majority of young people commuted to city-centres to avail of services, a move which often served to weaken their existing social and family ties. Where possible, young people need to consider services located within their local communities as a first option. As it currently stands, service delivery in the form of city-centre-based emergency and short-term hostel accommodation runs the risk of prolonging the duration of young people's homelessness (often, perhaps ironically, because of their reluctance to access 'homeless' services).

**Recommendation 6**

**While continued investment in city-centre based service provision is required, the development of local emergency and long-term accommodation for young people aged 18–26 years requires specific attention by local authorities in their future homeless action plans.**

**Recommendation 7**

**Emergency accommodation for young people under the age of 18 years must be used for the purpose for which it is intended—as an entry point for young people in crisis—and should not become an interim or long-term response. In keeping with existing policy, young people must be transferred to an appropriate accommodation or care setting within two weeks and also need to be consulted and informed of new developments in relation to future placement possibilities.**

## Aftercare Provision

Despite recent improvements in aftercare provision, many young people currently leaving care in Ireland do not receive the ongoing supports required to make a successful transition to independent living. Furthermore, those young people who are accommodated under Section 5 of the *Child Care Act, 1991* do not have a legal entitlement to an aftercare service. While the Section 5 Policy, which came into effect in 2012, stipulates that this group should receive "on-going support", this does not include eligibility for a range of other services, including residential aftercare or financial support packages, nor does it include the allocation of an aftercare worker. This relatively small cohort includes young people with some of the highest needs among those 'looked after' by the State.

Those young people who reside in Crisis Intervention residential services and who are on full or voluntary Care Orders are entitled to an aftercare service if they have been in care for 12 consecutive months. However, these young people typically have complex needs, and many will require residential aftercare provision where they can be supported to make the transition to independent living.

### Recommendation 8

**All young people who are accommodated under Section 5 of the *Child Care Act, 1991*, should be entitled to a full aftercare service as outlined in the National Aftercare Policy (HSE, 2012).**

### Recommendation 9

**Currently, the range of residential aftercare placement options is extremely limited and this situation requires urgent attention. The Child and Family Agency should pursue a policy of making an additional and wider range of residential aftercare placement options available.**

## Education and Training

Full-time participation in education and training is critical to ensuring that young people are equipped for a successful transition to secure work and independence. Successful entry to what has become an extremely competitive labour market is strongly dependent on the acquisition of the appropriate mix of academic credentials, training and employability skills (Department of Training and Workforce Development, 2013). Indeed, this study's young people recognised and strongly emphasised the importance of education and training, with several depicting education as critical to finding a 'way out' of homelessness. However, a large number articulated a sense of dissatisfaction with existing training courses. This finding points to a need for Intreo[1] to review the range and suitability of current educational programmes targeting marginalised youth.

### Recommendation 10

**Homeless or 'out of home' young people who are participating in education/training and living in services targeting 'out of home' or homeless youth need the requisite income support to ensure they have the financial security to complete their education/training and engage in all aspects of society.**

### Recommendation 11

**All young people's aftercare plans should continue to include education and training pathways that are adequately resourced.**

## Supporting the Family Relationships of Homeless Young People

This study has documented the positive role of family contact in the lives of young people who are living out of home, and has also highlighted the value attached by young people and their family members to maintaining connections and re-building relationships. In part, because fractured family relationships and

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[1]    Intreo is a new service from the Department of Social Protection and is the single point of contact for all employment and income supports.

family environments characterised by conflict are factors known to precipitate homelessness, work with families is frequently neglected or not prioritised by those organisations charged with meeting the needs of 'out of home' young people.

### Recommendation 12

**Work with the families of young people who are homeless needs to be given greater priority within the homeless service sector, with a particular emphasis on collaborative approaches to working with 'out of home' young people and their family members.**

### Recommendation 13

**Accommodation services (whether hostels, STAs, residential care or aftercare services) should develop mechanisms—as well as safe spaces—that permit and encourage visits by the family members and children (in the case of young parents) of residents. The provision of such spaces should be considered in the development of the National Quality Standards Framework for Homeless Services in Ireland.**

## Housing and Housing Supports for Young People

Young people who experience homelessness are not a homogeneous group: they enter services with a diverse range of experiences and from home circumstances that vary widely. It follows that they have different needs in terms of housing and other supports, and these needs must be assessed at the earliest possible juncture. Returning home may be an option for some but not for all and, for the latter group, the provision of age and 'stage'-appropriate housing options is essential.

### Accommodation for Young People aged 18–26 Years

The findings of this study indicate that young people who are facing the prospect of moving out of services targeting under-18s experience extreme anxiety about their future and, for a majority, the transition to adult services constituted a crisis point.

The risks associated with the transition from child welfare to adult homeless services are very apparent in this research and have also been highlighted in earlier Irish studies.

### Housing and In-Housing Support

The need to get young people into housing with appropriate supports at the earliest possible juncture must be seen as paramount. This means that a range of models of accommodation and support for young people will be required in order to respond appropriately to young people's differing developmental stages and individual needs. Housing First approaches (that is, immediate routes of access to housing with no housing readiness requirements) need to be viewed as one of a number of potential solutions for homeless or 'out of home' young people. Crucially, there is a need to provide a range of supports *in* housing to those who move quickly to independent housing, and often for extended periods.

### Supporting the Transition to Independent Living

The findings of this research suggest that a considerable number of young people, particularly those who have experienced traumatic life events and/or are stuggling with substance use and mental health issues, may need an interim model of housing that provides a supportive environment, as well as a range of specific supports that aim to maximise the prospect of a successful transition to independence. Importantly, models of housing that aim to support the transition to independence should cater for small numbers of young people in any one setting; they must also be time-lined, support a clear pathway to independence, and provide the requisite supports at the point when young people move to independent living situations.

Irrespective of their personal circumsances and past experiences, all young people who experience homelessness are likely to need some level of preparation *prior to* moving to independent living situations. They will also need support *following* this transition and this needs to include both housing (e.g. advice on dealing with landlords, help in the event of problems arising etc.) and personal (e.g. encouragement, therapeutic intervention etc.) supports.

## Specialist Services

This study's young people reported a range of pressing issues beyond those associated with the absence of a secure home – including substance use and mental health problems – that are likely to pose risks to their future and their ability to secure and sustain housing. Young people need to be supported to engage with mainsteam drug/alcohol treatment and/or harm reduction services as appropriate, both prior and subsequent to moving to independent living situations.

### Recommendation 14

An immediate move to independent housing, with no housing readiness requirements, should be seen as a viable option for some young people. Equally, however, the needs of many of these young people are likely to be multi-faceted and will invariably extend beyond the need for accommodation alone; most will also need skills training, drug/alcohol treatment, as well as preparation and support both prior and subsequent to the move to independent living situations. Support *in* housing must be provided, and the nature and duration of this support needs to be ascertained in consultation with young people.

### Recommendation 15

Interim models of housing in the form of supported accommodation may be the most appropriate option for young people who have high and complex needs and who need a supportive environment to enable them to develop the skills and confidence to live independently. Equally, the period spent in such accommodation needs to be time-lined and young people's stays in these setting should not be prolonged. The planning of appropriate move-on options needs to be initiated early and in consultation with young people.

### Recommendation 16

Young mothers need specialised support following the move to independent living situations, particularly in relation to parenting, post-natal depression and domestic violence, in some cases. This support should be provided by mainstream services, such as family resource centres.

### Recommendation 17

Young people who are out of home and on the reduced social welfare rate should have access to an adequate level of income support. This could, for example, be linked to an education plan and their engagement in education or training.

### Recommendation 18

The transition from Child and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services is problematic and is also a juncture when young people may discontinue treatment. More fluid systems are required to ensure a less abrupt transition to mainstream adult mental health services and to ensure the continuity of treatment in the case of vulnerable young people, in particular.

# Concluding Remarks

The main goal of this research was to enhance understanding of the social problem we call 'youth homelessness'. The study's biographical approach has permitted a detailed exploration of the events and circumstances leading to young people's homelessness, as well as their experiences from the point of first leaving home. Although the category of youth homelessness is clearly marked by diversity, what united the young people in this study was their restricted access to stable housing and their lack of experience of independent living. All also invariably referred to difficult and sometimes traumatic life experiences, dislocation, relocation(s), and fragmentation and loss because of the instability of their housing. Youth homelessness is distinct from adult homelessness, both in terms of its causes and consequences, and it follows that the services, strategies, and interventions aimed at resolving the problem of youth homelessness must be distinct from the adult sector. Services and interventions need to be age and 'stage' appropriate, and simultaneously recognise that a speedy move to stable housing is paramount if ongoing cycles of housing instability are to be prevented.

## The authors

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# Young People, Homelessness
# and Housing Exclusion

# Young People, Homelessness and Housing Exclusion

Paula Mayock, Sarah Parker,
Andrew Murphy

Focus  Ireland

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# Acknowledgements

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Majella Rogers, Alternative Care Manager, Child and Family Agency (Tusla)

Liam Herrick, Executive Director, Irish Penal Reform Trust (until early 2014).

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Dr Paula Mayock is an Assistant Professor at the School of Social Work and Social Policy and a Senior Researcher at the Children's Research Centre, Trinity College Dublin. Her research focuses primarily on the lives and experiences of marginalised youth, covering areas such as homelessness, drug use, and drug problems. She is the founder and Chairperson of the newly established Women's Homelessness in Europe Network (WHEN) which she now co-directs with Joanne Bretherton, Centre for Housing Policy, University of York. Paula is the author of numerous articles, chapters and research reports and is Assistant Editor of the international journal *Addiction*.

**Sarah Parker**

Sarah holds a BA (Hons) degree in Sociology and Social Policy and a Masters (M.Sc.) in Applied Social Research (Distinction) from Trinity College Dublin. She has held the post of Research Assistant at the Children's Research Centre, Trinity College Dublin since October 2012 and has worked on a number of research projects including a biographical study of homeless women and a qualitative study of homeless youth. Sarah also contributed to the design, implementation, analysis and write-up of a project that aimed to 'map' homeless services for women in the Dublin region. She has co-authored a number of publications arising from these research projects.

**Andrew Murphy**

Andrew holds a BA (Hons) degree in Social Studies and a Masters (M.Sc.) in Applied Social Research (Distinction) from Trinity College Dublin. He has held the post of Research Assistant at the Children's Research Centre, Trinity College Dublin since October 2013, working on qualitative study of homeless youth. Andrew has worked extensively with children in residential care and families experiencing homelessness in the Dublin region.

# Introduction

This report documents the findings of a qualitative study of homeless young people in Dublin and Cork. The research set out to generate in-depth knowledge and understanding of the life experiences of homeless or 'out of home' young people and their families in Ireland. More specifically, the study aimed to:

1. Identify young people's routes or paths out of home;
2. Examine their experiences (of accommodation, education/training, daily life, and so on) after leaving home;
3. Track young people's interactions with services and systems of intervention over time; and
4. Identify facilitators and barriers to housing stability.

This research priviliges the accounts of young people who are currently, or have recently experienced, homelessness and comprises Phase 1 of a longitudinal study that will track the study's participants over a period of between two and five years. While the research privileges young people's accounts, it makes an innovative departure from existing research on homeless youth in Ireland by extending its scope to include the perspectives of the families of a sub-sample of the participants. The integration of the views and experiences of both young people and their carers has the potential to shed new light on the complex and under-researched family dynamics that may propel young people to leave home prematurely, as well as those family processes that facilitate a resolution to their homelessness.

This report starts by providing a detailed review of the research literature on youth homelessness and also provides an overview of the key policy responses to youth and adult homelessness in Ireland (Chapter 1). Chapter 2 outlines the research methodology, including the sampling approach, access and recruitment procedures, and data collection and analysis methods. This chapter also outlines the ethical considerations that guided the conduct of the study. Chapter 3 provides a sample profile, while Chapters 4, 5, 6, and 7 provide a detailed exploration of the young people's paths out of home (Chapter 4), their pathways into and through homeless services (Chapter 5), their families and family relationships (Chapter 6), and

their efforts to find and negotiate a 'way out' of homelessness (Chapter 7). Chapter 8 summarises the study's main findings by identifying six key issues for discussion. This chapter concludes by outlining the implications of the research for policy and service provision.

# Chapter 1: Young people, homelessness and housing exclusion

This chapter first discusses definitions of 'youth' and 'homelessness' and then provides an overview of the extent of youth homelessness in Ireland. Some of the dominant frameworks underpinning research on, and explanations for, youth homelessness are reviewed. A discussion of 'out of home' young people and their families follows, with particular attention to ways in which young people conceptualise family and negotiate family relationships. The chapter concludes by outlining the key policy resonses to youth and adult homelessness in Ireland and raises questions about how young people are positioned within homelessness policy.

## Defining 'Youth', Defining 'Homelessness'

The age range associated with youth has clear implications for what situations and individuals may be counted as 'homeless' (Quilgars *et al.*, 2011). Youth, a phase of the life course which marks a period of transition from childhood to adulthood, is defined variously. The United Nations defines 'youth' as individuals aged between 15 and 24 years[1] and the European Union follows this definition in its White Paper on youth (European Commission, 2001). Ireland's *Youth Work Act 2001* defines a young person as an individual under the age of 25 years. In terms of the upper age limit, it is important to note that youth transitions are becoming more protracted and that there is mounting empirical evidence that young people are delaying forming independent households and remaining in the family home for longer than was previously the case (Arnett, 2004; Jones, 2002; Smith, 2009).[2]

The importance of distinguishing between child and youth homelessness is recognised (Quilgars, 2010; Tyler and Johnson, 2006), with the former usually understood as affecting people under the age of 18 years (FEANTSA, 2007). Ireland's *Youth Homelessness Strategy* (Department of

1  For further detail, see UN General Assembly Resolution 36/215 and 36/28 of 1981.

2 See later section for a more detailed discussion of extended transitions from youth to adulthood.

Health and Children, 2001) did not provide a clear definition of 'youth' and, in practice, a large number of the objectives set out in the Strategy were concerned with preventing and responding to homelessness among children and young people under the age of 18 years (Mayock and Corr, 2013). In contrast, most UK commentators engaged in discussions of 'youth homelessness' focus on the housing needs of those aged between 16 and 24 years (Quilgars *et al.*, 2011).

'Homelessness' is also understood and defined variously and there is no universally accepted definition (Anderson and Christian, 2003; Busch-Geertsema, 2010a; Jacobs *et al.,* 1999). However, particularly in more recent years, wider definitions—which include individuals who are in insecure and/or inadequate accommodation, as well as those who are 'at risk' of homelessness—are considered to better reflect the spectrum of experiences that constitute homelessness. Thus, 'street homelessness' or 'rooflessness'—associated primarily with rough sleeping—is the narrowest definition and fails to incorporate experiences of housing instability and homelessness such as living in insecure accommodation and in situations of 'hidden' homelessness.

Possibly the most systematic and detailed definition of homelessness is ETHOS (the European Typology of Homelessness and Housing Exclusion), which adopts a conceptual classification or definition that includes four distinct housing situations: rooflessness, houselessness, living in insecure accommodation, and living in inadequate accommodation.[3] The first two categories (roofless and houseless) are more likely to be described as 'homeless' while the second two (insecure and inadequate accommodation) are more likely to be described as housing exclusion. The ETHOS typology, now utilised extensively throughout Europe, is underpinned by the idea of a continuum of homelessness, ranging from people 'at risk' of homelessness to people who are temporarily or episodically without shelter, to individuals who are persistently homeless. As Table 1 illustrates, ETHOS includes 13 different operational categories related to four conceptual categories: roofless, houseless, insecure housing and inadequate housing.

While ETHOS provides a strong basis for discussing the range of potential housing difficulties that individuals may face, "it is not perfect and raises further definitional issues when considering the housing posi-

3 ETHOS was developed under the auspices of FEANTSA, the European Federation of National Organisations Working with the Homeless.

tion of young people" (Quilgars *et al.*, 2011: 14). For example, within ETHOS homeless hostels and transitional supported accommodation are listed under the category 'houseless', although these services tend to offer very different types of accommodation services and supports to young people (Quilgars *et al.,* 2011). Smith (2009) also notes that ETHOS is problematic for young people, particularly for young homeless women, who may not access emergency or other accommodation dominated by men aged 25–40. Commentaries such as these highlight a lack of adequate attention to the specific situations and needs of young people who, at the age of 18 years, transfer directly to adult systems of intervention. In the Irish context, attention has been repeatedly drawn to the problems and risks associated with the bureaucratic distinction between 'child' and 'adult', which necessitates an abrupt transition from child welfare to adult homeless services at the age of 18 years (Mayock *et al.*, 2008; Mayock and Corr, 2013; Mayock *et al.*, 2013).

## The Extent of Youth Homelessness in Ireland

Homeless young people emerged as a distinct group within the broader homeless population from the 1970s in Ireland (O'Sullivan and Mayock, 2008). Concern continued to grow about the visibility of street homelessness, particularly in Dublin city during the 1980s (HOPE, 1979; Kearns, 1984; Kennedy, 1985; National Campaign for the Homeless, 1985). However, at that time, official recognition of youth homelessness was largely absent. This situation changed in the early 1990s following mounting evidence of a significant youth homelessness problem (Daly, 1990) and as several studies drew attention to large numbers of young people who were sleeping rough or living in temporary accommodation (Focus Ireland, 1995; Perris, 1999). Available data from a variety of sources spanning several decades, however incomplete,[4] indicate that while homelessness among under-18s increased during the 1990s, the figures have declined in more recent years. Nationally, the largest number of homeless young people has consistently been recorded in Dublin, with Cork recording the second highest number of 'out of home' or homeless youth (Mayock and Carr, 2008).

A detailed analysis of patterns and trends emerging from existing administrative data sets and homeless counts relevant to children under the age of 18 years, as well as to young people between the ages of 18 and

4 The limitations of existing data on homeless or 'out of home' young people in Ireland are discussed at the end of this section.

*Table 1: ETHOS Typology of Homelessness
and Housing Exclusion*

| **Roofless** |
|---|
| 1 PEOPLE LIVING ROUGH<br>1.1 *Public space or external space*  Living in the streets or public spaces, without a shelter that can be defined as living quarters |
| 2 PEOPLE IN EMERGENCY ACCOMMODATION<br>2.1 *Night shelter* People with no usual place of residence who make use of overnight shelter, low threshold shelter |
| **Houseless** |
| 3 PEOPLE IN ACCOMMODATION FOR THE HOMELESS<br>3.1 *Homeless hostel* Where the period of stay is intended to be short term<br>3.2 *Temporary Accommodation* Where the period of stay is intended to be short term<br>3.3 *Transitional supported accommodation* Where the period of stay is intended to be short term |
| 4 PEOPLE IN WOMEN'S SHELTER<br>4.1 *Women's shelter accommodation* Women accommodated due to experience of domestic violence and where the period of stay is intended to be short term |
| 5 PEOPLE IN ACCOMMODATION FOR IMMIGRANTS<br>5.1 *Temporary accommodation/reception centres* Immigrants in reception or short term accommodation due to their immigrant status<br>5.2 *Migrant workers accommodation* |
| 6 PEOPLE DUE TO BE RELEASED FROM INSTITUTIONS<br>6.1 *Penal institutions* No housing available prior to release<br>6.2 *Medical institutions* Stay longer than needed due to lack of housing<br>6.3 *Children's institutions/homes* No housing identified (e.g by 18th birthday) |
| 7 PEOPLE RECEIVING LONGER-TERM SUPPORT (DUE TO HOMELESSNESS)<br>7.1 *Residential care for older homeless people* Long stay accommodation with care for formerly homeless people (normally more than one year)<br>7.2 *Supported accommodation for formerly homeless people* |

| **Insecure** |
|---|
| 8 PEOPLE LIVING IN INSECURE ACCOMMODATION<br>  8.1 *Temporarily with family/friends* Living in conventional housing but not the usual or place of residence due to lack of housing<br>  8.2 *No legal (sub)tenancy* Occupation of dwelling with no legal tenancy/ illegal occupation of a dwelling<br>  8.3 *Illegal occupation of land* Occupation of land with no legal rights |
| 9 PEOPLE LIVING UNDER THREAT OF EVICTION<br>  9.1 *Legal orders enforced (rented)* Where orders for eviction are operative<br>  9.2 *Re-possession orders (owned)* Where mortagee has legal order to re-possess |
| 10 PEOPLE LIVING UNDER THREAT OF VIOLENCE<br>  10.1 *Police recorded incidents* Where police action is taken to ensure place of safety for victims of domestic violence |
| **Inadequate** |
| 11 PEOPLE LIVING IN TEMPORARY/NON-CONVENTIONAL STRUCTURES<br>  11.1 *Mobile homes* Not intended as place of usual residence<br>  11.2 *Non-conventional building* Makeshift shelter, shack or shanty<br>  11.3 *Temporary structure* Semi-permanent structure hut or cabin |
| 12 PEOPLE LIVING IN UNFIT HOUSING<br>  12.1 *Occupied dwellings unfit for habitation* Defined as unfit for habitation by national legislation or building regulations |
| 13 PEOPLE LIVING IN EXTREME OVERCROWDING<br>  13.1 *Highest national norm of overcrowding* Defined as exceeding national density standard for floor-space or useable rooms |
| *Note:* Short stay is defined as normally less than one year; long stay is defined as more than one year. This definition is compatible with Census definitions as recommended by the UNECE/EUROSTAT. |
| *Source:* Edgar *et al.* (2007) |

25 and up to the age of 29 years in Dublin, is provided elsewhere (Mayock and Corr, 2013). In that analysis a decline in the number of children accessing the Crisis Intervention (Out of Hours) (OHS) Service since the early 1990s, and particularly over the past decade, is noted. For example, in 2006, 336 children presented to the OHS, a figure that had dropped to 179 by 2011 (a decline of 87.7%) and 157 by 2012. In 2013, the number presenting increased to 173 and figures for the first quarter of 2014 (47 children had presented) indicate that there is unlikely to be a decline in numbers presenting to the OHS compared to 2013. The findings of recent rough sleeper counts conducted by the Dublin Region Homeless Executive (formerly the Homeless Agency) (DRHE) on a bi-annual basis indicate that street homelessness among children has "declined very significantly and is currently rare" (Mayock *et al.*, 2013: 9).

The picture is quite different for young people aged 18–25 years and among older youth aged 26–29 years. For example, recent data published by the Central Statistics Office (2012) indicate that young people aged 18–24 represent approximately 13.7% (n = 523) of the total homeless population and that those aged 25–29 account for a further 9.5% (n = 363). Together then, 18–29 year olds account for almost one quarter (n = 886; 23.2%) of all homeless individuals nationally (n = 3808). Similarly, the Housing Needs Assessment Revised Report for Dublin (DRHE, 2012) identified 367 young people aged 18–25 as homeless in 2011, which accounts for the second largest proportion (19%) of the total homeless population. Young people aged 26–30 make up a further 17% (n = 321), so that the two groups combined account for over one-third (36%) of all homeless adults surveyed. Although direct comparisons cannot be made because of differing methodological approaches and target homeless populations, as well as variations in the locations surveyed, these figures are broadly similar to those documented in the assessments undertaken by the Homeless Agency (now the DRHE) in 2005 and 2008, respectively (*Counted In*, Homeless Agency, 2005; 2008). The 2005 figures indicate that 264 young people aged 18–25 years were identified as homeless. The total number of young people presenting as homeless in this age cohort increased to 357 in 2008 (15% of the total homeless population), with young people aged 26–29 years accounting for a further 277 respondents (12.4% of the total homeless population). These two age groups combined (i.e. those aged 18–29 years) represented just over one quarter (27.4 %) of all homeless adults surveyed in 2008. There is certainly no evidence of a decline in the number of young

people presenting as homeless in either the 18–25 or 26–29-year age groups in recent years and young people account for a significant proportion of the overall population of homeless individuals. Youth homelessness therefore remains a significant problem in the Dublin region. A recent analysis by the Homelessness Oversight Group[5] of trends in adult homelessness in the Dublin region concluded that "little change in the incidence of homelessness seems to have occurred in Dublin in recent years" (Kennedy *et al.*, 2013: 10).

It is critical to note the limitations of current information on and monitoring systems for youth homelessness in Ireland. The available figures are based on those individuals who access or make contact with homeless services and there is currently little or no information available on the number of young people living in unfit housing or under the threat of eviction. Furthermore, practically nothing is known about those young people who share accommodation with relatives or friends, a phenomenon commonly referred to as 'hidden' homelessness (Busch-Geertsema, 2010a). This represents a significant gap in information since research in other jurisdictions strongly suggests that large numbers of young people spend considerable periods 'couch surfing' between relatives and friends both prior to and after they make first contact with services (Pleace *et al.*, 2008; Quilgars *et al.*, 2008; Reeve and Batty, 2011). The phenomenon of 'hidden' homelessness is also relatively well documented in the Irish context (Mayock and O'Sullivan, 2007; Mayock and Sheridan, 2012) but individuals (of all ages) living in these situations are not accounted for in the available information and data collection systems. Furthermore, whilst the available figures in Ireland extend beyond the ETHOS 'roofless' category, in practice, certainly in the case of homeless young people, they are confined to ETHOS 1, 2, 3, and 4 (see Table 1). Official figures are therefore likely to significantly underestimate the number of young people who are homeless or living in unstable, insecure and unsustainable living situations at any given time.

5 When the Government's *Homelessness Policy Statement*, 2013 was published (Department of the Environment, Community and Local Government, 2013) the Minister established a high-level three-person oversight group for the purposes of reviewing the approach being advocated in the Statement, identifying obstacles and proposing solutions. The Oversight Group consists of three individuals from the field of business/industry, public sector and academia; these are: Mark Kennedy (Chair), Sylda Langford and Tony Fahey.

## Explanations for Youth Homelessness

### *Risk Factors for Homelessness*

Risk factors for homelessness among young people have been exhaustively documented in the Irish and international literature. For example, histories of abuse, neglect, as well as multiple forms of family instability are present for most young people who experience homelessness. Indeed, family environment is a major theme in the reasons why young people leave home (Rosenthal *et al.*, 2005) and, while young people may leave home for diverse reasons, their premature home-leaving is frequently couched in family 'crisis' terms. In many cases, homeless young people's significant relationships, in particular those within their immediate family, are characterised by varying levels of conflict as well as experiences of trauma, and/or violence and abuse. Conflict within family environments has been identified as a primary antecedent to premature home-leaving among the young (Mayock and O'Sullivan, 2007; Mayock and Carr, 2008; Mallett *et al.*, 2010). Indeed, Mallet *et al.*'s (2005: 185) Australian study of 302 homeless young people found that family conflict and family breakdown were implicated in all participants' accounts of leaving home.

Familial conflict is typically associated with difficult, fractured and/or hostile relationships between young people and family members (parents, in particular), which may result in young people leaving, or being forced to leave home-based settings at untimely junctures. Importantly, however, family conflict is almost always compounded by various situational and structural factors (for example, mental health problems, substance misuse, experiences of care, poverty, and so on) related to parent(s)/carer(s) and/or children, which can serve to both exacerbate and perpetuate problematic family situations (Mayock and Carr, 2008). Research has also documented, albeit to a lesser extent, the role of step-parent (White and Booth, 1985; Smith *et al.*, 1998) and sibling-based (Bruegel and Smith, 1999) conflict as contributing to young people's departure from the family home.

The type, severity and nature of home-based conflict differ considerably between individual cases and range from on-going disputes and rows to more serious contention with family members or carers, sometimes resulting in violence (Craig *et al.*, 1996; Fitzpatrick, 2000). Abusive family situations—characterised by some level of physical, emotional and/or sexual abuse or neglect—are frequently associated with young people's early transitions to situations of housing instability (Whitebeck and Simons,

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1993; Craig *et al.*, 1996; Ennett *et al.*, 1999; Fitzpatrick, 2000; Gaetz and O'Grady, 2002; MacKenzie and Chamberlain, 2003; Mayock *et al.*, 2007; Mayock and Carr, 2008; Mallett *et al.*, 2010). However, the relationship between youth-specific housing instability and experiences of physical, emotional and/or sexual abuse during childhood has many strands. Mayock and Carr's (2008) Cork-based study illustrates the complexity of the interaction between abusive home situations and young people's housing trajectories. In some instances "a young person may leave home because of an abusive situation while, in other cases, the disclosure and discovery of abuse can lead to family breakdown and the child or young person being taken into care"(Mayock and Carr, 2008: 14).

Substance misuse features strongly in the literature on the role of home-based problems and conflict in young people becoming homeless. Research from several jurisdictions suggests that parental substance misuse is relatively common among homeless youth (Mallett *et al.*, 2005; Ringwalt *et al.*, 1998; Tyler, 2006) and can result in family difficulties, disrupted schooling, and feelings of anxiety, anger and resentment on the part of young people, often because of their parent's(s') inability to provide adequate care (Velleman *et al.*, 2005; Randall and Brown, 2001). For some who feel unable to cope with the stress of parental substance use, leaving home may be accompanied by a sense of relief and, simultaneously, by feelings of grief because of the guilt experienced by young people who leave younger sibling(s) behind (Mallett *et al.*, 2005). Exposure to parental drug and/or alcohol use has also been linked to youth's own use of substances (Stein *et al.*, 2002; Tyler and Schmitz, 2013).

The emergence of 'problem' behaviour among young people (e.g. substance misuse, criminality, aggression) has been found to negatively impact family relationships and can lead to family conflict (Craig *et al.*, 1996; Flemen, 1997; Randall and Brown, 1996; Mayock and O'Sullivan, 2007; Mayock and Carr, 2008). In some cases, parents may evict a young person in an attempt to address, control or manage their children's conduct (Smith *et al.*, 1998) while, in others, a young person may choose to leave in order to rebel and abscond from strict home-based environments. Importantly, some studies have described the family as playing a 'pivotal role' in the aetiology of 'risk' behaviours such as substance use among young people (Kosterman *et al.*, 1995; Brook *et al.*, 1990; Spooner and Vimpani, 2003; Velleman *et al.*, 2005). Thus, research also highlights young people's engagement in these types of behaviours as a direct or indirect response

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to various forms of stress associated with home-based difficulties (Mallett *et al.*, 2005; Mayock and Vekic, 2006). For example, a young person may 'self-medicate' by using alcohol and/or drugs in order to cope with difficult family situations (Mayock and O'Sullivan, 2007). The relationship between turbulent family histories and 'problem' behaviour among young people, which may result in their early home-leaving, is therefore complex, non-linear and 'bi-directional' in that the emergence of 'risk' behaviours may be either the cause or the consequence of disrupted family situations.

The risk of homelessness among young people with histories of State care is well documented in the international literature (Johnson *et al.*, 2010; Mendes and Moslehuddin, 2006; Stein, 2006; Wade and Dixon, 2006). Irish research has also consistently identified a history of institutional care as a key route into homelessness for young people.[6] For example, Kelleher *et al.*'s (2000) national study of young people leaving care in Ireland found that 33% of those leaving Health Board care had experienced homelessness within six months, rising to 66% within two years. Recent research on homeless young people in Ireland continues to highlight the strong association between histories of State care and homelessness (Mayock and O'Sullivan, 2007; Mayock and Carr, 2008; Mayock and Corr, 2013).

Research has gone a long way in identifying an array of 'risks'—whether personal, familial or interpersonal—that create vulnerability to homelessness. This literature also strongly suggests that the possibility of homelessness is greater for young people who experience two or more risks or vulnerabilities in combination. However, it is critically important to recognise the structural drivers of homelessness. Poverty, unemployment, lack of affordable housing, specific problems of access to housing, and low or restricted access to social protection (minimum or insufficient benefits to cover housing and living costs), have been demonstrated to significantly increase the risk of homelessness and housing exclusion (Busch-Geertsema *et al.*, 2010). Homeless young people typically come from impoverished or highly disadvantaged neighbourhoods and grow up in families where financial strain, related to parental unemployment or low income, is ever-present (Bruegel and Smith, 1999; Mayock and O'Sullivan, 2007; Pleace *et al.*, 2008; Quilgars *et al.*, 2008). There is also evidence that many individuals who first experience homelessness as teenagers or young adults have

6 See Mayock and O'Sullivan (2007) for a detailed discussion of Irish research on the relationship between a history of State care and homelessness among young people.

previously experienced housing instability and/or homelessness as children along with their parent(s) (Flatau *et al.*, 2009; Mayock and Sheridan, 2012).

Whilst an emphasis on structural versus individual risk factors dominated earlier debates on the causes of homelessness,[7] research in recent years increasingly takes account of the role of both structural and individual risk factors (Fitzpatrick, 2000). Indeed, the distinction between the two has been gradually replaced with a new interpretation or 'orthodoxy' of the causes of homelessness:

> Structural factors create the conditions within which homelessness will occur; and people with personal problems are more vulnerable to these adverse social and economic trends than others; therefore the high concentration of people with personal problems in the homeless population can be explained by their susceptibility to macro-structural forces, rather than necessitating an individual explanation of homelessness (Fitzpatrick, 2005: 4; see also Fitzpatrick *et al.*, 2009).

This 'new orthodoxy' recognises the role of personal factors but locates them firmly within a structural framework which stresses the significant role of poverty, economic hardship, and social exclusion in the mechanisms that contribute to young people's subsequent home-leaving and homelessness.

### *The Process of Youth Homelessness*

There is growing recognition internationally of the need to view homelessness as a fluid and dynamic process with key transitional phases including routes or journeys into, through, and out of homelessness (Anderson and Tulloch, 2000; Clapham, 2002; 2003). Thus, homelessness is increasingly conceptualised as a process rather than simply as a situation (Clapham, 2003; Fitzpatrick, 1999; 2000). Rather than a one-off event, homelessness is viewed as episodic, characterised by housing instability, and not necessarily resulting in an inevitable downward spiral towards 'chronic' homeless states. Homelessness, it is proposed, can be understood as "an episode or episodes in a person's housing pathway" (Clapham, 2003: 123).

Research seeking to explore the complex dynamics of homelessness

7 Individual explanations for homelessness focus on the personal characteristics and behaviour of individuals while structural explanations locate the causes of homelessness in broader social and economic structures such as high or rising levels of poverty, adverse housing and labour markets, reduced social security protection, and increasing family fragmentation.

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has increasingly drawn on the notion of a homeless or housing 'pathway'. Clapham (2003) describes the pathways conceptualisation as a metaphor rather than a theory, which assists in illuminating the changing relationships that people may have with homelessness and housing over the life span. The notion of a 'pathway' might therefore be viewed as an analytical construct that aids in deciphering particular housing or homeless biographies. Importantly, the pathways approach assumes that homeless and housing pathways are closely connected to other elements of life and lifestyle "such as employment, family maturation and so on" (Clapham, 2003: 123). A strong emphasis is therefore placed on the meanings that people attach to 'homelessness' and 'home' (Tomas and Dittmar, 1995; Watson and Austerberry, 1986), thereby illuminating individuals' perspectives on what it is like to be homeless or housed. The question of how homelessness and housing interact with other processes and experiences is central to the pathways conceptualisation since young people's homeless and housing trajectories are examined alongside other relevant life transitions and events. This enables a perspective on how family, peers, drug use, criminal activity and so on interact with homelessness and housing over time.

It is suggested that homeless pathways also involve transitional stages of identity development, whereby identity is constructed through discourse and social interactions in this sphere (Clapham, 2003; MacKenzie and Chamberlain, 2003). This process of identity formation has been characterised as a 'career' and some studies have used this concept to explore homeless journeys and identities (MacKenzie and Chamberlain, 2003; Snow and Anderson, 1993). In more recent literature, the link between housing/homeless pathways and other key transitions such as movement from education to employment is emphasised (Clapham, 2003; Fitzpatrick, 1999). From a policy perspective, junctions in pathways or key transitions can be viewed as important focal points and as key loci for interventions (Clapham, 2003; MacKenzie and Chamberlain, 2003).

### *Longitudinal Studies and Pathways Out of Homelessness*

Alongside the development of conceptualisations of homelessness underpinned by the notions of fluidity and contingency, researchers have increasingly sought to move beyond cross-sectional research designs which, it is argued, produce "a truncated, decontextualised, and over pathologised picture of the homeless" (Snow *et al.*, 1994: 469). Cross-sectional studies can also exaggerate and therefore misrepresent the severity of homelessness

because they tend to over-represent the long-term or chronically homeless (Busch-Geertsema, 2010b). Emerging longitudinal research on homeless adults in fact demonstrates that the vast majority of individuals who experience homelessness return to stable housing, often relatively quickly. Particularly in North America, the condition of long-term homelessness among adults has been demonstrated to affect a far smaller proportion of individuals relative to those who transition to stable housing (Aubry *et al.*, 2012; Caton *et al.*, 2005; Culhane *et al.*, 2007; McAllister *et al.*, 2010).

Thus, as it has become clear that homelessness is far more likely to be episodic or temporary, researchers are focusing increasingly on the paths or routes taken by individuals out of homelessness. In keeping with recent research on adult homeless populations, possibly one of the most significant findings to emerge from longitudinal studies of homeless youth is that a large number move to stable housing, sometimes relatively quickly (Mallet *et al.*, 2010; Milburn *et al.*, 2007; 2009; Mayock *et al.*, 2011a; Mayock and Corr, 2013). Nonetheless, only a small number of studies have attempted to 'track' homeless young people over time. This is perhaps not surprising given the challenges associated with the conduct of such research. Longitudinal research (whether quantitaitve or qualitative) of 'hard to reach' and transient populations is both costly and challenging (Abrams, 2010; Conover *et al.*, 1997; Taylor, 2009).

In terms of understanding young people's transitions out of homelessness, a number of longitudinal studies have emphasised the importance of early exits, simultaneously highlighting the risks posed to young men, in particular, of becoming trapped in a cycle of hostel use (Mallet *et al.*, 2010; Mayock and Corr, 2013). Several facilitators to exiting homelessness have been identified including: speedy access to stable housing (Mayock and Corr, 2013), disengagement from street peers (Mayock *et al.*, 2011a; Milburn *et al.*, 2009), family, particularly maternal, support (Mallet *et al.*, 2010; Mayock *et al.*, 2011b; 2012; Milburn *et al.*, 2009), re-engagement with education or training (Karabanow, 2008; Milburn *et al.*, 2009), and reducing substance use and/or seeking treatment (Mayock *et al.*, 2011; Mayock and Corr, 2013), although reductions in alcohol and drug consumption tend to coincide with rather than precede access to stable housing (Mayock and Corr, 2012).

In Ireland, a six-year qualitative longitudinal study of 40 homeless young people in Dublin distinguished between dependent and independent exits from homelessness (Mayock *et al.*, 2008, 2011a; Mayock and Corr, 2013).

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Baseline data were collected in 2004–2005 when 40 young people were recruited for participation in the study (Phase 1, n = 40). The study's young people were 'tracked' and re-interviewed for the first time in 2005–2006 (Phase 2, n = 30) and again in 2009–2010 (Phase 3, n = 28). The retention rates at Phases 2 and 3 were 75% and 70%, respectively, and 34 of the 40 participating young people took part in at least one follow-up interview. At Phase 2 of the study, 17 of the 30 young people had exited homelessness, albeit via different routes. A distinction was drawn at this point in the study between those who exited in an independent sense (to the family home or to private rented accommodation) and those categorised as making dependent exits (to transitional housing or State care). Conceptually, this distinction draws attention to the varied housing and non-housing transitions associated with the process of exiting homelessness. Practically all who had transitioned out of homelessness initially via 'dependent' routes subsequently moved to independent living situations (Mayock and Corr, 2013). This finding points to supported or transitional models as a positive 'step' for at least some young people along a path of exiting homelessness and securing and sustaining independent housing.

Longitudinal studies clearly have the ability to unravel the dynamic nature of homelessness as well as the complex interaction between homelessness and housing. The available evidence arising from longitudinal studies of homeless youth points to the crucial importance of speedy access to housing. Positive non-housing transitions—such as engaging in education or training, accessing drug/alcohol treatment, and re-connecting with family—are also important, but it appears that these developments typically accompany, rather than precede, the move to stable living situations.

*The Dynamics of Continued or Unresolved Homelessness among the Young*

As stated earlier, internationally, only a relatively small number of longitudinal studies have attempted to examine the paths followed by young people after they first experience homelessness. However, one common point of agreement between the available studies relates to the temporal effects of homelessness: the longer young people remain homeless, the less likely they are to find sustainable exit routes from homelessness (Chamberlain and MacKenzie, 1994; Hutson and Liddiard, 1994; Mayock and Corr, 2013). Although a large number of young people exit homelessness and secure appropriate housing, there is also evidence of patterns of long-term homelessness among the young (Johnson and Chamberlain, 2008).

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Research has identified a link between patterns of sustained homelessness and substance misuse (Tyler and Johnson, 2006), histories of incarceration (Caton *et al.*, 2005; Dyb, 2009), and poor educational attainment (Shelton *et al.*, 2009). Some researchers have drawn on the concept of 'acculturation', that is, the notion that individuals adapt to homelessness as a 'way of life', to explain the processes associated with prolonged homelessness among the young (Johnson and Chamberlain, 2008), while other studies place a stronger emphasis on the role of structures and services, whilst also acknowledging the possible role of acculturation to street life (Morell-Belai *et al.*, 2000; Snow and Anderson, 1993). A detailed analysis of prolonged homelessness among young people in Dublin found that the process of remaining homeless was set in motion relatively soon after first contact with emergency services designed to meet the needs of 'out of home' teenagers. As the duration of their homelessness progressed, the experience of continually cycling through emergency services was identified as serving a particularly negative function in the sense of reinforcing instability and exposing young people to drug use and criminality. Entry to adult systems of intervention at the age of 18 years emerged as a key transition and a crisis point, "signifying a perceived loss of control on the part of young people as well as a sense of having been abandoned" (Mayock *et al.*, 2013: 456). The authors drew strong attention to a need for a stronger policy focus on homeless young people aged 18–25 years, a point similarly noted by Quilgars *et al.* (2008) in relation to service provision for homeless youth in the UK.

### *Young People, Homelessness and Social Exclusion*

Social exclusion is a well-established concept that has become central to policy and academic discourse throughout Europe. Within homelessness research, social exclusion discourses have the analytic advantage of highlighting the diverse and interconnected problems that homeless young people face. For young people who become homeless, social exclusion is experienced across several domains: in terms of access to shelter and housing, education, employment and health. In most cases the process begins before young people become homeless, but intensifies through their experience of living in insecure settings (Gaetz, 2004). As an outcome of their homelessness, young people are often pushed into circumstances that constrain their ability to adequately ensure their safety and security. In this sense, the trajectory of social exclusion is cumulative in nature, making it

difficult to escape since their constant exposure to risk compromises their health, safety and life chances.

Social exclusion discourses frequently incorporate the notion of youth transitions, focusing in particular on the unpredictable, fractured, and sometimes 'risky' transitions experienced by marginalised young people. In contemporary modern societies, young people's transitions to adulthood in general have lost their linear nature and pathways to adulthood are becoming increasingly complex. Thus, for all young people, the movement into early adulthood, and associated transitional processes, has become extended (Arnett, 2004). Simultaneously, many societies are experiencing increasing divisions between those for whom a legitimate livelihood is achievable and those who become marginalised (Jones, 2002; Smith, 2009; Wyn and White, 1997; Webster *et al.*, 2004). Put differently, there are groups of young people who are disenfranchised from the major institutions and material benefits of society. Research in the UK has identified the decline in youth labour markets, the extension of training and educational provisions, and the reduction in young people's ability to access universal benefit entitlements as factors associated with these extended transitions. The effect is that young people remain dependent on their families for financial, emotional and practical support for longer periods of time (Jones, 2002; Smith, 2009). For marginalised and excluded young people, including homeless youth, the transition to adulthood can be more 'fractured' (Coles and Craig, 1999), complex (MacDonald *et al.*, 2001) and, in some cases, 'chaotic' (Ward *et al.*, 2003). These young people are often not participating in education, training or employment; they have less power to shape their lives, and typically face enormous obstacles in their efforts to move successfully into adulthood (Jones, 2002).

Social exclusion/inclusion is, of course, inseparable from welfare regimes. As Stephens *et al.* (2010: xxvii) stated: "Welfare regimes impact profoundly on the causes and nature of homelessness. Structural homelessness is lowest where welfare safety nets are strong". In recent years, increased attention has been directed to aspects of housing exclusion in housing research and these discussions have focused strongly on processes related to housing affordability and the changing role for states in welfare and housing provision (Edgar *et al.*, 2002; Stephens and Fitzpatrick, 2007; Teller, 2010). According to Stephens *et al.* (2010: xxxvii):

> The general condition of the housing market is a major driver of structural homelessness, and access to mainstream affordable housing for vulnerable

groups is a major concern even in countries with the strongest welfare protection.

The role of housing in transitions to adulthood has been examined by researchers in the UK, who have found young homeless people to be more likely to experience a 'chaotic' pathway to housing characterised by "an absence of planning, substantial constraints (both economic and in relation to housing eligibility) and an absence of family support" (Ford *et al.*, 2002: 2463). In Ireland, as elsewhere, young people's housing transitions are taking place in a very different market compared to a few decades ago. In particular, low housing affordability, which for their parents' generation was relatively unproblematic, means that moving to independent living situations and/or 'stepping' on to the property ladder is out of reach, even for some of the most privileged young people. In this context, the position of disadvantaged youth is inevitably precarious since their chances of forming independent households are likely to be highly constrained.

Shortfalls in affordable housing supply in Ireland have been identified as a major barrier to resolving homelessness (Department of the Environment, Heritage and Local Government, 2008; Kennedy *et al.*, 2013). Social protection is another critical factor. As Busch-Geertsema *et al.* (2010: 49) point out, if benefits are "either not available or not sufficient to cover reasonable housing costs and the costs of living, then the risk of homelessness and housing exclusion is much higher". A recent comparative analysis of reforms within social benefit systems in Denmark and Germany has highlighted policy changes aimed at young people in both countries—which, broadly speaking, have involved reduced benefits and the increased use of sanctions targeting the young unemployed—as "a high-risk strategy when it comes to the risk of homelessness for socially marginalized young people" (Benjaminsen and Busch-Geertsema, 2009: 129). Between 2008 and 2010, the maximum subsidy available to rent supplement claimants was reduced repeatedly in Ireland (Norris, 2014) and social benefits for young people have been substantially reduced in successive budgets.[8]

The interaction of welfare regimes with housing and homelessness is complex and also difficult to assess in a European context because of the lack of comparable data on homelessness. Nonetheless, the available evi-

8 In the last budget, the payment to people aged 18–24 years without children in receipt of Jobseeker's Allowance or Supplementary Welfare Allowance was reduced from €144 to €100 per week (except in the case of existing claimants on a higher rate). Weekly payments to people aged 25 years without children dropped from €188 to €144 per week.

dence suggests that more inclusive welfare regimes have a greater range of protections for those who are 'at risk' of homelessness than regimes with more limited safety nets (Busch-Geertsema *et al.*, 2010). Furthermore, social policies that reduce inequality and provide income and other supports are associated with lower levels of homelessness (Shinn, 2007).

### Homeless Young People and their Families

As outlined briefly in the introduction, this qualitative study is based primarily on the accounts of young people who are currently, or have recently experienced, homelessness or housing instability. However, the study also aimed to incorporate the perspectives of a family member (i.e. a parent, sibling, or other family member) of the participating young people.[9] Homeless young people are frequently treated as 'separate' or alienated from their families, including their parents, siblings, grandparents, and other members of their extended family. These beliefs or assumptions are closely connected to the well-documented role of family difficulties and crises as factors that culminate in young people's premature home-leaving. However, recent research in Ireland and elsewhere has highlighted family contact and support as important facilitators to young people exiting homelessness and to their success in sustaining housing (Mayock *et al.*, 2008; Mayock and Corr, 2013). Thus, it appears that the family members of young people who experience homelessness play a complex role in their lives. Furthermore, although relationships can be difficult or even fraught at various junctures, renewed and improved levels of contact with family appear to be enabling for young people, even in circumstances where a return to the family home is neither possible nor desirable from the perspective of young people (Mayock *et al.*, 2011b). Nonetheless, family relationships remain an under-explored dimension of the lives and experiences of homeless or 'out of home' young people.

#### *The Family: A Socio-cultural Context*

Significant socio-cultural changes in Western developed societies have impacted traditional family structures and the nature of family life in recent decades (for a general overview, see Therborn, 2004). These trends appear to be reflected in the Irish context, where significant shifts in fam-

9 See Chapter 2 (Methodology) for a more detailed account of the rationale for attempting to include the perspectives of family members on young people's homelessness. That chapter also documents the procedures associated with recruiting family members.

ily patterns and household composition have been documented since the 1960s. These changes include an acute decline in family size, a sharp increase in cohabitation, step-families and births outside of marriage, and the rise of marital breakdown (Fahey and Russell, 2001; Lunn *et al.*, 2009; McKeown and Sweeney, 2001). Alongside these changing demographic circumstances, an increasing number of children are expected to live apart from their parent(s) at some point during their childhood. These changes in family structure can take place at an early age, making children more likely to experience multiple transitions between family formations, thereby potentially increasing their vulnerability to family instability during childhood (Hogan *et al.*, 2003).

Research indicates that family dissolution, fluctuation and re-formation can result in various levels of disruption and distress among children and young people as they attempt to negotiate their responses to family change (Acock and Demo, 1994; McKeown and Sweeney, 2001; Hogan *et al.*, 2003). For example, family disruption (e.g. parental death, separation, or divorce) can result in diminished income, poorer school performance, and more limited access to community resources among families (McLanahan and Sandefur, 1994), as well as the potential loss of continuity and stability in routines among young people and/or decreased contact and involvement from parents and/or extended family members (Hogan *et al.*, 2002; 2003). Research also indicates that children in step-parent households are more likely to be exposed to biological-parent and/or step-parent conflict than those in other family types (Hanson *et al.*, 1996). Children in reconstituted or 'blended' families consisting of step-children and/or half-siblings have also been found to be more likely to move out of home at an earlier juncture (White and Booth, 1985) and/or to report feelings of displacement, marginalisation and instability (Mallett *et al.*, 2005). The impact of family change on children and young people is complex, non-linear and may be contingent on various factors occurring in a child's life either prior to, during or following the experience of change in family contexts (Amato, 2000; Kelly and Emery, 2003). This can refer to, for example, the quality of family relationships and level of parent-child contact as well as the presence of marital conflict, parent-child conflict, domestic violence, and parental substance misuse. Young people's experiences of familial change is therefore perhaps better understood as a *process* that varies in complexity and continues over time as family roles, relationships and responsibilities are continually established and re-established (Rodgers and Pryor, 1998).

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Recent years have seen significant developments in sociological discourses on the nature of family and the dynamism of family relationships in light of changing social norms, ideals, expectations and cultural values (Kendrick, 2012). Within these discourses there is strong focus on the way in which children and young people conceptualise family and family relationships in contemporary society (Mason and Tipper, 2008; Davies, 2012; Wilson *et al.*, 2012). Some researchers have highlighted the presence of continuities in family values and the experience of family life despite significant changes in family structure (Ribbens McCarthy *et al.*, 2000; Gross, 2005; Wilson *et al.*, 2012). As such, families are no longer exclusively understood in terms of their composition but rather in terms of the emotional and symbolic significance they engender (Carsten, 2005). Crucial to this contemporary theorising of family life is the study of 'family practices' (Morgan, 1996; 2011)—where 'family' is viewed as a socially constructed concept constituted by various qualities, activities and everyday actions—and 'displaying families' (Finch, 2007), where such actions are made significant by the 'wider system of meanings' in which they are located at any given time. As Finch (2007: 66) explains, "the emphasis is on social actors creatively constituting their own social world, which means that an individual's understanding of 'my family' is subject to change over time and is deeply rooted in individual biographies". In this sense, a young person's conceptualisation of 'family' can be active, responsive and constantly negotiated and re-negotiated over time (Williams, 2004; Morgan, 2011). The importance of developing a framework for understanding families which captures the multi-faceted, diverse and fluid nature of family relationships is therefore highlighted, as is the need to view "children as agentic subjects who participate in family relationships rather than just passively receive them" (Holland and Crowley, 2013: 64).

### *The Role and Significance of Family for 'Out of Home' Young People*

Within the field of child and youth research, family is almost ubiquitously considered to play an important role, whether negative or positive, in shaping young people's lives and their transitions to adulthood (e.g. Harris *et al.*, 2006; Henderson *et al.*, 2007). Increasing importance is being placed on the significance of family histories in providing the necessary context within which young people's early experiences of housing instability is located. This section explores the role of family and family relationships in shaping the lives and experiences of 'out of home' young people. The

family dynamics and processes that can potentially increase young people's vulnerability to housing instability and premature home-leaving have been discussed in detail earlier. This section seeks to problematise the notion that family is typically, or always and ever, fraught or negative for young people who grow up in difficult or strained circumstances and/or leave home prematurely.

Wilson *et al.*'s (2012) study of family practices in difficult circumstances in the UK demonstrates the significance and enduring importance that young people attach to family relationships through their "willingness to maintain, and if necessary rebuild, parental relations in spite of very difficult emotional or practical circumstances" (p. 121). Similarly, Woolett and Marshall's (1996) study of body image among young women in East London found that young women in particular make significant efforts to maintain family ties, even in contexts where familial conflict is present. Other studies have similarly demonstrated the importance of family as providing emotional, practical and financial support to young people, particularly in times of crisis (Mallett *et al.*, 2010) as well as engendering a sense of closeness and belonging throughout young people's lives (Gillies *et al.,* 2001). Research has also highlighted the relevance of young people's relationships and the importance of 'shared biographies' with extended family members and siblings in shaping young people's transitions to adulthood (Holland *et al.*, 2007; Holland and Crowley, 2013).

Young people with childhoods characterised by multiple placements in formal and/or informal care settings may have particularly complex and multi-dimensional concepts of family. For example, Holland and Crowley's (2013: 64) qualitative study of formerly 'looked after' children in the UK found that young people who regularly joined new families or care settings found it "difficult to develop the type of 'intimate knowledge' relationship with others that involves the interweaving of biographies over time". This was particularly the case for those who entered care from a young age as they failed to learn how to 'do' family in their formative years. Others who experienced multiple placement breakdowns perceived themselves as having grown up without any family at all. Importantly, the authors also noted the continual presence of birth parents and families of origin throughout the young people's lives. Although these relationships were dynamic, changing, and continually negotiated at various junctures in the participants' life cycle, they nonetheless continued to have a "powerful co-presence in a child's emotional world" (p. 62). This was particularly

the case for sibling relationships which were found to be "the most positive birth family relationship" among the respondents (p. 63).

A body of work has also focused on young people's understanding of 'family-like' relationships which can have particular importance to young people who have been separated from their families of origin. For example, Kendrick's (2012) exploration of children's experiences of residential care in the UK found that young people "describe their positive experiences in residential care as like being in a family, and refer to care staff using kin terms, such as 'dad' or 'sister'" (p. 77). Similarly, Wilson *et al.*'s (2012) study of young people with experiences of parental substance misuse, found that young people developed family-like relationships with friends, adults and service providers which provided alternative sources of emotional and practical support. Oliver and Cheff's (2012) study of homeless young women in Canada documented participants' ability to form and maintain significant attachments to extended family members, service professionals, and peers "thereby accruing social capital outside of the nuclear family unit" (p. 1). These studies highlight the practical and emotional support that familial and non-familial relationships can offer young people in difficult circumstances. They also demonstrate the symbolic importance of both family and family-like bonds to children and young people, thus blurring the boundary between family and non-kin relationships.

### Young People Negotiating Homelessness: The Role of Family Support

Existing research on youth homelessness has tended to emphasise the role of turbulent family histories and family relationships in precipitating young people's early departures from home. More recently, however, a growing body of research has argued that the interplay between family-level factors and young people's home-leaving is not necessarily 'uni-dimensional'. Rather, "a more complex dynamic is evident whereby families are also significant in enabling young people to exit homelessness" (Mayock *et al.*, 2012: 187). Recent longitudinal research has highlighted the social resources that young people can acquire through their familial networks which can serve to ease their transitions to stable housing. For example, Mallett *et al.*'s (2010) Australian longitudinal study of a sub-group of 40 homeless young people found that those who had maintained positive contact with family members received critical support (particularly with regard to emotional and practical assistance as well as personal encouragement) throughout the duration of their homelessness. The authors note that this 'inter-

dependence' with others provided supportive structures which not only "increased the likelihood of [young people] being accommodated within the wider family in the future" (p. 160) but also increased their capacity to "address and sometimes resolve the issues that lead to them leaving home and, in time, make choices that create positive and sustainable futures for themselves" (p. 161). In the US, Milburn *et al.* (2009) followed a cohort of 183 newly homeless youths over a two-year period and identified maternal social support as having a 'striking' impact on participants' chances of exiting housing instability. This was particularly the case for newly homeless young people who may have been better able to achieve speedy exits from situations of housing insecurity before becoming entrenched in homeless service use (Millburn *et al.*, 2009).

Similarly, Kurtz *et al.*'s (2000) examination of the role of formal and informal support structures among homeless young people in the US reported that, despite volatile family relationships, parents or other family members were nonetheless significant sources of support at critical junctures in the participants' lives, such as during an unplanned pregnancy, periods of depression, or at times when young people had contact with the criminal justice system. The types of familial support documented included: emotional support and encouragement, caring, setting boundaries, requiring accountability from youth, and providing professional intervention and concrete assistance with financial support, housing, schooling, health care and transportation. In the Irish context, a six-year longitudinal study of 40 homeless young people found that those who had exited homelessness were more likely to have maintained, or re-established, regular and positive contact with family members (particularly mothers) and benefited from the increased levels of social, emotional and material support that these relationships provided them (Mayock *et al.*, 2008; Mayock and Corr, 2013). The authors emphasised the importance of supportive family contact with homeless youths, particularly in terms of enabling them to "effect positive change in their lives" and increasing "their ability to cope with new challenges" (Mayock *et al.*, 2011b: 399).

Research has also documented, albeit to a lesser extent, the role of extended family members (particularly grandmothers and aunts) in providing support to young people living out of home. For example, Monfort (2009) interviewed a number of professionals within homeless agencies in the UK, and identified the positive role extended family members can play as mediators between young people and their parents. Mallett *et al.*'s (2010:

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177) study of homeless youth also reported that, in some cases, extended family acted as "surrogates for parents", providing the necessary support to young people in times of crisis. Thus, they found that young people who remained connected with family and/or extended family members typically reported better accommodation outcomes than homeless young people with little to no family contact. Similarly, Oliver and Cheff's (2012) qualitative study of eight homeless young women in Canada found that a number of participants had developed and maintained strong relationships with extended family members throughout the duration of their homelessness. These family members, particularly grandmothers, not only provided temporary housing in times of crisis but also 'unconditional' and 'non-judgemental' caring which engendered feelings of safety, security, understanding and warmth. In sum, they "provided these young women with a sense of support, belonging—and perhaps most elusive: a place to call 'home'" (p. 9). Other research has similarly found that supportive relationships with family members and extended family members, as well as service providers, professionals and peer networks are often essential elements in bolstering young people's ability to exit homelessness (e.g. Fitzpatrick, 2000; Nebbit *et al.*, 2007).

### *Young People, Family and Housing Instability*

Research has shown that disrupted family histories can be associated with high rates of residential change among young people who experience homelessness (Tyler and Schmitz, 2013). Indeed, homeless youths have often experienced multiple living situations during childhood (e.g. home, foster care, residential care, detention facilities, rough sleeping, staying in friend's/extended family members' houses and so on) (Mayock and Vekić, 2006; Tyler and Schmitz, 2013). This transience, which may involve repeated attempts by their parent(s) to establish a home, can be highly disruptive and distressing, both emotionally and physically. The absence of a stable residence—and the security, protection and shelter it provides— is also likely to negatively impact young people's ability to develop and maintain social bonds, positive family relationships and adequate support networks (Collins, 2001; Osgood *et al.*, 2010). Furthermore, a lack of emotional support and family resources among children and young people who experience a myriad of housing transitions may create high levels of vulnerability to housing insecurity in later life (Mayock and Vekić, 2006; Tyler and Schmitz, 2013). In this sense, young people's family histories can

place them on trajectories marked by multiple transitions, residential displacement and social isolation, which increases their risk of homelessness (Tyler and Schmitz, 2013) and may expose them to environments which they are 'ill-equipped' to negotiate (Mayock and O'Sullivan, 2007).

Research also suggests that homeless young people may sometimes have experienced periods of homelessness alongside their parent(s), usually a mother, during childhood. For example, Mayock and Sheridan's (2012) qualitative study on homeless women in Ireland found that a considerable number had spent time in one or more homeless hostels with a parent as children. Periods of family homelessness are typically related to the loss of housing for reasons linked to residential instability, income poverty, low educational levels, poor employability, welfare dependence, and parental substance misuse (Nunez and Fox, 1999). Fleeing situations of domestic violence and abuse has also been identified as a reason for mothers and children presenting to homeless services (Mayock and Sheridan, 2012; Mayock *et al.*, 2012). In more recent years, research has begun to focus on the phenomenon of 'intergenerational homelessness', whereby homelessness is experienced in recurrent generations of the same family. In other words, a 'cycle of homelessness' develops whereby the "experience of homelessness as a child increases the risk of future homelessness and repeated use of homelessness services" (Flatau *et al.*, 2013: 1). However, there is currently a dearth in knowledge about the prevalence and dynamics of intergenerational homelessness both in Ireland and internationally. Flatau *et al.*'s (2013: 1) study of a cohort of 637 Australian adults accessing specialist homeless services found that the rate of intergenerational homelessness among participants was relatively high, with almost half (48.5%) reporting that their parents had also experienced homelessness at some point in their lives. This research also highlighted a strong association between the prevalence of intergenerational homelessness and "high family risk factors in the parental home" such as inter-parental conflict, domestic violence, parental substance misuse, and incarceration (among fathers). The findings further alert us to the impact of childhood experiences of homelessness on young people's wellbeing, development and educational opportunities.

## Responses to Youth Homelessness

### *Responses to 'Youth' (under-18s) Homelesssness*

A detailed account of the legislative and policy frameworks governing responses to youth homelessness in Ireland is provided elsewhere (Mayock and Corr, 2013; Mayock and O'Sullivan, 2007). This section briefly outlines key developments within policy and legislation, focusing in particular on the *Youth Homelessness Strategy*, published by the Department of Health and Children in 2001. As stated earlier, the aims and actions set out in this Strategy were, both in practical and aspirational terms, concerned primarily with young people under the age of 18 years, even if the focus was on 'youth', for which no operational definition was provided. Table 2 summarises the most significant policy and legislative developments related to homeless and 'out of home' young people since the mid-1980s.

Although the first clear articulation by Government of youth homelessness as a distinct problem—separate from adult homelessness—came in the mid-1980s, it was not until the passing of the *Child Care Act, 1991* that specific statutory provision for homeless children in Ireland was legislated for. The Act defined a child as someone up to the age of 18 years and, via Section 5, placed a clear obligation on the Health Boards to provide accommodation for homeless children (O'Sullivan, 1995). Section 45 of the Act, which empowered Health Boards (now the HSE) to provide aftercare support for children in their care, has continued to generate much debate, primarily because the provision for aftercare in the legislation is not mandatory (Kelleher *et al.*, 2000). The weaknesses inherent in the legislation also mean that aftercare provision has lacked coherence and remains inconsistent throughout the country (Doyle *et al.*, 2012). Furthermore, those young people who are accommodated under Section 5 of the *Child Care Act, 1991* do not have a legal entitlement to an aftercare service. While the HSE issued a policy on the use of Section 5 in 2012 (HSE, 2012a: 8), stipulating that "an ongoing support plan should be delivered and implemented for every young person supported under Section 5 on turning eighteen years", these young people are not entitled to an allocated aftercare worker nor can they avail of aftercare financial packages or residential aftercare provision.

The publication in 2012 of *Leaving and Aftercare Services: National Policy and Procedure* (HSE, 2012b: 13) signalled a strong commitment on the part of the HSE to maintain support to care leavers up to the age of 21

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*Table 2: Summary of Key Legislative and Policy Responses to Youth Homelessness in Ireland*

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|---|
| *1985: Publication of* In Partnership with Youth *(Government of Ireland, 1985)*<br>This publication marked the first clear recognition by the State of youth homelessness as an area distinct from adult homelessness and requiring specific attention: "*The Government accept that it is the responsibility of the Health Boards to provide long-term and short-stay accommodation for homeless young people incapable of independent living and in need of special care*" (Government of Ireland, 1985: 34–35). |
| *1991: Child Care Act*<br>Under Section 5 of the *Child Care Act 1991* Health Boards were made statutorily responsible for the provision of suitable accommodation for children up to the age of 18 years who are homeless and in need of care. Section 45 of the Act empowered former Health Boards (renamed Health Service Executive (HSE) areas in 2005) to provide aftercare support for children in their care, stating that the Health Board may assist a person leaving its care up to the age of 21 years or until he or she has completed their education or training. |
| *1992: Establishment of Crisis Intervention Service in Dublin*<br>This service, most commonly referred to as the Out of Hours Service (OHS), which became the initial point of contact for many young people who experience homelessness, operates within a child welfare framework. It is a social work rather than a specific accommodation service, although much of its remit relates to 'out of home' young people. |
| *2001: Publication of the* Youth Homelessness Strategy *(Department of Health and Children)*<br>The *Strategy* provided a framework for tackling youth homelessness on a national level for the first time. The Strategy's stated goal was: "*to reduce and if possible eliminate youth homelessness through preventative strategies and where a child becomes homeless to ensure that he/she benefits from a comprehensive range of services aimed at re-integrating him/her into his/her community as quickly as possible*" (Department of Health and Children, 2001: 9). |
| *2012: Publication of* Leaving and Aftercare Services: National Policy and Procedure *(HSE)*<br>This document signalled a strong commitment to *"delivering and implementing a leaving and aftercare service for young people which is responsive and relevant to each young person's circumstance"* (HSE, 2012: 3). |
| *2013: Publication of the* Review of the Youth Homelessness Strategy *(Denyer et al.), 10 July*<br>Twelve years following the publication of the *Youth Homelessness Strategy,* the first review of the Strategy was launched. |
| *2013: Announcement by the then Minister for Children and Youth Affairs, 6 November*<br>The Minister accounced that the Government had approved a proposal to strengthen the legislative provision for aftercare by amending the *Child Care Act 1991* to provide for a statutory right to an aftercare plan. |
| *2014: Government approved the General Scheme and Heads of the Aftercare Bill 2014*<br>The Bill will mean that, if passed into legislation, the Child and Family Agency will have a statutory obligation to ensure young people leaving State care have an aftercare plan. |

years in accordance with "an adaptable specialist model of leaving care service provision and delivered in partnership with the young person, his/her family, carer, child and family social worker, link worker, and other statutory, community and voluntary agences". Moreover, the approval by Government of the General Scheme and Heads of the Aftercare Bill in February, 2014 was clearly a positive development. Relevant and appropriate amendements to the existing legislation will help to ensure that young people leaving care will have the right to continuity and stability of care and this will undoubtedly bolster their chances of making a successful transition to independence.

Returning to developments within service provision during the 1990s, the establishment of the Crisis Intervention (Out of Hours) Service (OHS) in Dublin in 1992 signalled a significant expansion of the statutory provision of services for homeless children (Mayock and O'Sullivan, 2007). This service was set up to provide children and young people (under the age of 18 years) in crisis with the necessary services when all other services were closed and signalled a clear response to mounting evidence of a significant problem of homelessness among children and young people. In order to access a service, a young person must report to a Garda station and declare him or herself as homeless, at which point the Gardaí make contact with the OHS. A social worker then attends and ascertains whether it is possible for the young person to return home. In cases where this is not possible, the young person is placed in OHS emergency accommodation. The requirement that an 'out of home' young person must present at a Garda station has been repeatedly highlighted as problematic and a change in this policy has been recommended on numerous occasions over the past two decades (Denyer *et al.*, 2013; Forum on Youth Homelessness, 2000; Mayock *et al.*, 2008).

The *Youth Homelessness Strategy*, published by the Department of Health and Children (2001), provided a framework for tackling youth homelessness on a national level for the first time. The Strategy defined homeless young people as:

> Those who are sleeping on the streets or in other places not intended for night-time accommodation or not providing safe protection from the elements or those whose usual night-time residence is a public or private shelter, emergency lodging, B&B or such, providing protection from the elements but lacking the other characteristics of a home and/or intended only for a short stay.

Included in this definition are "young people who look for accommoda-

tion from the Eastern Health Board Out-of-Hours Service" and "those in insecure accommodation with relatives or friends regarded as inappropriate, that is to say where the young person is placed at risk or where he or she is not in a position to remain" (Department of Health and Children, 2001: 11).

The Strategy sets out 12 specific objectives, placing particular emphasis on the prevention of youth homelessness through the provision of support to schools, communities and families. The importance of tackling the problem of children 'at risk' of homelessness in local areas through locally based services was also highlighted. Where youth homelessness occurs, the Strategy stressed the need for prompt, responsive, child-focused services aimed at re-integrating the young person into his or her community as quickly as possible. The Strategy recognised the link between leaving care and the risk of homelessness and set out an aftercare protocol requiring that each Health Board, in collaboration with the local authorities and other relevant statutory and non-statutory agencies, devise a comprehensive strategy for effective aftercare as part of its two-year plan to address youth homelessness.

A review of the *Youth Homelessness Strategy* was published by the Department of Children and Youth Affairs in 2013 (Denyer *et al.*, 2013). Overall, the review concluded that the Strategy had made a significant positive contribution to addressing the problem of youth homelessness. For example, considerable improvements in the accommodation options and services available to support children and young people who experience or are 'at risk' of homelessness were noted and investment in child protection and welfare services, fostering, family support, and youth services was deemed to have had a positive impact on the experiences of children and young people who present as homeless. The authors concluded that the "number of children and young people seeking services due to being homeless or 'at risk' of homelessness had diminished significantly over the course of the Strategy" (Denyer *et al.*, 2013: 3).

While the review highlighted several positive developments it also noted that the effectiveness of the Strategy "was significantly hampered by a poor definition of youth homelessness" (Denyer *et al.*, 2013: 3). The reviewers were also critical of current information systems for monitoring youth homelessness, which they deemed to be inadequate. Deficits in the provision of mental health and disability services for 'out of home' children and young people, as well as for specific groups including Travellers, ethnic

minorities, and lesbian, gay, bi-sexual and transgender (LGBT) youth, were highlighted. In particular, service responses for young people aged 16–18 years were deemed to be inadequate and in need of attention. Finally, the transition between child and adult services was singled out as a particularly problematic area in need of "specific attention" (p. 4). A major conclusion arising from the review was that a new youth homelessness strategy is not currently required; rather, "the problem of homelessness or the risk of homelessness" needs to be addressed "as part of a wider, integrated, and 'whole child' response to need" (Denyer *et al.*, 2013: 2). Thus, whilst recognising that those young people who transition from child to adult homeless services are particularly vulnerable, the review's major emphasis in terms of tackling 'youth homelessness' in the future concentrated on the needs of children (under the age of 18 years) and on ensuring that the needs of this group are properly identified and appropriately met.

*Responses to Adult (including 'Youth') Homelessness*

A detailed account of the development of policies associated with addressing adult homelessness in Ireland is beyond the scope of this report (see O'Sullivan, 2008; 2012). This section documents a number of key policy developments, focusing in particular on the shift away from 'stepped' or 'staircase' models towards 'housing-led' approaches.

The publication of *Homelessness: An Integrated Strategy* in 2000 (Department of Environment and Local Government, 2000) marked a change in Government policy on homelessness—away from the provision of crisis responses—towards the development of a holistic and comprehensive approach to the issue (Mayock and O'Sullivan, 2007: 31). Arguably, for the first time, Irish homelessness policy acknowledged the complex interplay of structural and individual 'factors' at work in the dynamics that lead to homelessness. The following excerpt explicitly refers to the adoption of a "new approach" to ensuring sustainable housing solutions for those who experience homelessness, signalling a shift in the manner in which homelessness would be 'managed' or responded to in the future:

> The basic thrust of the policies outlined in this strategy is that there must be a move away from the limited ways in which services for the homeless have been traditionally planned, funded and provided. Central to this is an understanding that the dynamics of homelessness involve a complex interrelationship of social and economic factors. The issues addressed in the bulk of this strategy relate to a new approach to working towards an objective of ensuring a range of sustainable appropriate housing for individuals and families as well as address-

ing much needed health and welfare needs (Department of Environment and Local Government, 2000: 7).

The Strategy emphasised the importance of developing: 1) a continuum of care from the time an individual becomes homeless; 2) emergency accommodation for short-term use only, with settlement or independent housing being an important immediate goal; 3) long-term supported accommodation for those individuals in need of such accommodation; and 4) support services and preventative strategies for 'at risk' groups.

In early 2002, a *Homeless Preventative Strategy* (Department of Environment and Local Government, 2002) was published, with the key objective of ensuring that "no one is released or discharged from State care without the appropriate measures in place to ensure that they have a suitable place to live with the necessary supports, if needed" (Department of Environment and Local Government, 2002: 3). This Strategy addressed the prevention of homelessness with specific attention to a number of 'at risk' groups, including adult and young offenders, people leaving mental health residential facilities, people leaving acute hospitals, and young people leaving care. The Strategy was significant in that it recognised the vulnerability of specific groups of young people, particularly young people with histories of State care and those leaving institutional settings, including prisons and mental health facilities. However, an independent review of the Government's homelessness strategies published in 2006 (Fitzpatrick Associates, 2006) concluded that only 30% of the objectives in the *Preventative Strategy* had been fully or significantly advanced. This same review determined that 60% of the objectives of the *Integrated Strategy* had been either fully or significantly progressed. A major recommendation arising from the review was that the "Integrated and Preventative Homeless Strategies should be amalgamated and revised" (Fitzpatrick Associates, 2006: 119). Referring specifically to the *Youth Homelessness Strategy*'s relationship to the *Integrated* and *Preventative* Strategies, the review noted that the "three strategies benefited little from being treated in isolation, particularly given the efforts to generate an integrated approach to homelessness" (p. 120). Commenting on the emergence of three strategies (the *Youth*, *Preventative* and *Integrated* strategies), the reviewers emphasised a need for closer integration of actions in the future:

> Although the emergence of distinct strategies is a natural product of areas of statutory responsibility, and of the commitment of other departments and agencies that do not have such statutory duty, attempts should be made to

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closer integrate the actions in the future (Fitzpatrick Associates, 2006: 120).

In 2008, *The Way Home: A Strategy to Address Adult Homelessness in Ireland, 2008–2013* (Department of the Environment, Heritage and Local Government, 2008) was published. This Strategy "accepted the broad thrust of the recommendations of the review of earlier strategies" (O'Sullivan, 2012: 9) and its core objective was to eliminate long-term homelessness and the need for people to sleep rough by 2010. As well as the priority of eliminating rough sleeping and long-term homelessness, the Strategy again emphasised the need to prevent homelessness, ensure more effective service provision for homeless people, and better co-ordinate funding arrangements. Perhaps notably, apart from distinguishing between provision under the *Health Act, 1953*, which imposes a duty on Health Boards to provide assistance to people (adults) who are homeless, and the *Child Care Act, 1991*, which places an obligation on Health Boards to provide for the care, welfare and accommodation of children and young people under 18 years who are homeless, the Strategy did not discuss the specific situations and/or needs of young people aged 18–25 years. In other words, there was no specific acknowledgement that those who transition from child to adult homeless services, or those who become homeless at the point of entry to 'adulthood', may be in need of specific or targeted responses.

While the Strategy placed strong emphasis on better co-ordination of services in order to ensure more effective service provision for individuals who experience homelessness, "[t]he development of a housing-led approach to ending homelessness was implicit rather than explicit in 'The Way Home'" (O'Sullivan, 2012: 2). Subsequently, the *Programme for Government 2011* explicitly outlined a clear committment to implementing a 'Housing First' approach (O'Sullivan, 2012:11) and also promised "to review and update the existing Homeless Strategy, including a specific focus on youth homelessness" (p.15). The following statement is indicative of this committment to a 'Housing First' approach:

> . . . we will alleviate the problem of long term homelessness by introducing a 'Housing First' approach to accommodating homeless people. In this way we will be able to offer homeless people suitable, long term housing in the first instance and radically reduce the use of hostel accommodation and the associated costs for the Exchequer (p. 15).

Although Housing First approaches have been positively evaluated, particularly in the US (see below), it is increasingly recognised that there are inconsistencies in how the model is interpreted and that the *meaning*

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of Housing First—particularly in terms of how it is operationalised on the ground—varies, both across and between jurisdictions, including in the US and Europe (Atherton and McNaughton-Nicholls, 2008; Busch-Geertsema, 2010c; McNaughton-Nicholls and Atherton, 2011; Pleace, 2011; Pleace and Bretherton, 2013a). In 2011, the Jury of the EU Consensus Conference drew a distinction between 'housing-led' and 'Housing First' responses to homelessness and advocated for the use of 'housing-led' terminology (ECCH, 2011: 14):

> Given the history and specificity of the term 'Housing First', the jury follows the Preparatory Committee in using 'housing-led' as a broader, differentiated concept encompassing approaches that aim to provide housing, with support as required, as the initial step in addressing all forms of homelessness. 'Housing-led' thus encompasses the 'Housing First' model as part of a broader group of policy approaches . . .

In 2013, the *Homelessness Policy Statement* issued by the Irish Government (Department of Environment, Community and Local Government, 2013) opted for 'housing-led' rather than 'Housing First' terminology, which it defined in the following terms:

> A housing-led approach is about accessing permanent housing as the primary response to all forms of homelessness. It includes the prevention or loss of existing housing, and it incorporates the provision of adequate support to people in their homes according to their needs. Housing First is one example of a housing-led policy approach (Department of Environment, Community and Local Government, 2013: 3).

The *Homelessness Policy Statement* reiterated the Government's commitment to ending long-term homelessness and the need to sleep rough, an aim to be achieved "by implementing a housing-led approach" (p. 2). The rapid provision of appropriate housing, with support as required, to ensure sustainable tenancies, was proposed as the key solution to ending homelessness. Referring directly to youth homelessness, it asserted that "[t]he approach to tackling all forms of homelessness—child, youth and adult homelessness should be fully integrated" (p. 4). However, the processes and challenges associated with achieving this aim—particularly in light of tackling the bureaucratic (legislative) distinction between 'child' and 'adult'—were not elaborated.

While in Ireland homelessness policy has shifted clearly towards a housing-led approach, "[c]urrent funding remains stubbornly oriented towards providing and extending services for homeless people, rather than

providing sustainable solutions to homelessness" (O'Sullivan, 2012: 6). A significant reconfiguration of homeless services in the Dublin region has been undertaken in an effort to ensure that individuals move out of emergency hostel accommodation to independent housing at the earliest possible juncture. This reconfiguration of services aims to reduce the old hostel/shelter type accommodation, which has been replaced by two forms of accommodation, namely Temporary Emergency Accommodation (TEA) and Supported Temporary Accommodation (STA). Private Emergency Accommodation (PEA) is being phased out as a priority action in favour of a housing-led response to homelessness. Transitional housing, including units specifically targeting young people, have also been phased out.

Following the publication of the *Homelessness Policy Statement* (Department of Environment, Community and Local Government, 2013) the Minister established a high-level three-person oversight group to review the approach being advocated in the Statement and to identify obstacles and propose solutions (see footnote 5). In their first report, published in December 2013, this oversight group concluded that progress in fulfilling the aims of a housing-led approach has been slow. A deficit in the supply of appropriate accommodation for the homeless population, particularly in the Dublin region, was identified as a core obstacle to progress. The co-ordination of various forms of health and social service support was identified as another area of difficulty, particularly "for those homeless who live for long periods in the un-homelike circumstances of temporary accommodation" (Kennedy *et al.*, 2013:4). In other words, the availability of both housing and support services for those who are homeless was deemed to be the main barrier to progressing and implementing a housing-led approach.

### *'Housing First' and 'Housing-led' Approaches: An Overview*

Broadly speaking, Housing First or housing-led models aim to by-pass the transitional phases of staircase approaches which involve progressing individuals through a series of residential services, typically, from emergency hostels to transitional/supportive housing and then towards independent living. Instead, homeless people move directly into permanent, independent tenancies with support. Another key feature of these models is that they do not attempt to 'fix' people to make them 'housing ready'; rather, they are premised on the assumption that the best place to prepare

for independent living is in independent accommodation (Johnsen and Teixeira, 2010: 6). Underpinned by a harm reduction philosophy, the provision of permanent housing is not contingent on abstinence from alcohol or drug use and there is no expectation that users enter treatment for substance use or mental health problems, either prior to or subsequent to attaining housing (Collins *et al.*, 2012; Johnsen and Teixeria, 2010). Support, very often intensive in nature, is provided but motivation to change is not a requirement for gaining access to housing and failure to comply with support services cannot lead to eviction (Busch-Geertsema, 2013). All of this represents a radical departure from 'stepped', 'staircase' or 'linear' housing models, which are founded on a 'treatment first' philosophy and require sobriety and detoxification before enabling access to independent housing (Padgett *et al.*, 2006). Within 'stepped' models, progress along a continuum of care is contingent on evidence of abstinence from substance use and upon 'acceptable' behaviour and compliance with treatment and/ or support programmes (Sahlin, 2005).

The term 'housing-led', according to Pleace and Bretherton (2013a: 29), can describe low intensity services, that mirror Housing First in a broad sense, but which do not provide support services of sufficient intensity, range or duration to be regarded as Housing First. Housing-led services such as these, which provide far lower intensity support, can be found in the US (Hickert and Taylor, 2011; Tabol *et al.*, 2009) and in Europe (Busch-Geertsema, 2005; Lomax and Netto, 2008; Pleace, 2011). Even if Housing First has its critics (see Pleace and Bretherton, 2013a for an overview of the main criticisms of Housing First), there is mounting research evidence pointing to the success and effectiveness of Housing First models. Particularly in the US, where Pathways Housing First[10] has been evaluated for many years, there is strong evidence that the programme has higher rates of housing retention compared to programmes that insist on treatment and sobriety prior to moving to independent housing (Stefanic and Tsemberis, 2007; Tsai *et al.*, 2010). Housing First delivers gains in health and wellbeing and there is also evidence of increases in perceived choice among clients (Edens *et al.*, 2011; Greenwood *et al.*, 2005; Tsemberis *et al.*, 2004). Some studies have demonstrated reduced use of drugs and

10 The Pathways organisation was founded in New York in 1992 by Dr Sam Tsemberis, who argued that 'staircase' models of housing provision were ineffective (Pleace, 2011). He developed the Pathways Housing First (PHF) aproach, which placed chronically homeless people with substance use and mental health problems directly into housing (Tsemberis, 2010).

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alcohol despite a more tolerant harm reduction approach (Padgett *et al.*, 2011), while others have not recorded a significant decrease in substance use or psychiatric symptoms among Housing First clients after a period of one year (Pearson *et al.*, 2009). In the European context, the Housing First Europe project, which involved five test sites (Amsterdam, Budapest, Copenhagen, Glasgow and Lisbon) where the Housing First approach was evaluated, demonstrated the achievement of high retention rates in four of the five projects. A retention rate of over 90% was reported in Amsterdam, Copenhagen and Glasgow while in Lisbon the retention rate was 80% (Busch-Geertsema, 2013). These extraordinarily high rates of retention, according to Busch-Geertsema (2013: 7), demonstrate "that it is possible to house homeless persons even with the most complex need in independent, scattered housing". There is also evidence of success in housing chronically homeless individuals using Housing First approaches in London (Pleace and Bretherton, 2013b) and in Finland (Tainio and Fredriksson, 2009).

### Homelessness Policy in Ireland: A Place for Young People?

The bureaucratic divide between 'child' and 'adult' in Ireland, as in other European countries, arguably renders 'youth' an ambiguous category. In the Irish context, the absence of a clear definition of 'youth' within youth homelessness policy means that young people are effectively treated as adults once they reach the age of 18 years. Within adult homelessness policy, no distinction is drawn between 'young person' and 'adult'.[11] All of this is significant given that, in several European countries, there is growing concern about youth homelessness and an "acknowledgement that responses remain weak", particularly in relation to specialist accommodation for young people who, consequently, have no option but to access adult services and systems (Fitzpatrick and Stephens, 2014: 224). The implication here is that as young people grow into young adults—legally and socially—the services available to them change abruptly. This same issue is raised by Hall and Montgomery (2000: 13), who argue that:

> Where young people in difficult circumstances (the young homeless in Britain, for example) are seen as belonging to a third category—not yet adults but no longer children—public response to their situation can be less than sym-

11 The Homeless Preventative Strategy (Department of Environment and Local Government, 2002) does address the situations of young offenders upon release from places of detention. However, this Strategy explicitly states that its focus "except where otherwise indicated, is on the prevention of adult homelessness" (Department of Environment and Local Government, 2002: 7).

pathetic. Young people thus defined may be seen as troublesome rather than simply in trouble, at fault rather than at risk.

There are also very specific risks of young people 'falling through the gaps' as they near the age of 18 years (Benjaminsen and Busch-Geertsema, 2009; Mayock and Corr, 2013), with those aged 16–18 years arguably in a particularly vulnerable position since they may be regarded as 'low priority' within a childcare system primarily oriented towards younger age groups.

It is perhaps important to note that 'housing-led' policies and approaches—now a central plank of homelessness policy in Ireland—have been discussed and 'tested' primarily in relation to adult homeless populations (*cf.* Busch-Geertsema, 2013; Stefanic and Tsemberis, 2007; Tsai *et al.*, 2010; Tsemberis *et al.*, 2004).

As Gaetz (2014: 7) comments, "the research to support the approach [Housing First] with a youth-based population is not strongly established as of yet". There are in fact very few examples of Housing First programmes specifically targeting youth that have been systematically evaluated. However, the *Infinity Project*, which serves young people aged 16–24 years, and is operated by the Boys and Girls Club of Calgary in Alberta, Canada, has collected data on outcomes since the programme was launched in 2009. The goal of *Infinity* is to enable youth to become permanently housed through a programme that offers "intensive housing support tailored to meet the unique needs of young people" (Scott and Harrison, 2013: 46). In addition to housing (with rent supplements), young people are provided with numerous supports that encourage and facilitate access to education and employment, the development of life skills, and their reconnection with family and other social support systems. Information collected on 48 young people who had been in the programme for a period of one year indicates that 44 (95%) remained housed and that a very high proportion (63% of those over 18 and 87% of those under-18) had stable income, either through employment, alternative funding and education and/or employability programmes (Scott and Harrison, 2013). These outcomes, which demonstrate the programme's success in supporting young people to access and maintain housing are clearly positive.

However, there is no broad consensus, as yet, on the appropriateness of Housing First for all young people. For example, an early assessment of the *Youth Matters in London* (Ontario) project, which aims "to investigate and better understand youth participants' *choices* regarding treatment and service options over a three-year period" (Forchuk *et al.*, 2013: 96, emphasis

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in orginal) argues that Housing First does not work for all young people, particularly for those with mental health and substance use issues. The authors caution that not every young person will be comfortable with the independence that Housing First models provide and argue the need to consider diversity, as well as the individual choices and responses of young people to their situations and perceived needs:

> Considering the diversity of responses and needs of youth in our study it is clear that a "one size fits all" approach to treatment and service provision is not enough. The social, cultural, financial and existential (i.e. the perceived meaning of one's existence and place in the world, as well as how this meaning may influence the decisions one makes) situations of the study's participants are very different" (Forchuk *et al.*, 2013: 106).

Echoing these concerns, Gaetz (2014: 2) suggests that if Housing First is to work for young people, "it must build upon our understanding of the developmental, social and legal needs of young people". While staircase approaches to housing homeless people have been subjected to strong, and in some cases, severe criticism in recent years (e.g. Sahlin, 2005; Hansen Loftstrand, 2010), 'stepped' models may be appropriate for some young people, particularly "for young 16–18 year olds (and sometimes older) young people who often need a supportive environment for a significant period of time before moving to independent living" (Quilgars *et al.*, 2008: 113).

As highlighted earlier, in the Irish context, transitions through supported housing, as part of the process of exiting homelessness (prior to moving to independent living) have been demonstrated to be enabling for at least some young people, in the sense of preparing them for the responsibility of housing (Mayock and Corr, 2013). Equally, there is good reason to claim that Housing First "can be a guiding principle for an organization or community that prioritizes getting young people into housing with supports to follow" (Gaetz, 2014 : 15).

In reality, there has been relatively little discussion or debate, in Ireland or elsewhere, about the practical implications of Housing First for young homeless people who, at the age of 18 years, automatically transfer to adult systems of intervention. Put differently, what 'housing-led' or 'Housing First' means for young people has yet to be fully explored and more fully understood, particularly in the context of stressed housing and rental markets (such as in the Irish context) which present particular challenges to young people and may render them vulnerable to housing instability and homelessness.

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## Conclusion

This chapter has reviewed a large body of literature related to the problem of youth homelessness. The challenges associated with defining 'homelessness' and 'youth', and the policy implications arising from the ways in which both are defined and conceptualised, have been raised. The dominant explanatory frameworks for understanding and explaining homelessness have also been reviewed and much of this discussion has highlighted the merits of longitudinal research because of its ability to capture and understand change over time. Longitudinal perspectives may be particularly important in capturing the less researched issue of the family lives and relationships of homeless young people. Finally, this chapter has reviewed responses to youth homelessness in Ireland and has raised questions about the appropriateness of current responses to young people who experience homelessness or housing instability. This issue will be revisited in the concluding chapter of this report. The following chapter outlines the study's methodological approach, including the procedural and ethical approaches that guided the conduct of the research.

# Chapter 2: Research Methodology

**Introduction**

Over the past decade in particular, longitudinal (Mayock and Corr, 2013; Mayock *et al.*, 2008; Mayock and O'Sullivan, 2007) and cross-sectional (Mayock and Carr, 2008) research in Ireland has contributed to a fuller and more nuanced understanding of youth homelessness. These studies have provided important insights into the processes associated with young people becoming homeless as well as their 'journeys' through and, in some cases, out of homelessness. To a large extent these studies also demonstrate the complexity of the problem we call 'youth homelessness' and draw attention to the multidimensional layers of experience associated with young people becoming, 'being', or remaining homeless, or exiting homelessness. This qualitative study aims to further develop and extend this knowledge base by initiating Phase 1 of a longitudinal study that will track the homeless and housing transitions of 40 homeless young people over time. This chapter introduces the research: it outlines the study aims, research design, and the methods of data collection and analysis. It also discusses several ethical considerations that guided the conduct of the study.

**Research Aims**

This research set out to generate an in-depth understanding of the life experiences of homeless or 'out of home' young people. More specifically, the study aimed to: 1) identify young people's routes or paths out of home; 2) examine their experiences (of accommodation, education/training, daily life, and so on) after leaving home; 3) track young people's interactions with services and systems of intervention over time; and 4) identify facilitators and barriers to housing stability. While the research privileges the accounts of young people who are currently or were recently homeless (as well as a smaller number who are 'at risk' of homelessness), it also aimed to incorporate the views of a family member (e.g. a parent, sibling, other relative, or carer) of the participating young people. The integration of the views and experiences of both young people and their families was seen as having the potential to shed new light on the complex and under-

researched family dynamics that may serve to push young people out of home, as well as those family processes that can facilitate a resolution to their homelessness.

## Research Design

This qualitative study was designed to examine the phenomenon of youth homelessness through the collection of rich narrative data. The research did not aim to generate a representative sample of young people whose experiences are generalisable to the entire homeless youth population and, instead, aimed to recruit a cohort of young people with a varied and illustrative range of experiences of homelessness and housing instability. By exploring the lived experience of homelessness and the meanings young people ascribe to those experiences, an in-depth understanding of the nature of homelessness and how it affects their lives is possible. Qualitative research gives a 'voice' to young people who experience homelessness and also provides insights into the process and context of homelessness that cannot be fully achieved through quantification alone (May, 2000). More generally, qualitative research methods are particularly effective when exploring areas or topics that are under-researched, unexplained, or subject to false assumptions (Smith and Ravenhill, 2004).

### *Inclusion Criteria: Young People*

The term 'homeless' was defined and operationalised to include young people who may have been 'roofless' or sleeping rough, as well as those living in homeless hostels, 'out of home' services for young people, emergency or temporary accommodation types, or in insecure or unfit housing. The study also included a smaller number of young people who were deemed 'at risk' of homelessness as well as a number who had recently experienced homelessness and returned to stable housing. Young people (both male and female) and Irish and non-Irish, living in Dublin and Cork, the geographical areas that consistently record the highest number of homeless youth nationally, were targeted for participation. Criteria for inclusion in the study were that the young person be:
- Currently homeless or living in temporary, insecure, or unfit accommodation;
- 'At risk' of homelessness by virtue of having experienced housing instability or a previous episode of homelessness;
- Aged 14–24 years.

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*Family Member Participation in the Study*

As stated earlier, the study aimed to include the perspectives of a family member of a proportion of the participating young people.[12] Methodologically, there is growing recognition of the value of having access to multiple perspectives on an issue or topic of interest, particularly within 'family' research (Perlesz and Lindsay, 2003; Ribbens McCarthy *et al.*, 2003; Warin *et al.*, 2007). Much of the impetus for the inclusion of family members in the study stemmed from the findings of previous research in Ireland and elsewhere which have highlighted the role of family problems (family conflict, disruption, breakdown etc.) in precipitating young people's premature home-leaving whilst simultaneously emphasising the role of family support in facilitiating an exit from homelessness (Mallet *et al.*, 2010; Mayock and Corr, 2013; Mayock *et al.*, 2008; 2011a; 2012; Milburn *et al.*, 2009). These studies have also drawn attention to the fluid and changing nature of the family relationships of many homeless young people, highlighting ways in which family tension and conflict can be reduced and/or resolved over time. Nonetheless, many gaps in knowledge and understanding of the family relationships of homeless young people remain. Thus, a committment to uncovering a 'more complete' understanding of the family lives and relationships of homeless young people strongly influenced the decision to incorporate an emphasis on multiple perspectives into the research design. Importantly, we did not seek to 'test' or compare the accounts or perspectives of young people and their family members; rather, by including the perspectives of family members, the research sought to produce a more nuanced account of the lives, experiences, and family relationships of homeless young people.

*Sampling Strategy*

The early stages of the recruitment process were guided by purposive sampling techniques (Patton, 1990). However, sampling was emergent in that approaches were developed in response to new information and insights as they surfaced in the field. The sampling strategies utilised centred primarily on the aim of achieving diversity in the sample. For example, we ensured

12 When designing this component of the study it was anticipated that the recruitment of a family member of participating young people would be challenging for a whole host of reasons but particularly since young people frequently leave home because of strained family relationships (Mayock and Carr, 2008; Mayock and O'Sullivan, 2007). The process of recruiting family members is discussed in detail in a later section.

that young people were recruited from a wide range of services in order to avoid over-representation from a service(s) that may be tailored to meet the needs of specific 'groups' of young people. Age and gender were other important considerations. In relation to the former, considerable time and effort were invested in recruiting young people under the age of 18 years and the process of accessing this group was often slow. It is perhaps important to note that this situation did not arise when seeking to recruit young people under 18 years to a longitudinal study in the Dublin region almost a decade earlier (Mayock and O'Sullivan, 2007; Mayock and Vekić, 2006). The challenges associated with recruiting young poeple under the age of 18 years may well reflect a quite significant decline in the numbers accessing the Crisis Intervention Service (see Chapter 1). In relation to gender, more young men than young women were recruited to the study, reflecting the broad gender breakdown of those individuals accessing homeless services.[13]

During later months of the research process 'targeted' sampling (Watters and Biernacki, 1989) was introduced in an effort to engage important 'categories' of homeless or out-of-home young people, including migrant and lesbian, gay, bisexual and transgender (LGBT) youths. Contact was made with migrant- and LGBT-specific services, for example, and professionals within homeless services were consulted in seeking to locate and engage these sub-groups of young people. However, these efforts yielded only a small number of migrant and LGBT youths (see Chapter 3), which suggests that these young people are not accessing homeless services in large numbers. However, it may well be that these sub-groups are particularly 'hidden' and/or reluctant to engage with services. Finally, 'snowball' sampling was used in instances where a study participant indicated that s/he knew another young person who might be interested in participating in the study. In keeping with the iterative and flexible processes of qualitative inquiry, the sampling strategies utilised were responsive and inclusive, and were developed over time in order to capture the heterogeneity of experience that tends to characterise the lives of homeless or 'out of home' young people.

13 Figures extracted from the PASS database for the Dublin region in 2013 indicate that, of the 4,613 persons who accessed emergency accommodation in that year, 71% (3,284) were male and 28% (1,272) were female. For the 18–24 year age range, of a total of 936 indivduals, 574 (61) were male and 362 (39%) were female (personal communication, DRHE).

## The Process of Access and Recruitment

The first phase of gaining access to research participants involved a period of engagement with professionals working in services designed to meet the needs of 'out of home' young people or young people 'at risk' of homelessness. Meetings were arranged with managers and staff members in numerous services, who were provided with a detailed written and verbal account of the research aims, procedures, and protocols. These meetings generated valuable local knowledge and allowed the researchers to explain the nature and purpose of the study. They also permitted the research team to access information (e.g. service user profile in terms of age, gender, ethnicity, and so on) that helped to inform the sampling and recruitment strategies. Once permission was obtained (incrementally) from 'gatekeepers' to use their service(s) as recruitment sites, a five-step recruitment process (outlined in Table 3 below) was followed in line with best practice procedures. Importantly, for those aged under-18 years, the process acknowledged parental responsibilities and also respected young people's decision-making capacities. The recruitment process therefore enabled informed parental, guardian, or social worker consent to be obtained whilst simultaneously allowing young people to retain a pivotal role in all decision-making about their participation in the study.

Data collection was an incremental process and was conducted over an eight-month period between May 2013 and January 2014. In all, 15 services that work either directly or indirectly with young people living 'out of home' or 'at risk' of homelessness in Dublin and Cork were used as recruitment sites. The types of services and interventions accessed were diverse and included: supported temporary accommodation services; Crisis Intervention Services; drop-in centres; education, training and employment services; residential aftercare services; emergency short-term accommodation services; adolescent 'out of home' services; and residential settings for young people 'in crisis'.

### *Engaging Young People*

In order to maximise young people's engagement in the research, the researchers sought to gradually build positive relationships and rapport with prospective participants. Efforts were made to interact with the young people on a regular basis by frequently visiting recruitment sites to meet with the young people in a relaxed and informal environment. Introductions to young people via a trusted adult such as a staff member

*Table 3: Five-step recruitment procedure*

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*Step 1: Meet with young people and inform them about the research*
Site visits were arranged to meet with young people to inform them about the research. These meetings were either formally arranged or transpired organically during periods of fieldwork. Researchers provided, and verbally explained, a detailed information sheet about the study to each young person at this juncture.

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*Step 2: Ascertain whether the young people would like to participate*
Young people were then given the opportunity to consider whether they would like to participate in the research and arrangements were made to contact the young person at a future date.

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*Step 3: Obtain parental/social worker consent for those aged under-18 years*
Arrangements were made to obtain parental and/or social worker consent (where appropriate) for participants aged under-18. Contact was made with the parent and/or social worker either directly by the researchers or by service providers.[*]

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*Step 4: Re-contact young people to confirm participation*
Researchers re-contacted participants to confirm whether they would like to take part. Arrangements were then made to conduct the interview.

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*Step 5: Obtain written consent and conduct the interview*
Written consent was obtained from the young person and the interview was conducted at a time and location of their choice.

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* All of the parents, social workers and carer(s) contacted gave their consent for the young people (aged under-18) to participate in the study.

or key worker were also helpful in gaining young people's trust and in establishing rapport. The process of meeting and engaging with young people varied depending on the types of routines and 'rules' governing the services in question. For example, in some services it was possible for researchers to 'hang around' and engage with young people informally while, in others, appointments were made in advance to attend a service and meet with young people.

In order to strengthen the project's 'identity', a study name and logo were developed in consultation with young people. Prior to the data collection phase, a number of informal discussions were held with young

people at various recruitment sites in order to generate and compile a list of possible names and logo ideas for the project. This list was then taken directly to young people during field visits and they were invited to give their opinions on the various ideas and options. The name 'Saológa', which means 'young lives', was chosen by the young people and assigned to the study. Young people appeared to appreciate the opportunity to participate in the creative process of branding the study and this process also had the advantage of providing them with a sense of ownership over, and enhanced involvement in, the research. The study name and logo were present on all documents (information sheets, consent forms etc.) related to the project.

### Recruitment Challenges

Homeless youth, like other marginalised groups, are acknowledged as being a 'hard to reach' population (Bryant, 2013; Faugier and Sargeant, 1997) and it is perhaps unsurprising that recruitment posed a number of challenges. Organising days/times for interviews with young people was difficult in some cases, often due to the unpredictability and transience of their daily lives. For example, some young people arrived to interview hours late and, in a few cases, under the influence of alcohol or drugs.[14] Others, whilst having previously agreed to participate, failed to turn up on the appointed day due to a personal crisis or an unknown reason, although it was possible to re-schedule these interview in a majority of cases. Interviews were sometimes disrupted by phone calls or cut short because young people had other appointments or commitments and arrangements had to be made to conclude the interview at a later date. It was particularly difficult to arrange interviews with a small number of young people who had no means of contact (mobile phone, email address, home address etc.) and who were either sleeping rough or moving between emergency hostel placements. In these instances, the researchers visited sites where young people were known to 'hang out' in the hope of meeting with them and arranging a suitable time to conduct the interview.

There were also a number of service-specific circumstances that resulted in deferred or delayed access to some recruitment sites. For example, some service providers explained that their service was going through an 'unsettled' or particularly 'chaotic' period at the point of initial contact, although in most cases these services were able to facilitate the research at a later

14 If a young person was visibly intoxicated the interview was postponed to a later time.

stage. Temporary renovations and/or the re-configuration or re-structuring of services also hampered efforts to gain access to some recruitment sites. The absence of childcare facilities in some services also meant that young mothers were either unable to participate in the study due to their parenting responsibilities or had their young children or infants present during the interviews. In these instances, mothers were understandably rushed or became distracted at times during the interview process.

Finally, the process of obtaining various forms of consent was a protracted process in many cases. Obtaining parental and/or social worker consent for young people under the age of 18 years often took several weeks and this was particularly the case when consent forms had to be posted to parents and returned to the research team. Consent also had to be obtained from all young people prior to any contact with a family member and contacting the family member could then take up to several weeks depending on individual circumstances. Additionally, in cases where the participating family member was under the age of 18, consent had to be obtained from a parent or carer before that family member could participate.

### Recruiting Family Members

During the access and recruitment phase of the research, young people were made aware that the researchers were interested in interviewing a family member and the reasons for including a family member in the study were explained in detail to the young people at this juncture. Following the conduct of the life history interview, participants were reminded about this element of the research and were asked whether they would like to nominate a family member who might be willing to participate in the study. It was stressed that this was not a compulsory aspect of the research and that they had the right to decline the request. Young people were also given the option to 'decide at a later stage', which many selected because they wanted to consult with the family member ahead of making this commitment. Once the researchers were given the 'go ahead' by the young person, direct contact was then made with the family member.

A total of 21 young people either gave their consent to allow researchers to contact a family member on the day of the interview or stated that they would like to 'decide at a later stage'. These young people were then asked to nominate a family member of their choice and to provide contact details (e.g. phone number, email address, home address) for the nominated individual (usually a mother or sibling). Within a number of days direct

contact was made with the family members by telephone at which point the researcher explained the study in detail. Family members were invited to ask questions about the research and to suggest a time and location that might suit them to meet for interview. An information sheet about the study, which also outlined the reasons for requesting family member participation, was emailed to all family members well in advance of the interview date.

Of the 21 family members contacted, 10 agreed to take part in the study. The remaining 11 family members were unable or unwilling to participate in the research for various reasons. In six cases, there was no response from the family members despite a number of follow-up phone calls and messages. A further four family members had been contacted directly by the participating young person and declined to participate. Finally, one of the migrant participants was happy for the researchers to contact his family but no family member was resident in Ireland during the data collection phase of the study.

The process of contacting, recruiting and interviewing family members was lengthy and time-consuming and the challenges centred primarily on the negotiations associated with making contact, gaining consent, and finding and arranging a time and place to conduct these interviews. A small number of the young people were not in regular contact with the nominated family member and, in these cases, the researchers were essentially 'cold calling' family members. In these instances, it could take up to three or four weeks to make direct contact with a family member.

Questions might legitimately be asked about the processes involved in the negotiations, agreements and refusals of young people to have a family member interviewed. In 19 cases, young people indicated clearly (at the time of the interview) that they did not want the researchers to contact a family member to request their participation. Many of these young people explained their reasons for this decision and these explanations frequently referenced strained family relationships. In other cases young people explained that the timing was not appropriate or "good" because of a specific family situation such as a parent's illness or a recent family bereavement. A considerable number of others stated that they did not want to 'burden' a parent or other family member by requesting their participation in the research. Thus, the reasons associated with young people's reluctance or refusal to include a family member in the research appear to be multifaceted and complex. Since young people's decision-making on the question of family member participation was respected, it did not seem

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appropriate to probe their perspectives or feelings on this matter in great detail. It is hoped that later phases of this longitudinal study will enable a fuller understanding of young people's views and decision-making on the matter of family member participation and it may well be the case that a number will decide to give their consent to interviewing a family member at a later stage.

Interviews were conducted with a family member of 10 (just over one quarter) of the 40 participating young people, including five mothers and five siblings. Chapter 3 provides a more detailed overview of the profile of family member participants.

## Data Collection Methods

### *Biographical Interviews with Young People*

Following other recent studies of homeless youth in the Irish context (Mayock and O'Sullivan, 2007; Mayock and Carr, 2008), the biographical interview was the core method of data collection. Biographical interviewing has an individual life as its core unit of interest and investigation: through the telling of his or her 'life story', the young person constructs a picture that is anchored in a distinct set of experiences. This telling or recounting of a life history permits the identification of salient patterns and experiences as well as respondents' interpretation of events that are personally significant (Denzin, 1989). Rather than tracing only a young person's housing and homeless history, a biographical approach enables the construction of multiple biographies by simultaneously mapping change in other significant domains of experience (e.g. personal, education, family circumstances). This in turn enables a contextualised account of homelessness and housing instability by capturing experience and change in arenas beyond homelesssness (May, 2000).

All interviews with young people—40 in total, including 25 young men and 15 young women—commenced with an invitation to young people to tell their 'life story'. This request prompted a range of responses, with some young people giving detailed accounts (extending for two or three pages of transcribed interview) and others offering shorter narratives. Once the young person indicated that they had come to the 'end' of her/his life story, several issues were probed during the remainder of the interview. These included: early family environment and family life; family relationships, past and present; education and experience of schooling; substance use; criminal justice contact; contact and interaction with homeless

services; and physical and mental health. During the latter stages of the interview, young people were encouraged to reflect on their situations and on developments and/or events that served an enabling or, alternatively, a disabling function. Young people were also encouraged to talk about the experience of accessing housing and about their future hopes and aspirations. Although guided by an interview schedule, the interviews were free-flowing and allowed young people to elaborate and also deviate from the topic(s) in question. The interview context also encouraged young people to explore areas that were personally significant and to relate their own experiences of 'homelessness' and 'home' (Tomas and Dittmar, 1995). All interviews were audio-recorded and typically lasted for between 60 and 90 minutes, although a smaller number extended for a period of two hours. At the end of each interview, a brief questionnaire was administered to all participants. This instrument was designed to collect demographic data, as well as information on schooling and employment history, current living situation, substance use, and criminal justice contact. All participating young people were given a small token of appreciation in the form of a €20 gift voucher to thank them for their time and co-operation.

### In-depth Interviews with Family Members

The primary strength of in-depth interviewing lies in its ability to elicit intricate narrative accounts and explorations of social processes that can occur over time (Rubin and Babbie, 2009). In-depth interviewing also lends itself to the study of sensitive topics—such as family dynamics and experiences of homelessness—because of its detailed, yet informal orientation (Liamputtong, 2007). Using a flexible approach, the interviews with family members acted as a 'conversation with a purpose' whereby the family members could raise issues in relation to their son, daughter, sister or brother's experience of housing instability that were personally relevant (Bingham and Moore, 1959). This approach also allowed the researchers to depart from the schedule, move between topics smoothly, and respond to unforeseen topics as they emerged during the interview (Robson, 2002).

Family members were encouraged to discuss a number of topics during the interview including: their views on the young person's current living situation; their perspectives on the young person's current needs in relation to housing, education, employment and health/mental health; their level of contact with the young person; and their views of current service provision for 'out of home' young people and their families. They were also asked to reflect on their relationships with the young people (both past and pres-

ent) and to discuss their personal experiences of housing instability (where relevant). Towards the end of the interview participants were invited to discuss their future hopes, concerns and expectations for the young person. A combination of techniques such as probing, clarifying, and follow-up questions was also used, where appropriate, in order to establish a more thorough understanding of the experiences and views of family members. Demographic data were collected from family members at the end of the interview, including information on their age, gender, living situation, and employment status. All interviews were audio-recorded (with the participant's consent) and lasted for between 40 and 60 minutes. In most instances, interviews were conducted in the family member's home, a café, or the researcher's office, although in one case the interview took place in an emergency hostel setting. All participating family members received a €20 gift voucher as a token of appreciation for their time.

## The Study's 'Tracking' Procedures

Retaining participants for follow-up interviews is a crucial component of longitudinal research and strategies aimed at maximising retention during later waves of this research were developed at an early stage. The implementation of tracking procedures was three-fold. First, young people were invited to provide details on where and how they might be contacted in the future. With the young person's consent, information was recorded on one or more of the following: the young person's home address/phone number, mobile phone number, email address, social networking sites, and/or the contact details of a friend(s), social worker, or a family members or carer(s).[15] Participants were also asked to suggest other possible contact routes such as locations or services they frequented on a regular basis. Secondly, additional follow-up information about participants' whereabouts was recorded, where appropriate and possible, subsequent to the conduct of baseline interviews. This was achieved by maintaining regular communication with agency contacts, (re)visiting field sites, and (re)engaging with participants and/or their peers in order to record any more recent information on the participants' living situations. Since the conduct of interviews, participants have been contacted intermittently by email and have received

15 Participants were assured that all contact information recorded is confidential and will be used only for research purposes. Although the young people did not have to provide information on the areas listed above, none declined the request for their contact details. However, many were unable to provide reliable information because of their transience and/or lack of contact with family members.

birthday cards/texts from the research team. Finally, the study has created a presence on social networking sites in the hope that this will bolster our efforts to locate and contact young people in the future. Indeed, many young people indicated that social networking was their preferred means of maintaining contact with the research team (since they often change location, mobile phone number, or cease using email addresses). Following consultation with experts in the field of information technology, a number of precautionary measures have been put in place to ensure the confidentiality and anonymity of the participants. These measures will be adhered to during any future efforts to contact participants using this tracking method.

### Data Analysis

A large volume of data was generated from the conduct of biographical and in-depth interviews and data analysis was a complex, iterative process. First, verbatim transcripts of all interviews were prepared. Following this, a case profile was completed for all of the study's young people and family member participants. In the case of young people, this involved collating detailed information on several critical issues for each 'case' (participant), including information on: their pathways out of home; their accommodation/living places; their relationship and level of contact with family members; their care histories (where relevant); their experiences of education, training and employment; their substance use and mental health. A similar approach to summarising several key dimensions of the data generated from the conduct of interviews with family members was conducted.

A comprehensive coding scheme (comprising 24 coding categories) was devised about halfway through the data collection phase of the study and the interview data were coded incrementally using the qualitative data analysis software package, NVivo. The coding process permitted the organisation of all the relevant data concerning specific issues (e.g. life history narrative, family life and relationships, experiences of 'hidden' homelessness, care history etc.) into one source. While software packages are clearly both useful and beneficial, 'the qualitative analyst nevertheless needs a strong reserve of insight and reflection to tease important patterns out of a body of observations' (Babbie, 2009: 51). This was achieved thorough an in-depth analysis of the data which permitted the identification of important patterns in the narratives alongside the interrogation of key concepts and themes. The data were checked for negative occurrences to

include all experiences and viewpoints (Bryman, 2004) and to seek out evidence that both challenged and extended existing themes and arguments. The questionnaire data were analysed with the use of the Statistical Packages for the Social Sciences (SPSS).

To protect the identity of the participants, each young person and family member was assigned a pseudonym. Throughout the remainder of this report, the interviewees are referred to using these names, followed by the participant's age (e.g. Phoebe, 22). Family members are referred to by a pseudonym and their relationship to the young person is also indicated (e.g. Jessica, mother).

## Ethical Considerations

Ethical approval for the conduct of this study was obtained from the Research Ethics Committee, School of Social Work and Social Policy, Trinity College Dublin. Garda vetting was obtained by the researchers prior to the initiation of the data collection process.

Young people who experience homelessness or housing instability are considered to be vulnerable by virtue of their age and socio-economic status (Ensign, 2003) and a majority will also have experienced some level of trauma in their lives as children and adolescents. Throughout the conduct of the study there was a strong commitment to informing young people about all aspects of the research. As outlined above, communication with young people was open and frank and the purpose and nature of the study were clearly and unambiguously explained. An accessible information sheet was made available to all young people and the contents of this document were explained verbally in great detail. The information sheet was designed with accessibility in mind and contained information on the following: the study aims; what participation involved (duration and content of the interview); confidentiality and anonymity; benefits and risks of participation; and what will 'happen' to their accounts (who will have access to the data and the uses of the data). It also included information on the family member and longitudinal elements of the study.

Young people were encouraged to ask questions—which they frequently did—and they were not required to make decisions about participation on the occasion of the researchers' first meeting with them. Whilst adhering to a strict protocol of informed consent, we were also aware that an overly protective stance in relation to so-called 'vulnerable' youth could have the effect of reducing young people's potential to take part in the research

(Grodin and Glantz, 2004). We were respectful of young people's competencies and decision-making capacities and at no stage did we presume that homeless or 'out of home' young people are a homogeneous group. Our interactions with the young people during the phase of introducing the study were open and responsive and, in some cases, young people talked openly about some aspects of their lives and experiences during this first meeting. We did not discourage young people from talking about their experiences at this juncture but we were also clear that they should take time to consider their participation in the study.

All study participants gave their written consent prior to participating in an interview. They were also made aware that the interview would be audio-recorded and that they could withdraw from the study at any time (even after the interview) without any negative repercussions. The written consent of parents was obtained, where appropriate, for young people under the age of 18 years and, in cases where this was not possible, social worker consent was granted prior to the conduct of interviews. Assurances of confidentiality were given to all participants and the limits of confidentiality were also made explicit prior to the interview and prior to their giving formal, written consent to participate. Young people were also informed that if they disclosed information during interview that indicated that they were at risk of harm or in danger, the researcher had an obligation to inform an appropriate individual. Following recommended practice in the conduct of research with young people (Mahon *et al.*, 1996), it was explained that in the event of such an occurrence, no person would be contacted without prior consultation with the participant. All young people were also given assurances of anonymity. It was explained that they would be assigned a pseudonym and that any possible 'identifiers' (e.g. names of people, places, the name of their home neighbourhood, current place of residence, and so on) would be removed from all narrative excerpts used in the presentation of the research findings.

During the conduct of all interviews steps were also taken to ensure that respondents were heard and listened to in a non-judgmental environment. Participants were allowed to guide the course of the interview and to dictate the pace and flow, thus empowering the young people by encouraging a sense of autonomy and self-determination. Every effort was made to respect the participants' wellbeing due to the personal nature of the interview. For example, the interviews were conducted in a way that ensured that sensitive issues were both introduced and phased out gradually, so that

the participant did not either begin or leave the interview feeling uneasy or upset. Respondents were also made aware that they did not have to answer all questions or discuss specific topics that they did not feel comfortable talking about. Young people were offered the opportunity to take a break or terminate the interview in instances where they appeared uncomfortable and they were also aware that they could contact the researcher after the interview if they had questions or issues that they would like to raise. Following the conduct of all interviews, participants were given a list of available support services that they might wish to contact following the interview, including homeless support services; housing advice and resettlement services; aftercare services; drop-in and food centres; physical, mental and sexual health services; alcohol and drug treatment services; and education and training services.

Our interactions with the family members of young people followed the same principles and protocols: all were informed about the purpose of the research (both verbally and in writing) and they were given time to consider the decision about participation. Confidentiality and anonymity were discussed and all family members gave their written consent to participate prior to the conduct of the interview. Above all else, throughout the data collection phase of the study, individuals' right to privacy was acknowledged and respected, as were their decision-making competencies in relation to their participation in the research.

## Conclusion

As stated at the outset of this chapter, this research aims to further develop and extend knowledge of the phenomenon of youth homelessness in Ireland. A biographical approach was adopted in line with a broader committment to the construction of a biography capable of capturing 'homelessness' in the context of a broader range of life experiences. An important point of departure from earlier studies in Ireland and internationally is the inclusion of the experiences and views of family members. Whilst we were able to interview a family member of only approximately one-quarter of the participating young people, these interviews nonetheless provide important insights and also create the 'space' for a least some family members of homeless young people to express their views, perspectives, and concerns. The chapters to follow privilege the accounts of the young people, supplemented by narrative data from interviews with family members where possible and appropriate. Chapter 3 provides a detailed overview of the sample profile.

# Chapter 3: Sample profile

This chapter's overview of the sample provides an important contextual backdrop to later detailed analyses of young people's experiences of homelessness and housing instability. It includes information on the young people's age; gender; sexual orientation; birthplace and ethnicity; education, training and employment status; and their living situations at the time of interview. Relevant data on a number of key issues to emerge from the biographical narratives are also documented, including young people's histories of State care, parenthood, their family situations, and experiences of family and intergenerational homelessness. The chapter also includes a profile of family member participants, detailing their age, living situations, employment status, and their relationship to the young people in the study.

## The Study's Young People

### Age, Gender and Sexual Orientation

A total of 40 young people—25 young men and 15 young women—were interviewed for the purpose of the study. Thirty-four of these interviews were conducted in Dublin and the remaining six were completed in Cork. The participants were aged between 16 and 24 years at the time of interview and the average age for the sample was 19.9 years. Just under one quarter of the participants (n = 9), all male, were 17 years or younger at the time of interview. Thirty-nine of the study's young people self-identified as heterosexual and one as bisexual. Table 4 provides a more detailed breakdown of the sample by age and gender.

### Birthplace and Ethnicity

The vast majority of the young people (n=35) were of Irish origin, three of whom self-identified as Irish Travellers. A further two young people were born in the UK. Two participants had migrated to Ireland during childhood or adolescence and one of these young people had entered the country as an unaccompanied minor. One young man, who was adopted in Ireland as an infant, stated that he did not know his country of origin.

*Table 4: Age and Gender of Young People*

| Age | Male (n = 25) | Female (n = 15) | Total (n = 40) |
|---|---|---|---|
| 16 years | 3 | 0 | 3 |
| 17 years | 6 | 0 | 6 |
| 18 years | 1 | 2 | 3 |
| 19 years | 2 | 5 | 7 |
| 20 years | 1 | 4 | 5 |
| 21 years | 3 | 0 | 3 |
| 22 years | 4 | 2 | 6 |
| 23 years | 2 | 2 | 4 |
| 24 years | 3 | 0 | 3 |
| *Average Age* | *19.9* | *20.0* | *19.9* |

*Young People's Living Situations at Time of Interview*

At the time of interview, nine young people were staying in under-18s 'out of home' provision, including six in emergency short-term accommodation services and three in a residential care setting for young people 'in crisis'. Almost half of the young people were living in homeless support services targeting young people aged 18–26 years, including supported temporary accommodation (STAs) (n = 16) and temporary emergency accommodation (TEAs) (n = 2). Seven were living in adult homeless accommodation services, including: adult emergency hostel accommodation (n = 6) and adult supported temporary accommodation (n = 1). Other living situations included: semi-independent accommodation (n = 1); B&B accommodation (n = 1); supported lodgings (emergency foster care) (n = 1); and residential aftercare services (n = 3). Finally, one participant was sleeping rough at the time of interview and one had recently entered private rented accommodation following a prolonged period of insecure housing.

*Table 5: Young People's Living Situations at Time of Interview*

| Accommodation Type | Male (n = 25) | Female (n = 15) | Total (n = 40) |
|---|---|---|---|
| Under-18s 'Out of Home' Provision | 9 | 0 | 9 |
| Temporary Emergency Accommodation (TEA) (ages 18–23 years) | 0 | 2 | 2 |
| Supported Temporary Accommodation (STA) (ages 18–25/26 years) | 10 | 6 | 16 |
| Semi-independent Accommodation | 1 | 0 | 1 |
| Residential Aftercare | 0 | 2 | 2 |
| Adult Supported Temporary Accommodation (STA) | 1 | 0 | 1 |
| Adult Emergency Hostel (on a night by night basis) | 2 | 3 | 5 |
| Bed & Breakfast (B&B) Accommodation | 1 | 0 | 1 |
| Rough Sleeping | 1 | 0 | 1 |
| Private Rental Accommodation | 0 | 1 | 1 |
| Supported Lodgings | 0 | 1 | 1 |

Table 5 provides a breakdown of the young people's living situations by gender.

### *Education*

Four young people (all male) were attending a second-level school at the time of interview. These young people were aged 16 (n = 3) or 17 (n = 1) and had either previously completed (n = 2) or were soon to complete (n = 2) their Junior Certificate examinations. A total of 31 young people (more than three-quarters) reported that they had left school prior to completing their second-level schooling. Fifteen of the 31 left before the age of 16 years

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*Table 6: School-leaving Age by Gender*

| Age | Male (n = 20) | Female (n = 11) | Total (n = 36) |
|---|---|---|---|
| 13 years | 3 | 1 | 4 |
| 14 years | 3 | 1 | 4 |
| 15 years | 4 | 3 | 7 |
| 16 years | 8 | 3 | 11 |
| 17+ years | 3 | 7 | 10 |

and would therefore be classified as early school leavers. A further 11 left school at the age of 16 years. Table 6 presents the school-leaving age for the 36 young people not attending school at the time of interview.

Of the 36 young people not attending school, 10 had left school without any formal educational qualifications. Twenty-one young people had progressed to Junior Certificate level before leaving school and five (one male and four females) went on to complete their Leaving Certificate examinations. One young woman was completing a third-level course at the time of interview. Table 7 provides an overview of the educational attainment of the study's young people by gender.

*Table 7: Educational Status and Attainment*

| Educational Attainment at Time of Interview | Male (n = 25) | Female (n = 15) | Total (n = 40) |
|---|---|---|---|
| Currently Attending Secondary School* | 4* | 0 | 4 |
| Junior Certificate Level | 12 | 9 | 21 |
| Leaving Certificate Level | 1 | 4 | 5 |
| No Formal State Examinations Completed | 8 | 2 | 10 |

*Two of these young people had completed their Junior Cert and were hoping to go on to do their Leaving Cert the following year.

Reports of discontinuities in schooling were commonplace and periods of disrupted schooling frequently overlapped with reports of difficult home circumstances (for example, accounts of family bereavement, household instability, parental substance misuse, family conflict, domestic violence, or neglect) and/or reported behavioural problems (including conflict with parents over rule-breaking, staying out late, substance use, and so on). For instance, Alison explained that she left school during fifth year to care for her mother who was terminally ill while Aaron found it difficult to engage in school because of a number of school-based disruptions that he linked to his turbulent home-life.

*"I left school in fifth year because of me ma* [referring to mother's terminal illness]. *I did the Junior but I got to fifth year because she was getting sicker and then, then she collapsed and I was all* [pause] *. . . waiting on her at home. I left school, you know what I mean?"* (Alison, 20).

*"I was losing the head too much because of everything that was going on in my ma's* [referring to mother's problematic substance use and violence in the family home] *and then I got expelled out of school for fighting, teachers and all, I was going mad at teachers, I was just wild."* (Aaron, 16)

While a small number claimed to have liked school and to have had positive or 'workable' relationships with their teachers, others reported 'trouble' at school, as well as periods of suspension and/or exclusion: *"Well I was always in trouble . . . all through primary school, all through secondary school. I kept getting suspended and getting into trouble"* (Colette, 20). These school-based difficulties were often linked to fraught relationships with teachers and/or reports of bullying, aggression and/or violence in school environments.

*"I done me Junior Cert, I done first up to third year and then I got kicked out of school because someone bullied me and I ended up hitting them back so the two of us got expelled. The first time I every picked up* [stood up] *for meself and I got expelled from there and that was it then. I didn't ever go to school after that."* (Gary, 18)

When recounting school-based difficulties a small number of the young people referred to specific mental health conditions (e.g. Attention Deficit Hyperactivity Disorder (ADHD)) which they felt had hampered their ability to cope with the school environment: "*Like I liked school and to actually sit there and concentrate, I could never concentrate in school*" (Aaron, 16). Others reported poor school attendance linked to frequent residential moves and/or care-based disruptions. This often resulted in repeat enrolments in new schools, an experience which also undermined young

[ 60 ]

people's ability to fully engage in education and/or to remain in school: "*I had a hard time focusing on school and stuff. I moved so many times that it was like, I came in like half the year. I never had a good, a good routine . . . So I literally like missed half the year in third year . . . most of secondary school I was in foster care*" (Chloe, 22).

### *Training and Employment*

A total of 25 young people, including four who had no formal educational qualification, were either actively engaged in (n = 12), or had previously completed (n = 13), one or more skills training programmes (e.g. FÁS, Youthreach), trade apprenticeships (e.g. plumbing, painting and decorating), Community Employment Programmes, and/or FETAC accredited courses (between level 3 and 5) at the time of interview. A small number reported that they were currently accessing, or had recently accessed, adult learning services to improve their literacy skills: "*It's basically just to get me up to scratch with so I feel confident because like . . . what if I get asked a question? What if I get asked to read? You know and that's what knocks me*" (Sarah, 23). One young man, aged 22, reported that he had learned to write one year prior to taking part in the study.

Overall, relatively low educational attainment as well as constrained access to alternative education or training programmes were frequently reported. Very often young people found the process of applying to training schemes challenging and many appeared not to be well informed about existing programmes: "*I don't even know what* [training programmes] *are out there really. I don't even know what's available to be honest*" (Michael, 24). Transience, including frequent movement between services, also negatively impacted their ability to access and maintain engagement with training programmes. None of the young people were employed (either full- or part-time) at the time of interview, although many reported that they did have prior, albeit sporadic, work or volunteering experience. However, in most cases, this involved working in low-skilled jobs or casually for friends or family members. At the time of interview, almost all were financially reliant on social welfare payments and/or other State financial assistance, which was sometimes supplemented by financial contributions from friends and/or family members.

*Parenthood*

Six of the young people in the sample were parents (mothers in four cases and fathers in two cases) and one young man was an expectant father. One female participant reported a miscarriage during a period she had spent living in emergency hostel accommodation. The majority had one child (n = 6) and one participant was the mother of two children. None of these young people had contact with their child(ren)'s mother/father at the time of interview. The participants' children ranged in age from 15 months to six years. Two participants (both mothers) were caring for their children at the time of interview: one was living in private rented accommodation with her child (having recently experienced homelessness) and the second was residing in emergency hostel accommodation with her two children. The remaining four parents stated that their child had either been placed in foster care (n = 2) or remained in the care of their ex-partner (n = 2). The experience of parenting in the context of homelessness, as well as the anxieties associated with parent-child separation and issues pertaining to access and visitation rights, are discussed in Chapter 6.

*Intergenerational Homelessness*

Notably, one-quarter of the young people (eight males and two females) reported periods of family homelessness as children.[16] Of these, six had accessed homeless services along with their mothers and sibling(s) and four were with both of their parents and their siblings at the time they accessed homeless services.[17] Many of the young people also reported prolonged situations of housing instability during childhood characterised by periods spent in situations of 'hidden' homelessness when they and their parent(s) and/or siblings stayed temporarily with a family member(s). In four instances, young people stated that they and their families had spent

16 One other young man stated that he suspected he had experienced homelessness with his mother as a child; however, he could not confirm this at the time of interview.

17 Due to the retrospective nature of these participants' accounts of family homelessness, and the young age at which they experienced family homelessness, their accounts of the circumstances surrounding these events and experiences may be affected by the accuracy of their memories and also by their limited knowledge of their parents' lives during childhood. Furthermore, these numbers may underestimate the number of young people with experiences of family homelessness since participants may not have been aware of such experiences at the time of interview.

considerable periods of time living in the home of their grandparents.

These data indicate that intergenerational homelessness was quite common for this sample of young people in that homelessness appeared to be experienced in recurrent generations of the same family. This issue will be examined in greater detail in Chapter 6.

### *Young People's Family Situations*

A large number of the young people described difficult and disrupted childhoods, including experiences of one or more of the following: parental substance misuse and/or mental health problems, domestic violence, family breakdown and/or family conflict, and household instability. Thirteen study participants reported that a parent was deceased (mothers in seven cases and fathers in six cases). One young woman's father was terminally ill at the time of interview. Additionally, four participants reported the death of a sibling or half-sibling. All of these young people described high levels of grief, distress and disruption associated with the loss of a family member(s*): "I went off the head when my ma, when my mother passed away"* (Warren, 23). A small number of young people reported that a parent(s) had left the family home (often expressed as "they disappeared") for periods of time during their childhoods and, in many of these cases, participants went on to explain that they were "reared" by their grandparents. Several young people also described difficulties associated with having a sibling or half-sibling with specific mental health conditions (e.g. ADHD, autism): "*Two of them* [siblings] *are autistic and it was a bit tough being at home, too much stress and anxiety . . . like they're so hard to deal with and like when I did live at home I just remember pulling the hair out'a my head, I just couldn't cope with it*" (Sinéad, 19).

Eight of the young people reported that their parents were living together at the time of interview (in one case, the young person's parents had only recently reunited following a long period of separation). However, a majority stated that their parents had either separated during childhood or had never in fact been married or in a long-term relationship. Many of these young people stated that one or both parents had subsequently established new relationships, sometimes at different junctures and with different partners over time. As a result, a large number of the young people had lived in 'blended', co-habiting, or step-parent families, consisting of at least one non-biological parent/partner as well as numerous half-siblings and/or step-siblings. The complexity of some of the young people's family

situations is illustrated in the following accounts.

> *"I have three brothers and one sister; and I have one brother, he has the same ma and da, my little sister has the same ma and my two little brothers, one of them has the same ma and then one of them has the same da. But the one who has the same da is the image of me but he's going through care and all that now, he's in foster care and all."* (Eric, 21)

> *"There's six different da's . . . I know one and he's been like a father to me because he helped me ma when he got out of prison, you know what I mean. And there's me two sisters, me two sisters have the same da and me and* [brother 1] *have different das and* [brother 2] *and* [brother 3] *have different da's . . . Yeah, you see all my brothers and sisters have other da's, you know what I mean? I never knew me da."* (Kevin, 23)

The quality of relationships between young people and their step-parents (or their parent's live-in partner) and step-siblings varied. While some described these relationships as positive, supportive and family-like, other reports indicated high levels of conflict with, and, in some cases, violence on the part of, a step-parent. Indeed, for a number of respondents, step-parent conflict played a pivotal role in their home-leaving (see Chapter 4).

### *Histories of State care*

A large number of the young people reported experiences of 'out of home' care and many had lengthy and complex care histories. Twenty-six (65%) reported a history of State care, including periods of time spent in one or more of the following care settings: relative foster care, non-relative foster care, residential care settings, under-18s 'out of home' provision, aftercare services, and supported lodgings (emergency foster care). Entry to a care setting was most often preceded by a family crisis or a series of crises related to parental illness, the death of a parent, neglect, or physical and/or sexual abuse. Many in this subgroup had experienced either relative or non-relative foster care, interspersed with temporary stays at home, before returning (in some cases) to the permanent care of their parent(s). A small number of participants experienced permanency in one foster care setting but, for many more, the experience of care was characterised by instability, placement breakdown, and multiple care placements as Sam and Chloe's accounts demonstrate.

> *"Well like I was in foster care all my life like, well until I was about 13 I was in about 20 or 30 different houses, well like . . . and since I was about five or six I was in about 10 or 11 different primary schools. It's hard enough to get used to like, moving around like, I got moved three and four times a year like."* (Sam, 19)

*"I moved into the first home I was in and then they had to, they had to build a house so they had to move into a mobile home so I had to move to a different foster home then and then that broke down somehow, a fight or something, you know, and I think I ran away but then the foster family actually said they didn't want me back. So then they put me in a different foster family where there was about 11 children."* (Chloe, 22)

In many cases, first admission to care settings did not occur until the mid- or late-teenage years and many were initially received into under-18s 'out of home' provision. A small number of the young people were currently residing in aftercare accommodation services while others were availing of community-based aftercare support.

### *Informal Family Care Arrangements*

In addition to those who reported a history of State care, a further eight young people had spent lengthy periods in the care of a family member(s). These arrangements appear to have been negotiated and managed by the families of young people without external agency involvement. Many of these young people had lived for periods of time with grandparents, aunts, uncles, or cousins and a considerable number had moved between the homes of relatives over an extended period of time prior to their first contact with homeless services. Gary's account captures the transience and movement reported by many of these young people.

*"I was living with my ma and then I was living in my brother's and then I was living with my other brother and then I was living in my nanny's and then I was living in my brother's girlfriends, then I was living with all my mates' houses and then I came into* [Out of Hours accommodation] *after being down in supported lodgings for a month in Kildare."* (Gary, 18)

### The Study's Family Member Participants

A total of 10 family members of the participating young people were interviewed; five were mothers and five were sisters. Parents and siblings were aged between 39 and 57 years and 16 and 29 years, respectively. With the exception of one sister (aged 17), all of the siblings interviewed were older than the participating young people.

Three family members (all siblings) were actively engaged in education or study at the time of interview and a further three family members (all parents) were employed on a full-time basis. One family member had recently retired due to illness and one sibling was caring for her child full-time. The remaining two family members were unemployed and not

*Table 8: Living Situations of Family Members*

| Living Situation | Parents (n = 5) | Siblings (n = 5) | Total (n = 10) |
|---|---|---|---|
| Transitional Housing | 0 | 2 | 2 |
| Emergency Hostel | 1 | 0 | 1 |
| RAS* Housing | 1 | 1 | 2 |
| Private Rental Accommodation | 0 | 1 | 1 |
| Owner Occupiers | 3 | 0 | 3 |
| Foster care | 0 | 1 | 1 |

* Rental Accommodation Scheme

participating in education or training at the time of interview. Table 8 details the living situations of the participating family members.

Notably, three family members were homeless at the time of interview: two of the participants' siblings were living in transitional accommodation (one was living with her partner and child) and one parent (whose spouse was deceased) was residing in an emergency hostel. Two family members were living in Rental Accommodation Scheme (RAS) housing. One of these family members was a parent who was living with her partner and two children (one of whom had also recently experienced homelessness) in living conditions they described as insecure, precarious, unfit and overcrowded. A further three parents were owner occupiers. Of these, one was living alone, one was living with her partner and teenage child, and one was living with their spouse and two younger children. Additionally, one family member—a sibling who was living with her fiancé and two children—was residing in private rented accommodation. The youngest participating family member (a sibling, aged 17) was in foster care at the time of interview.

As documented earlier, a very considerable number of young people reported intergenerational homelessness. Of the family members interviewed as part of the study, two (one parent and one sibling) had experienced family homelessness and a further five (one parent and four siblings) reported experiences of 'single' homelessness. The issues of intergenerational and intra-generational homelessness are explored in detail in Chapter 6.

## Conclusion

The young people interviewed for the purposes of this study had diverse life histories and there was great variation in their personal and family circumstances, as well as in their living situations at the time of interview. However, the profile presented in this chapter indicates that a large number had experienced adversity as children, including experiences of bereavement, difficult home environments, periods spent in State care, and family homelessness in a considerable number of cases. Their educational histories also suggest a high level of disruption to their schooling and labour market participation was extremely low for the sample. Practically all had experienced economic hardship, as well as some measure of stress or trauma, as children. The chapters to follow provide a far more detailed account of the lives and experiences of the study's young people.

# Chapter 4: Young people's pathways 'out of home'

## Introduction

This chapter maps the experiences, processes and events associated with young people's first 'out of home' experience. The focus on their paths 'out of home' rather than 'into homelessness' has been strongly influenced by their stories, which suggest a complex pattern of experiences and events associated with their early home-leaving trajectories. During the interview process efforts were made to ascertain the age at which the young people first left home (i.e. the point at which they sought alternative accommodation to their family home). The majority—comprising 12 young men and seven young women—reported that they had left the family home for the first time between the ages of 14 and 16 years. A further 10 young people (six young men and four young women) had their first 'out of home' experience when they were aged between 11 and 13 years. Of the remaining participants, seven (four males and three females) first left home between the ages of 17 and 18 years; two (one male and one female) were aged between eight and 10 years; and two (one male and one female) were 18 years or older. These data suggest that the young people's first 'out of home' experience typically occurred during their early- or mid-teenage years.[18]

Young people did not generally enter the official network of homeless youth through contact with services or agencies following their first or early 'out of home' experiences. Rather, many moved between the homes of family members or friends, often leaving their neighbourhoods for periods before returning, again and again in some cases, to the home of a parent, usually their mothers. A majority entered situations of 'hidden' homelessness, often on multiple occasions, prior to accessing services for the first time. Thus, their pathways 'into' homelessness were non-linear and involved continuous interaction between home and homelessness. Following previous studies (Mayock and Carr, 2008; Mayock and O'Sullivan,

18 These figures refer to the young people's first 'out of home' experience as 'unattached' youths (i.e. where they are not accompanied by a parent or guardian) and do not include experiences of family homelessness that may have occurred earlier in their lives (see Chapter 6).

2007), this analysis is based on the identification of typologies that attempt to capture the events and experiences associated with young people's first and early 'out of home' experiences. This approach led to the identification of four major pathways out of home:

> Pathway 1: Histories of State Care
> Pathway 2: Household Disruption and Family Instability
> Pathway 3: Family Conflict, Family Violence
> Pathway 4: 'Problem' Behaviour and Neighbourhood Stressors

It is important to emphasise that, while each of the four typologies has distinctive features, there were also many shared experiences across the pathways. For example, almost without exception, the young people grew up in poor neighbourhoods and all experienced economic hardship as children. The lives of a majority were marked by traumatic life experiences as well as disruptions and discontinuities that served to undermine their physical and emotional wellbeing and create vulnerabilities to multiple risks. Practically all reported disrupted schooling and most had negative school experiences. Labour market participation was extremely low and few had educational qualifications to enable them to find a path to employment. In other words, a dynamic interaction between structural and indivdiual determinants of homelessness is strongly apparent in the young people's accounts of leaving home.

### Pathway 1: Histories of State Care

Of the 26 young people who reported a history of State care, 14 (nine males and five females) were identified as having taken a care history pathway to homelessness.[19] The young people in this pathway typically entered the care system between the ages of 10 and 15 years (n = 11) while a smaller number entered care as infants (n = 1) or as young children under the age of five years (n = 2). These young people's narratives indicate a range of highly complex events and processes associated with their initial placement in care. All of those included in this pathway had been exposed to multiple childhood adversities prior to their entry to State care, including one or more of the following: experiences of abuse, neglect and/or domestic violence; the impact of a sibling's acute behavioural disorder; and family bereavement (often related to the death of a parent). These experi-

19 Those with a history of State care who are not included in this pathway tended to have spent shorter periods in care. Issues such as family conflict or violence, and 'problem' behaviour dominated their accounts of leaving home.

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ences were often compounded by the insecurity of their care situations, which appeared to exacerbate pre-existing emotional, behavioural, social, and academic problems in many cases. The childhood experiences of these young people frequently mirrored, or were similar to, others in the sample identified as taking alternative pathways out of home. However, what distinguishes young people in this pathway is the impact of the experience of State care on their lives: *"Definitely, it* [State care] *has made me find it, I mean, it's made me find it hard to, it's really affected my life in general. Now, I don't know about the care system"* (Chloe, 22). Aoife identified a direct link between leaving care and becoming homeless.

> *"My ma died and I went into care. I must have been in about 20 different houses and then I was in care for about eight years. I got out of care when I was 18 and I was taken into my sister's for a while and then my sister couldn't have me there anymore so that's how then I became homeless so I'm homeless for the past two years."*
> (Aoife, 19)

Similarly, Sam, who was living in semi-independent accommodation at the time of interview, had embarked on a lengthy period of housing instability following his exit from foster care at the age of 13 years. During this time he reported extensive episodes of 'hidden' homelessness, rough sleeping, and temporary stays in various accommodation types (including B&Bs and supported lodgings).

> *"And I'd say when I was about 13 I got out of foster care, I moved back with my mother for a while and then I came down here* [under-18s 'out of home' provision]. *I was down here for about a year and a half, then I moved out and I was in hostels, B&Bs, homeless places."* (Sam, 19)

The association between histories of State care and the process of becoming homeless has many dimensions and, clearly, not all young people who enter the care system go on to experience homelessness. The following sections examine young people's accounts of their entry to care as well as the experience of placement disruption and breakdown.

### *Entry to Care*

Irespective of age, practically all of the young people (apart from one female participant who was placed directly into a group home) were initially placed in either relative or non-relative foster care. In general, the transition to residential settings such as group homes and high support units followed a series of relative and non-relative foster care placement breakdowns. The circumstances surrounding young people's entry to care

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were diverse, as were young people's perspectives on this transition. For example, some welcomed an escape from home-based difficulties as well as the relative stability they experienced at the point of entering care. Raphael explained that he had entered care voluntarily to avoid ongoing and further violence from his father.

*"I was in contact with a social worker, yeah. They were helping us to get back to the family. So then I made a decision just to stay in care in front of my dad, in front of my sister, I told them, 'I want to stay in care'. So, as I say, that was my decision and I was happy with my decision ."* (Raphael, 22)

Sinéad, who also struggled to cope with her difficult family situation, framed her entry to care at the age of 15 as a choice.

*"I went into foster care when I was 15, it was my own choice. I was living at home with me mam and me three sisters, two of them are autistic and they're nine and seven, it was a bit tough being at home, too much stress and anxiety, em, so I had a fight with me mam one day and just got sick of it and put myself into care."* (Sinéad, 22)

The accounts above signal choice and decision-making on the part of young people. However, they do not reflect the experiences of many more, whose narratives indicate high levels of uncertainty and distress, as well as low levels of support and poor communication from social workers and foster carers, both prior to and during the transition to care. Christopher, who was 16 years old at the time of interview and had entered foster care at the age of four, told how he was led to believe that he was going on "a long holiday" at the point of being placed in care.

*"I just remember the social worker, I remember the social worker was saying, like, 'Are you coming with me?' And I was like, 'Where are we going?' 'You're going on a really long holiday.' I don't know? I suppose I thought I was on a holiday for a while. And then just it never ended really so, I just kind of got used to, you know. They said I'm fostered, you're living here, that was it."* (Christopher, 16)

The point of entering care was similarly distressing for Sam, who appeared not to fully understand what was happening at this juncture.

*"Yeah like just they didn't explain it properly like, you know. I was told things like but, you know, I was told by my foster parents that my mother and father were never, I was never going to see them again and that they didn't want me, you know, all that stuff."* (Sam, 19)

A majority of accounts are suggestive of high levels of anxiety on the part of young people, coupled with a lack of understanding about the present and the future, at the time they were placed in care. The experience

of entering care is stressful for all children and this transition is likely to present further and more intense difficulties for those who have a poor or inadequate understanding of this significant life event.

*Placement Disruptions and Breakdowns*

There is widespread consensus about the unsettling consequences of placement disruptions for children in 'out of home' care (Unrau *et al.*, 2008). Multiple placement disruptions have been found to exacerbate existing 'problem' behaviours in children and to lead to behavioural problems in children who did not previously exhibit these behaviours (Rubin *et al.*, 2007). Several of the young people reported that they had experienced unplanned and sudden terminations of foster or other care placements. It also appeared that these disruptions were sometimes unrelated to their problems and difficulties at the point of entry to care. This, in turn, had a significant impact on their wellbeing and also affected their views on these placements.

*"Yeah, he* [social worker] *just came and said it like and it was never like, they never gave me a reason why I was getting moved out of all these places. I was never any trouble to any of them like. It was just literally turn up at the door, 'Oh, you are home', because they were short of placements."* (Aoife, 19)

In other accounts, young people acknowledged that their behaviour, which often resulted in conflict with their carers, was a factor in the breakdown of a placement(s).

*"And then they* [staff in residential home] *couldn't handle me in there either, so just, just was wild then, just everywhere I've been, like I've been always getting thrown out."* (Warren, 23)

*"I had to move to a different foster home then and then that broke down somehow, a fight or something, you know and I think I ran away but then the foster family actually said they didn't want me back. So then they put me in a different foster family where there was about 11 children."* (Chloe, 22)

Irrespective of the circumstances surrounding a placement breakdown, the instability and unpredictability of their placements affected young people's ability to maintain previous routines, which impacted their participation in education and extra-curricular activities.

*"Yeah, I was in school, like secondary school. I enjoyed school, was good at school, just couldn't concentrate as I had to move to different places with care."* (Raphael, 22)

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*"I used to do dancing for nine years I gave up there three and a half years ago . . . It was just over being in care and not having the money and stuff. Like I used to hate asking for the money and stuff so I just gave up like and I just gave up camogie and everything."* (Sinéad, 19)

As stated earlier, a majority of participants entered care for reasons related to family adversity and/or conflict. However, a smaller number were placed in care because of difficulties related to their behaviour (e.g. due to ongoing school truancy, conflict with adult authority figures, and so on). For at least some of these young people, the breakdown of one or more care placements appeared to be related to these same behavioural patterns. Young people acknowledged that their behaviour was, at times, a significant barrier to their establishing secure, stable placements, while several also identified these placements as poorly equipped to positively address their difficulties and needs.

*"I ended up getting thrown out of* [residential unit] *at the age of 12 ½, nearly 13, it was for burning one of the staff's motorbikes. You know, we just all went on a bad one, didn't want to stay there. Then I went into the Out of Hours."* (Warren, 23)

*"I was like taking drugs and smoking weed and like taking pills and doing all that kind of thing, like I wasn't, I wasn't like kept under wraps at all, like no one actually, no one cared much, it was always just, 'Oh, we have a foster child, we're getting our money and she can do what she wants'. So it was always a bit like that, then I stayed there for two years and then I think just at the end it broke down and I moved to another family."* (Chloe, 22)

A number did report stability in their care placements after they made the transition from foster to a residential care setting, often following a sequence of foster care terminations. For example, Chloe and Rayan highlighted a consistent approach in residential care, combined with an understanding of their needs, as offering a relatively stable environment from which they could begin to accept and avail of support.

*"I think I actually got the best help ever, like with everything and they got to know me and understood me and, you know, understood why I was being rebellious when I was being rebellious or they understood how I felt about certain things, they just really helped me like, like, in every way, and like, just grew up a lot since I moved up here when I was 17."* (Chloe, 22)

*"Well, I believe that everything happens for a reason, so I don't . . . like, I dunno . . . maybe it was good though 'cause, well I look at it, it was probably good for me to come into care 'cause I wouldn't have got back into school or anything like that."* (Rayan, 16)

*Exiting Care*

There is mounting evidence that specialist leaving care services can assist young people as they make the transition from care to independence (Cook, 1994; Reilly, 2003; Wade and Dixon, 2006). However, the accounts of a large number of the young people interviewed strongly suggest that their exits from care were unplanned and sometimes unexpected. These abrupt endings invariably resulted in young people feeling distressed, abandoned, and with unidentified support needs. Craig told that he was "kicked out" of his residential care placement because of his drug use at the age of 17 years, at which point he entered into situations of 'hidden' homelessness: *"I was told I had to leave* [residential care unit] *and I suppose I've been homeless since, since I was 17 really"* (Craig, 22). Craig acknowledged the role of his drug use in the breakdown of his care placement and his subsequent entry to homelessness.

> *"Looking back on it all* [time in care] *now I'd love to go back, you know. And not fuck up and make all the mistakes I did because if I hadn't of went near the gear* [heroin]*, you know, they would have helped me get a proper place."* (Craig, 22)

Equally, however, he felt let down by the care system: *"I was just basically thrown out onto the street, just at the age of 17."* Patrick had also exited his last care placement in crisis and with limited knowledge of available support services.

> *"I was just lost I was, I didn't know what to do."*
> Q. *"How did you find out about* [homeless service] *actually?"*
> A. *"Family support worker told me."*
> Q. *"Ok so you were linking in with her still?"*
> A. *"Yeah, and she just gave me a letter to say I can't go into hostels 'cause I don't take drugs at all like, I've never touched a drug and she didn't want me really in with all people takin' drugs and all that kinda stuff and then just decided that this would be the best one so like I got this* [supported temporary accommodation]*."*
> (Patrick, 20)

In contrast to stories like those recounted by Craig and Patrick, Warren had a positive experience in his last residential care placement, although he had previously experienced several care disruptions. However, he identified the termination of this placement at the age of 18 years as a critical life event because he had no option but to access adult homeless hostels. He identified his transition to adult services as a significant factor in his initiation to 'heavy end' drug use.

*"Yeah I loved it I did* [residential care setting]*, I done the room up and all and left then, whatever, fucked my life when it was up, because then to over-18s* [services] *. . . Then I had to start staying in hostels. Hitting drugs like, do you know what I mean in* [adult emergency hostel]*. Yeah, I got strung out in there."* (Warren, 23)

Although fewer in number, there were accounts of consistent and planned aftercare provision and all who received this kind of support acknowledged the positive role of these services in assisting them to live independently and to access broader community-based supports.

*"She* [aftercare worker] *is really nice; she helps me with everything like with my appointments or like if you had to get your medical card, the same thing like with key workers down here* [temporary emergency accommodation]*, like I have* [key-worker] *as well. She'd follow up  like—have you got your birth cert, like everything, your labour, a place to stay and just like kind of with your life in general like."* (Aoife, 19)

Most of the young people in this pathway lacked the necessary safety net of personal, professional, and community supports to ensure a successful transition from care to independence. Their narratives also indicate that many faced additional serious obstacles to independent living, including the legacy of placement instability, suggesting that they had high support needs at the point of leaving care. It is worth noting that a large number of the young people with histories of State care also reported a range of mental health problems and depressive symptoms which were interwoven within their narratives of care. These issues will be examined in further detail in Chapter 5.

### Pathway 2: Family Disruption and Household Instability

Nine young people, including five young men and four young women, reported a range of tensions and difficulties in their homes as children. Significant life events—including parental separation, bereavement, and disruption related to frequent moves between living situations—featured prominently in the accounts of a large number. Many also reported involvement in substance use and, in fewer cases, criminal activity during their teenage years. While each young person related very different family circumstances, relationships and dynamics, it was nonetheless possible to identify a number of distinct patterns and themes associated with their premature home leaving. It is important to emphasise that, in many cases, there was strong overlap and interaction between two or more of the experiences documented below.

*Parental Separation and Family Bereavement*

Six of the nine young people stated that their parents had separated, either in early or middle childhood (five young people) or during adolescence (one young person). The experience of parental separation was usually recounted by young people early in the interview, very often as part of the life story narrative, and was always depicted as a difficult experience: "*Yeah well my ma and da split when I was 14 and they were with each other for years like. I took it very hard, I did*" (Sophie, 20). Sophie went on to explain the impact of her parents' separation.

> "*My ma and da split up, that's when it was* [pause] *. . . and then I started taking drugs and all and then I didn't know what was going on. And I was seeing a psychiatrist so that's how I didn't go back to school after.*" (Sophie, 20)

Eoghan described his parents' separation as setting in motion a complex sequence of events that culminated in family homelessness. He initially lived with his mother and was later removed from his mother's care following social work intervention and lived with his father for a period: "*I was only young at the time, I didn't know what was going on, I didn't understand*" (Eoghan, 17). His parents re-united when he was five years old and, as a family, they subsequently embarked on a period of movement between B&B accommodation and emergency homeless services.

> "*Ma and da got back together and then I was just living in B&Bs all around town . . . That was dog rough, just living in B&Bs, like all different places all the time, living in hostels. Moving from place to place.*" (Eoghan, 17)

Eoghan's parents separated again when he was 11 years old and he then lived with his father in long-term accommodation provided by a voluntary agency. He left this accommodation at the age of 15 years due to his father's inability to provide adequate care and subsequently accessed homeless accommodation targeting the under-18s.

In addition to reports of upheaval and disruption arising from parental separation, several young people reported bereavement-related stress and trauma. Five young people had experienced a bereavement in their immediate families: the death of a sibling during their teenage years in three cases, the death of a mother and father in two cases, respectively, and the death of an adoptive father in the case of one young man. The loss of a parent or sibling was always depicted as a traumatic life event and was often an experience that marked a significant 'turning point' in their lives. Alison linked her homelessness directly to the death of her mother when

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she was 18 years old. In the account below, she explains that she lived in situations of 'hidden' homelessness for many months prior to accessing homeless or other support services.

*"Like the reason I am homeless is because of me, me mother passed away and me family home got boarded up, so I literally had to become homeless . . . See after me ma died me head kind of* [pause] *. . . I went blank, I couldn't even remember like anything, I was just* [pause] *. . . I stayed in me friend's house for three months, stayed with me da for two months, went back to me friend's house for another three months . . . I was only 18 so I didn't think she* [mother] *was going to die, like I always thought in my head that she was going nowhere."* (Alison, 20)

A number of young people identified the death of a parent or sibling as precipitating specific patterns of negative and sometimes destructive behaviours. For example, Michael identified his adoptive father's death when he was 10 years old as leading to problems at school, as well as substance use, while Rebecca told that she resumed a problematic pattern of alcohol consumption after her brother's sudden death when she was 17 years old.

*"That's* [after father's death] *when I started having problems in school and that is when I started drinking and using drugs . . . I don't know, they think that's when I just got a bit of a chip on my shoulder, you know. I thought it was me against the world or something like that."* (Michael, 24)

*"Then I started drinking again after my brother died. I went out with my sister when she* [baby] *was 12 days old and I started drinking . . . and then I started drinking twice a week, and then three times a week, and then I started taking cocaine again."* (Rebecca, 18)

Several participants also talked about the struggles of a parent, often their mothers, to cope with stressful life circumstances and events such as the death of a child and/or partner.

*"She* [mother] *lost her child and all . . . can't cope. She can't cope herself. She has to look after another child with* [a serious illness]. *That's what she has to look after."* (Gary, 18)

These young people appeared to have very limited access to supports that might help them to cope with stressful life events such as parental separation or bereavement and their accounts signal struggles in coming to terms with the emotional and physical upheavals (e.g. having to move house and location) associated with these experiences.

*Disruptions: Transience and Frequent Moves between Living Situations*

Reports of frequent moves between various living situations during childhood and adolescence were commonplace and this pattern sometimes emerged subsequent to the experience of parental separation. Gary, whose parents separated when he was seven years old, explained: "*I moved up to me ma's when I was seven and I moved back down to me da's when I was 13*" (Gary, 18). Following a period of less than one year, Gary returned to live with his mother at the age of 14 but subsequently returned to his father's care. A short time later he first experienced homelessness.

> "*From there I ended up homeless and then I ended up getting back into me da's again and then I was homeless a couple of months ago and I was living on the streets for another three weeks.*" (Gary, 18)

In addition to the disruption of re-location and/or the stress associated with moving back and forth between the homes of separated parents, a number of young people were cared for by other family members, most often a grandparent(s), for either short or more protracted periods: "*I was always in me nanny's and granddad's all the time. It's where I grew up like. The first thing I can remember is living in me nanny's*" (Peter, 22). Like Peter, Alan also lived with a grandparent for a considerable period of time. Up to the age of five, he lived with his parents in a city-centre locality until they separated and he and his mother then moved to a suburban location where they lived with his grandmother. His mother subsequently left the home and he continued to live with his grandmother in that same area. Alan had also stayed in the home of his father for periods, where he had difficulty abiding to household rules and expectations: "*He's* [father] *just a bit strict. He doesn't let me go out with my friends. That's why I kind of left*" (Alan, 17). At the age of 16, he embarked on a pattern of leaving home and staying with friends. The following account describes his pattern of movement between living situations prior to accessing Out of Hours accommodation at the age of 17.

> "[I lived in] *town* [city centre] *with me ma and da,* [suburban area] *with me ma and nana and then with nana in her house . . . Then town with me mate and then fucking* [under-18s 'out of home' provision] *and then* [another under-18s 'out of home' provision]. *And then to my dad's and then just back here* [under-18s service]." (Alan, 17)

Alan's constant movement between living situations appeared to be strongly related to conflict with his mother arising from a pattern of 'difficult' behaviour that emerged from late childhood. He told how he had

become aggressive and difficult to manage and was unable to identify a trigger for this behaviour change.

> *"I don't know* [why]. *I just started taking drugs and going on mad ones and bleeding coming back to the gaff* [house] *and my ma was annoying me so I ended up breaking up the house because she would start a fight and wouldn't leave me alone so I would break up the house and then she would call the Guards and I would get fucked out over it."* (Alan, 17)

Similarly, Michael, whose adoptive father died when he was 10 years old, described a difficult relationship with his adoptive mother during his teenage years and accepted that his own behaviour contributed to home-based tension and conflict: "*Like I wouldn't have been easy to live with, you know*" (Michael, 24). Michael went on to explain that the level of conflict with his adoptive mother escalated during his early- to mid-teenage years, at which point he started to leave home and stay with friends. Over a period of two years or more he moved constantly between his own home and the homes of friends and, during this time, there were ongoing interventions on the part of child welfare and law enforcement agencies. His returns home during this period appear to have been motivated by a desire to avoid the care system.

> *"I was 16 or something, 17 maybe . . . there'd be just killings in the house . . . would leave my adopted mam's house and I'd stay with a mate for a few months or it could be a few weeks. At that stage the Guards would be getting involved and social services and what not. Things would just get too complicated so I'd say, 'Right, I'll go back* [home] *just to solve all them problems.' I didn't want to go back but it was either that or going into care. So I'd go back to the house and then there'd be fighting again so I'd move back out and that's just how it went for them couple of years."* (Michael, 24)

Schooling was invariably disrupted as successive moves necessitated enrolment in a new school or, alternatively, meant that they had to commute considerable distances in order to maintain continuity of education: "*I have moved school really loads since I was small . . . Since I was small I was in like bleedin' six schools or something*" (Alan, 17). Practically all of these young people missed out on significant periods of schooling because of their transience. Rebecca, who is a Traveller, explained that her family's movements meant that her school attendance was both irregular and unpredictible.

> *"Well I was in primary school like but we used to travel around a lot like, do you know, in our caravan so I missed about five years of school I'd say . . . So if I added all the time up, like I'd go about four weeks in a year like . . . And then when I hit*

*secondary school, I went about four months in first year and then I went about three weeks in second year and I got thrown out for slapping the principal. So that was the end of my schooling then."* (Rebecca, 18)

Irrespective of the source(s) of home-based conflict, many of these young people found themselves moving in and out of what were temporary living situations, even if they lived with a parent or another family member (most often a grandparent) over a period of many years. These frequent moves between living situations were associated with interruptions of various kinds, including 'gaps' and disruptions to their relationships with peers and family members.

> *"Travelling all the time like. All the travelling from place to place, like all the time. Not seeing your other family and all like, cousins and all, you know . . . like I didn't get to see half of me family really. It wasn't the best like, you know."* (Eoghan, 17)

### Negative Coping Strategies

Practically all of the young people categorised as taking this pathway out of home had experienced one or a series of negative or traumatic events during childhood and adolescence. Young people's substance use initiation often coincided with or followed a series of significant upheavals in their lives. While their stories varied, these experiences appeared to 'push' them towards environments and behaviours which in turn jeopardised their housing situations. Gary identified his parents' separation as a particularly difficult life event which precipitated a pattern of negative behaviours: "*Ever since me real ma and da broke up it just broke me heart and I just went off the rails from there*" (Gary, 18). His move to a different neighbourhood during his early teenage years as a result of family breakdown marked the onset of 'trouble' related to his drug use and drug dealing activity from the age of 13 years: "*When I went to me ma's* [in a different suburban locality] *I got a bit in with drugs and then just went downhill . . . at 13 I just started selling drugs*" (Gary, 18). Gary's home soon became a target within the local community and, at that point, he moved in with his father in another surburban locality.

> *"I couldn't stay because two days later people were banging down the door and all . . . That was me ma's down to me da's and the reason for that was people were calling me a rat and trying to burn my house out."* (Gary, 18)

Gary's living situation with his father broke down, again because of conflict arising from his drug use and related activity, and he experienced homelessness for the first time at the age of 18 years: "*Yeah, and then I got*

*kicked out of me da's and then I was living on the streets*" (Gary, 18). Many other accounts of becoming involved in regular or heavy patterns of drug and/or alcohol use suggest that young people were using substances as a coping mechanism.

> "*I was staying out all the time and I was taking Es* [Ecstasy]*, I was smoking hash and all, I was blocking everything out, I didn't want to know anything like.*" (Sophie, 20)

> "*So I remember the first time taking it* [heroin]. *I was thinking, 'Jaysus, this is great, this is gonna fix all me problems in me head', and I just went blank. All the madness was gone out of me head. That was great.*" (Michael, 24)

The young people's accounts indicate that their involvement in drug use and/or other 'risk' behaviour may well have 'triggered' their premature home-leaving. However, it appears that these behaviours were typically a response to a host of family disruptions accompanied, in a majority of cases, by one or more traumatic life experiences during childhood.

### Pathway 3: Family Conflict, Family Violence

For the nine young people in this pathway—including six young women and three young men—family-level problems arising from difficult, fraught, and often volatile home situations were central to their accounts of leaving home. There are some similarites between the experiences documented here and those recounted by the young people in Pathway 2; however, these young people typically described family situations characterised by quite severe levels of conflict associated, in most cases, with experiences of neglect, abuse and/or violence in their homes. The absence of a parent and/or parental substance use also featured prominently in many accounts and the processes associated with young people's home-leaving were distinctive. As this analysis reveals, reports of difficult home situations had many dimensions and young people were sometimes asked or forced to leave their homes having experienced numerous hardships; others left voluntarily in an effort to escape contexts and situations that became increasingly difficult to endure. The following sub-sections present these young people's accounts of their family lives and relationships during childhood and adolescence. Social work intervention, an issue that featured strongly in the narratives, is also discussed.

*Family Conflict: The Impact of Parental Absence*

As with many of the young people in Pathway 2, a large number reported that a parent, often their fathers, had been largely absent from their lives. Five young people indicated that their fathers had left the family home when they were young children and one young women stated that her mother "was never around" during her childhood years. As a result, many recounted distant and fraught parental relationships.

> *"Never even seen him [father], not even worth talking to him being honest with you . . . he was pretty much a waste of space."* (Oisín, 24)

> *"I never lived with her* [mother]. *She was homeless herself in town and my mam . . . my mam was always disappearing because of the drugs and everything she would never be around and she would show like up a year or two later."* (Sarah, 23)

Strong resentment was often articulated by young people about this 'gap' in their lives as well as the longer-term consequences of the experience of parental estrangement. The absence of a parent also frequently led to tension in the home as well as relationship difficulties with their resident parent, most often their mothers. Aaron, for example, described a difficult and complex relationship with his mother related to his father's absence from their lives.

> *"She always tries to pick on me about it* [referring to father's leaving]*, that I look like him and do the things that he does, all the things that he does and little ways I have, that I do the exact same but I just never knew, she just says it to me."* (Aaron, 16)

A smaller number said that they had only recently made contact with and met their fathers and that this 'reconnection' had led to additional conflict with their mothers in particular: *"I never got along with my mam, she got worse with me once I met my dad"* (Ashley, 19). Ashley elaborated by describing a tense home environment where violence often erupted. As tensions escalated, she left home at the age of 18 and had not returned since.

> *"I knew my mam was never happy, like she was always depressed and all, but like that's why the littlest thing I did then that set her off. So I couldn't deal with it any more and then that day when the two of them* [mother and step father] *exploded at me like, attacking me like, then after that like I was just kind of , 'I'm never going to that house again.'"* (Ashley, 19)

Fraught and complex parental relationships such as those described above invariably engendered strong feelings of rejection and abandonment

in young people. Fiona, whose father died of a heroin overdose when she was six years old, felt strongly that she had not received adequate emotional and practical support from her mother throughout her childhood and adolescence. Her account demonstrates the troubled pathways out of home that can stem from familial conflict.

> "I used [to] scream at me ma and be like, 'When's the last time you told your kids you loved them?', and all . . . I've been fightin' with me ma for so many years like. Most ma's are like sisters but that's not like that with me and my ma . . . I'm still 19 years of age and I still want the mother's love." (Fiona, 19)

### Violence and Abuse in Family Settings

Seven of the young people had experienced violence in their homes, either as witnesses to, or victims of, act(s) of aggression on the part of a parent(s) and/or step-parent: "We [family] *all used to batter each other and all, we were killing each other, do you know what I mean?"* (Oisín, 24). Early life experiences such as these invariably impacted on the young people's ability to remain in the family home due to the highly volatile, unstable and often abusive nature of their family environments. For instance, Aaron described a turbulent and violent home life with his mother and outlined the sequence of events that led him to the Out of Hours Service when he was 16 years old. He was subsequently placed in supported lodgings for a brief period before accessing an under-18s emergency hostel and moving, at a later stage, to supported temporary accommodation.

> "The first time I left [home] *me ma told me to fuck off out, that she was ringing the Garda on me. I just left because I was after having a big argument with her and she smashed my phone up and hitting me with a hammer and all. So I punched loads of holes in the wall because I was angry and I wouldn't hit a girl . . . [I went to] the Out of Hours."* (Aaron, 16)

A smaller number disclosed sexual abuse during childhood and one young women, Michelle, described this experience as generating strong tension in the family home. She told that she and her sister were sexually abused by a neighbour when she was seven years old and that this event negatively impacted her relationship with her mother because of strong feelings of guilt and blame on both sides. This tension escalated over time, was compounded by her mother's alcohol use, and culminated in her exclusion from the family home on multiple occasions during her teenage years. At the age of 19 she was asked to leave and had not returned since that time.

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*"[Mother]* blames me on my sister getting abused like because I never told her. She thought because I was her older sister and because it was happening to me, that I should have known the signs. So she was just like, 'Get out! get out!', like. And I haven't been able to forgive her since, you know what I mean like, because I've always blamed myself for that like and to have her blame me as well but she expected me to look after [sister] *but I said there was nobody there to look after me, I said like I didn't know what to do like. So she just told me to get out."* (Michelle, 20)

A number of young people also recounted the role of sibling conflict, including violence perpetrated by a brother or sister in some cases, as contributing to difficult and often violent family situations : "*They've* [brothers] *some temper, me own ma's as scared of them . . . couldn't hack it any more. Couldn't hack me brother any more"* (Phoebe, 22). Volatile sibling relationships created fraught and unsafe family environments and also led to young people's marginalisation within the family home.

*"We* [referring to brother] *get along, but we can't be left in the same room to live in even because there is murder like. There's been problems with me and me brother, yeah, yeah, bad bad problems . . . I ended up stabbing him over him kicking the face off me."* (Ross, 17)

Two young women linked their early experiences of housing instability directly to their need to flee the family home due to conflict arising from the presence of a step-parent: "*He* [step father] *punched me in the face. Like he was trying to batter me like but I ran out of the house"* (Ashley, 19). Both of these young women described long-standing abusive home situations characterised by high levels of violence perpetrated by a parent's new partner (a step-father in one case and a step-mother in the other). Sarah explained that her efforts to "stand up" to her highly abusive step-mother led to her exclusion from the family home at the age of 16.

*"Me da's wife is vicious, like she really is she is just nasty and she used to batter us for simple things, no reason at all . . . Like she was violent and abusive and a drinker and like growing up was hard. We had a horrible life growing up and I only started standing up to that when I was 14, 15 and that was when I was kicked out. And then I turned 16 and me and his wife had a falling out again and I was kicked out of the home."* (Sarah, 23)

Ashley also described an extremely fraught and violent relationship with her step-father from early adolescence: "*He* [step-father] *didn't want me living there* [family home] *in the first place . . . so like there'd always be killings in the house basically."* From the age of 13 she ran away or was 'kicked out' of home on numerous occasions. In this account she recalls the sequence

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of events that led to her exclusion from the family home at the age of 18.

> *"I remember when I was 13, I slept in town for three nights in my school uniform . . . Everything over the years was kind of that, pretty much the same, like being kicked out but when I turned 18, because I suppose, obviously he's* [step-father] *legally allowed like throw me out . . . so now I'm barred from the house, I'm not allowed pass the gate."* (Ashley, 19)

Experiences of violence, abuse and/or neglect in the family home often engendered strong feelings of fear in the young people as children and several expressed anger, as well as a profound distrust of authority figures and adults in general. These experiences also served to undermine young people's ability to remain in the family home and/or secure an alternative source of stable housing.

### Parental Substance Misuse

A large number of the young people in this pathway described family environments where problematic alcohol and/or drug use on the part of a parent(s) or carer occurred, often exacerbating otherwise difficult or volatile home situations: *"Worse and worse she was gone from her drinking and all and then wakening up the next morning and snapping for me"* (Aaron, 16). Feelings of anxiety, anger and resentment associated with their parents' inability to provide adequate care throughout their childhood years were very present in these stories. For example, Michelle described her frustration at having to take on a 'carer' role at the age of 12 because of her mother's alcohol use. In the following account she describes the distressing circumstances surrounding her return home following a four-month period in foster care.

> *"The day* [mother] *got me back* [from care] *like she went in and got cans, like she was back on the drink straight away like, that day. Like we weren't even home yet and we were after getting off the bus and she went in and she got cans . . .* [So] *I had to cook for my sisters and clean up and turn my ma on her side in case she got sick."* (Michelle, 20)

Similarly, Fiona recalled the burden of responsibility she felt at a young age when she had to respond to and deal with her mother's alcohol use and related behaviours. Her account illustrates how these experiences served to 'push' her out of the family home.

> *"I've had to often stick, like my ma had to lose her temper that much that I've often had to stick her into ambulances. And it's just because I'm the oldest child, I'm the oldest daughter. But I was taking too much on me shoulders so when I could get the*

*chance to go away like, do you know like run away from it all, I would. I would really push meself over the limit sometimes."* (Fiona, 19)

Ross attributed his experiences of housing instability and homelessness to his mother's problematic drinking, which created a home environment that enabled him to consume alcohol easily and without question. The following account describes a home situation that led him to a Garda station and his subsequent placement in Out of Hours emergency accommodation at the age of 16.

*"It never worked with me and me ma, because I end up drinking . . . She'd drink on the weekends you see so I was able to do it as well like . . . at a young age, so it brought me up to be the way I am. And then one night we were all drinking in the house and then I ended up, we got into an argument . . . And then I ran out the door, I threw a bottle and it hit me neighbour's window, and I got arrested. Then I was kicked out of me ma's, and then I was in the police station for a day or two and then Out of Hours picked me up and brought me to* [Out of Hours Emergency Hostel]*."* (Ross, 17)

Like Ross, others articulated the 'normalising' effects of their early exposure to parental substance use.

*"Basically, like me da was smoking* [cannabis]*, me ma was smoking it, so I just thought everyone smokes it."* (Sarah, 23)

*"Just the family that I'm in it's the family that I belong to . . . it's just I'm surrounded by everything like I grew up too fast. Like I was, I was taken out partying, drinking and all when I was 12, 13 and around there nobody looks down at you like you're not the only, you're not different, it's the normal thing."* (Fiona, 19)

Alcohol and/or drug use was often depicted as a routine activity within family environments and as one which, in turn, permitted and facilitated early substance use experimentation by many of the young people. Their narratives always referenced the negative impact of parental substance use which was often compounded by numerous overlapping adversities within family contexts. Many talked openly about the ways in which these early life experiences shaped their pathways out of home and their trajectories into homelessness.

### Social Work Intervention

Six of the young people (three young women and three young men) reported some form of social work involvement with their families during late childhood or adolescence, reflecting official recognition, on some level, of their home-based difficulties. Three of these young people had

been placed in one or more temporary care setting (including residential homes, foster care placements and supported lodgings) and one had also spent time in a psychiatric hospital. In general, however, these placements were short-lived, lasting for no more than a few weeks or a number of months, after which they either returned to turbulent home situations or were placed in under-18s 'out of home' provision.

Several felt "let down" by the system because of what they identified as critical points of missed intervention and/or a failure on the part of social work services to respond to their needs as children. For instance, Ross, who left home at the age of 16 due to ongoing conflict with his mother, felt that his life would have been different had adequate intervention occurred at an earlier juncture to address his mother's alcohol dependency.

> *"I was staying in a mate's gaff* [house] *for weeks like. I never knew about* [services]. *I didn't even have a social worker like but, ah Jesus, if* [social worker] *came into me life a few years ago I would have been alright, I'd say. I'd say if she came in when I was bit younger I'd say I wouldn't be here, do you know right now, I wouldn't be here."* (Ross, 17)

A number of young people recalled frustration about their unsuccessful attempt(s) to effectively seek help and disclose their experiences to agencies such as social services or the Gardaí. In these instances, either pressure was placed on them by a family member(s) to avoid the attention of State authorities or, in cases where violence was reported, young people felt that intervention services privileged their parents' version of events: *"My da has the gift of the gab and he talked his way out of it"* (Sarah, 23). Aaron described his efforts to communicate with social workers as well as his dissatisfaction with the level of social service interaction he received. He was subsequently returned home to a turbulent home situation following a short period in a foster care setting.

> *"*[Social workers] *never listen to me, what I have to tell them or anything. Like when they ask me the reasons why I don't want to be at my ma's and I've told him the reasons and showed him the marks and the things that I've had while I was there and they never even bothered doing anything about it. They never said anything about them, just questioned my ma about them and took her word for whatever she said after I'd be sitting in the room there telling her straight out to her face and she's trying her best to deny it and you can see it in her face and they're still just believing her."* (Aaron, 16)

These kinds of experiences tended to engender profound feelings of mistrust, as well as a lack of confidence, in the services and agencies charged with meeting their needs. They also fuelled feelings of abandonment in

young people, who ultimately left home with limited options and few resources.

These young people's narratives were dominated by past and recent accounts of family conflict, parental absence, problematic substance use, and experiences of abuse, neglect and/or violence in family settings. While a specific event or crisis often acted as a 'trigger' for their home-leaving, home-based difficulties and complex family relationships were most often depicted as long-standing and ongoing in their lives. In many cases, young people described a pattern of leaving and returning to the family home on numerous occasions (sometimes following social work intervention) in an effort to negotiate difficult family situations. "[Mother put him out] *and I was in my brother's for a month and then I went back to my ma's and she just kept fucking me out and I kept going everywhere else then to stay*" (Aaron, 16). These young people often recounted numerous episodes of 'hidden' homelessness prior to their exclusion from the family home and entry to homeless services. Issues related to experiences of returning home and 'hidden' homelessness will be explored in further detail in Chapter 5.

### Pathway 4: 'Problem' Behaviour and Neighbourhood Stressors

For eight of the young people (all young men), home-based tensions arising from their behaviour emerged as central to their accounts of leaving home. In these instances, young people identified the onset of 'problem' behaviours such as drug and/or alcohol use, aggressive/anti-social behaviour, and criminality during their early or mid-teenage years. Many recalled their progessive affiliation with, and engagement in, particular social settings and peer networks in their communities as exposing them to unconventional and illegal activities (e.g. substance use, criminal activity) during adolescence. These patterns of behaviour frequently escalated over time, often leading to criminal justice contact (and in a small number of cases, community barring orders) as well as strained family relationships. This section presents the young people's perspectives on how certain behaviours and neighbourhood stressors affected their interactions with their families and communities, serving to 'push' them out of the family home and marginalise them within their local areas.

*Problematic Substance Use and Aggression in the Family Home*

All of the young people in this pathway reported the use of alcohol and drugs from early adolescence and many described a rapid progression from

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recreational to problematic substance use: "*This was just when I was 16, like it all happened so fast in that year like, everything just kind of sprung on top of me*" (Paul, 21). A number also identified their substance use as a source of constant conflict with their parents throughout their teenage years. Seán began smoking cannabis at the age of 15 and progressed quickly to a regular pattern of use. He explained the impact of his drug use on his psychological wellbeing and his relationship with his parents.

> "[Parents] *were grand before I started smoking* [cannabis] *about a year ago. I was in all the fights, all of that—everything was just starting like . . . when I started smoking it I was getting stressed, not having a joint or anything, just getting fucking pissed off easy like. Just all me weed smoking and all got worse.*" (Seán, 17)

Seán's relationship with his parents became increasingly strained and he was "kicked out" on numerous occasions from the age of 16, a point at which he had accrued drug debts in his local area and was exhibiting aggressive behaviours in the family home: "*I pulled a knife on me old fella but then I just stormed out of the house then*" (Seán, 17). He was moved directly to supported lodgings following contact with the Out of Hours service and was placed in emergency 'out of home' provision after a two-week period.

Like Seán, Conor described a turbulent home situation during his teenage years which, again, centred primarily on his substance use. He told that his mental health deteriorated rapidly as a result of his cannabis use, which led to a series of abusive, violent and aggressive interactions with his parents: "*I was so abusive like you know, just taking out my rage on the only people around me*" (Conor, 21). He described the sequence of events that led him to a drug treatment centre at the age of 20, after which he accessed homeless support services.

> "*Things got worse at home anyway. It was just off the wall, behavioural problems. It was psychosis like, voices in the head, all that kind of stuff going on, crazy, crazy stuff. So, yeah, ended up facing an ultimatum of, 'You need to get out and sort yourself out or, you know, we* [parents] *don't want you here'. Either way I didn't have a choice, I was pushed into it* [drug treatment] *and rightly so, you know . . . . my counsellor in the treatment centre gave me a link to a guy from the HSE up here for aftercare . . . And then I started linking in with the* [supported temporary accommodation].*" (Conor, 21)

Accounts of problematic substance use were often accompanied by narratives of mental health difficulties. For instance, Conor (quoted above) explained that he started to smoke cannabis regularly because it helped

him to cope with a number of personal difficulties, including poor body image, problems with accepting his sexuality, and a fraught and complicated relationship with his father.

> *"It* [smoking weed] *was great, it was giving me the escape I wanted and the feelings I wanted . . . I suppose there would have been stuff going on in school around my weight and there would have been family problems; I wasn't getting on with my dad at all. It was for coping, all that sort of hidden stuff, always secrets. So it was feelings of loneliness and like I suppose not feeling accepted. Like being bullied. My sexuality I hadn't figured out myself, you know, and like I'm bisexual but it would have been thrown at me a lot by people in my school . . . You are used to dealing with things in negative ways and, you know, blocking it out and using things to numb it lik*e." (Conor, 21)

In other cases, a significant life event, such as parental separation, triggered a pattern of 'difficult' behaviours during adolescence. For instance, Paul linked his father's departure from the family home with his experiences of depression as well as ongoing conflict with his mother: *"He* [father] *was never around and I kind of took a lot of that out on my mam"* (Paul, 21). He went on to explain that alcohol and drug use became a 'solution' to a difficult home situation and unresolved feelings of anger towards his father: "*I developed maybe anger problems . . . I'd go out on the drink and I'd just lash out*" (Paul, 21). As time progressed, his activities led to increasing levels of criminal justice contact and he was asked to leave the family home on numerous occasions.

> *"I got arrested loads of times for drinking and a load of ASBOs* [Anti-social Behaviour Orders] *then as well. I found that nearly most weekends I was goin' out getting locked, I was getting' brought home by the police for getting drunk; that was at the same age maybe 14, 15 . . . the fact that I was goin' out and sniffed out of me head* [cocaine] *and even the come-downs, stoned, drunk—the arguments we used to have, you know like, I don't really blame* [mother] *for* [putting him out]*."* (Paul, 21)

Paul was eventually excluded from his home at the age of 16 and began a cycle of movement between the homes of friends and private rented accommodation before accessing homeless services at the age of 18.

### *Criminality and Anti-social Behaviour*

The young people in this pathway invariably reported regular contact with law enforcement agencies and, in many cases, multiple arrests: "*I've been arrested more than 200 times I'd say*" (Kevin, 23). The criminal activities reported ranged from minor violations to more serious offences includ-

ing criminal damage, assault, and aggravated robbery. A smaller number reported periods of incarceration prior to leaving home. Accounts of criminal activity were almost always linked to problematic substance use, as Bryan's account demonstrates.

> "I was always drinkin' and all up in my area and all so it was bad for me . . . I used to always hang around then and I'd always be dossin' and I would be gettin' in contact with the police and I'd be gettin' aggressive with a few drinks in me and I'd be getting arrested for hanging around and loitering and the Guards would kick the shit out of ya, every bleedin' couple of weeks, you know?" (Bryan, 22)

Many of these young people openly acknowledged that their own behaviour, and participation in various forms of criminal and anti-social activity, contributed in large part to their exclusion from the family home. *"It all started with me getting arrested and then I was getting kicked out of me house"* (Anthony, 17). Patterns of problematic behaviour and/or substance use negatively impacted on young people's relationships with their parent(s) and, particularly over time, undermined their ability to remain in the family home. Anthony told that he started to get into 'trouble' with the police at the age of 12 when he started to 'hang around' with a network of peers who were involved in criminal activity.

> "I was goin' out robbin' bikes and I was getting arrested and then I got arrested for assault and there's always things I got arrested for . . . there was criminal damage, me ma's house, there was threatening abusive misbehaviour to a Guard, then there was assault, then there was another criminal damage and then, there's loads . . . Over 60 or 70 charges." (Anthony, 17)

He went on to explain that his ongoing involvement in criminal activity, combined with his aggressive behaviour, led to constant conflict with family members, particularly his mother: *"Me ma was telling me basically, 'Don't be stayin' out', but I wasn't listening to her, I was smoking weed in the bedroom, smoking out the window and all . . . smashin' the windows in the house and all"* (Anthony, 17). As time progressed, home-based tensions intensified and, from the age of 14, he was asked to leave home on numerous occasions. The following account explains how his recent placement in 'out of home' provision came about.

> "The last time I got kicked out she [mother] wouldn't let me back in, so I was meant to go to [under-18s emergency hostel] and, eh, I didn't go 'cause I stayed in me mate's and a social worker told me to come here [under-18s short term acommodation] and that's it." (Anthony, 17)

Parent-child conflict arising from problematic behaviour on the part of

young people was not always the primary reason for their early home leaving. In some cases, young people's participation in criminal or anti-social activity resulted in their formal exclusion from their local communities, which meant that they were unable to return to the family home, even if permitted by their parent(s). This was the case for Kevin, who began his 'story' by recounting a series of deprivations during childhood: *"My ma had nothing . . . I slept rough with me ma when I was a kid"* (Kevin, 23). Kevin started to use drugs from the age of 12 and explained that the untimely death of a young person, who was also a friend of his, led to a lot of "trouble" in his neighbourhood and triggered his progression to more extreme forms of anti-social behaviour and criminality in his local area: *"I ended up just wrecking the place"* (Kevin, 23). Although Kevin maintained a positive relationship with his mother, he was subsequently served with an exclusion order which meant that he had to leave the community or risk his mother's loss of the family home.

> *"I became homeless when I was 20 over anti-social behaviour . . . I had to leave* [family home] *basically . . . I was thinking, I can't put her* [mother] *through that again because she already done that in the past, know what I mean? So I got notified that I was now homeless so I had to go to* [homeless support service]." (Kevin, 23)

*Neighbourhood Stressors and Negative Peer Associations*

A number of the young people in this pathway linked their engagement in 'problem' behaviours directly to growing up in disadvantaged areas, identifying a range of neighbourhood stressors that served to negatively impact on their lives as teenagers: "*It's just the area I came from and it just sent me down the wrong road*" (Simon, 19). Peer groups were implicated in many accounts about the processes and experiences that influenced young people's activities and behaviour as teenagers and a large number described a daily routine of "hanging around" with the "wrong crowd".

> "[The area] *was trouble like itself but like I had good friends for a while and then I went hanging around with other people who would just do what they want as well. Then I got on with them and I was just doing whatever like robbin' shit and all.*" (Shane, 17)

Many identified this stage in their lives as activating a 'downward spiral' which culminated in their premature home-leaving.

> "*I was hanging around with the wrong people, me life was just going downhill altogether. I was going down the wrong road and stuff like that. I was bringing, I*

*was getting arrested and getting me house raided by police and stuff like that, and me ma was, just had enough, you know? So she asked me to leave."* (Simon, 19)

Similarly, Bryan recalled the role of his peers in his growing affiliation with neighbourhood drug 'scenes', feeling in retrospect that he had been "groomed" for involvement in negative social activities from a young age.

*"I never wanted to get involved, any of that stuff that was happening around* [area name] *but I did make a lot of friends as well like. But I always think now like that my friends are probably the reason that I went down that road, like selling drugs and all 'cause I think that instead of being friends I was more 'groomed in'. I was misled so many times, you know? I was naive, you know? That was down to being naive and young, you know."* (Bryan, 22)

As Bryan became more immersed in street-based drug 'scenes' he began to accumulate criminal charges and soon became heavily involved in selling drugs in order to pay off mounting drug debts. Between the ages of 18 and 20, he was involved in a number of neighbourhood riots, his family home was raided several times, and he was incarcerated on three separate occasions. Bryan was eventually served with an exclusion order from his home community due to his ongoing involvement in drug-related activity and was subsequently forced to leave the family home. He described his experiences prior to accessing homeless services for the first time at the age of 20.

*"It was pretty shit 'cause I was excluded from me* [family home] *through sellin' drugs . . . and I was mad at meself, but when I left then I had nowhere to live so I was livin' in doors, floors and houses, everything."* (Bryan, 22)

Reports of home-based difficulties associated with the accumulation of drug debts and/or 'holding' of substances in their home (often leading to police raids) were commonplace. For example, Seán told that he was excluded from the family home after his father was approached and asked to 'settle' his drug debts: "*I owed some money and they* [dealers] *came to me da*" (Seán, 17). Shane similarly recalled that his involvement with a particular peer group brought "trouble" back to his family home, leading to further tension with his father: "[He got] *in too much trouble and it sort of started coming back to my da's door that time like. Then the shit hit the fan*" (Shane, 17). These young people typically referred to the omnipresence of criminality in their communities, as well as their regular exposure to drugs, violence, and in some cases, gangland culture, from an early age: "*My area is a shit hole, just full of like gun crime, knife crime, you know? So they're all like killin' each other, so it's literally like a blood bath . . . it's*

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*either hit or be hit"* (Bryan, 22). The vast majority had left school early and their accounts strongly suggest that a lack of a daily structure and routine, coupled with the prominence and 'normalisation' of drug use and dealing activity, meant that some level of contact with a drugs/crime sub-culture was virtually inevitable.

> *"I was thinkin' like 'Why did I pick this type of bleedin' life?' and I goes, 'I didn't pick this type of life, you know this is not what I picked', you know that's just what happens when you come from an area like that."* (Bryan, 22)

Most of these young people were acutely aware that their neighbourhoods were stigmatised and perceived negatively by wider society. Indeed, a number reported feelings of relief when forced to leave their local areas: "*I'm sort of glad I'm out of that area, stuff like that as well because I want to change me life around completely*" (Simon, 19). Others described their attempts to distance themselves from the people and places they associated with 'trouble'. For instance, Conor, who had ceased all involvement in drug-related activity, described his efforts to 'break away' from his neigbourhood drug 'scenes': "*I wouldn't move back* [to area] *because the social circle, it's a small town you know what I mean, and there's a bad crowd there as well*" (Conor, 21).

The narratives of the young people in this pathway consistently referenced an interaction between problematic patterns of behaviour and a range of life experiences and neighbourhood stressors. The role of neighbourhood and peer networks appears to be significant but these young people had also invariably experienced a host of deprivations during childhood. Practically all initiated substance use at a young age, often as a coping strategy, and many progressed to regular or problematic patterns of consumption quite quickly. Involvement in criminal activity—often drug-related—typically followed and led to home-based conflict as well as criminal justice contact, in many cases. While many were asked to leave the family home by a parent(s), others were forced out of their home neighbourhoods by more formal (legal) mechanisms of exclusion and entered homeless services, most often following a period of 'hidden' homelessness.

## Conclusion

This analysis reveals a complex array of inter-connected circumstances and experiences associated with young people's home-leaving. Although their 'leaving home' stories have been categorised in four distinct ways, these pathways are multi-dimensional and overlapping. For example, family

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conflict emerged as a significant contributing factor across all of the pathways, even if there were differences in the nature of this conflict and its role in 'pushing' young people out of home. The impact of family breakdown and/or blended families was also strongly apparent and emerged as a major source of stress for a large number of participants. Across all four pathways there were also reports of substance use by young people, although most had not progressed to problematic levels of use prior to leaving home or entering care for the first time. Parental substance use featured strongly, particularly among those young people who recounted family dynamics and problems at the more severe end of home-based difficulties. Finally and importantly, all of the young people grew up in poor neighbourhoods and in households characterised by some measure of economic hardship. Indeed, neighbourhood contexts characterised by deprivation, and where opportunities for drug use and other illegal activity were ever-present, were strongly implicated in the processes that pushed some young people out of home. The number of young people interviewed who reported family and/or sibling homelessness (see also Chapters 3 and 6) is significant and is itself an indicator of severe deprivation, highlighting the risk of ongoing cycles of marginalisation as well as the intergenerational transmission of poverty, homelessness, and other social problems.

By the time the young people left home for the first time, many had already experienced multiple transitions as well as several major disruptions. For example, a large number had spent either short or lengthy periods in State care and, of these, most had experienced multiple care placements. Leaving care was problematic for a large number of participants and first homeless experiences frequently coincided with the transition out of care. Consistent with previous studies in Ireland (Mayock and Carr, 2008; Mayock and O'Sullivan, 2007), these findings highlight a strong and ongoing association between histories of State care and homelessness. Nonetheless, premature or unplanned transitions were not restricted to those with State care experience. For example, patterns of household instability, including constant movement between the homes of family member (parents, grandparents, siblings), were commonly reported and led to disruptions in young people's relationships and schooling, as well as engendering a strong sense of insecurity. A large number of others left home having experienced numerous hardships: accounts of home-based violence and parental substance use were commonplace, as were reports of household friction and conflict arising from the absence of a parent and/or

the presence of a step-parent.

These findings suggest that difficult and fraught family histories placed a considerable number of young people on a trajectory for early independence. Many of the family disruptions reported can be categorised as processes that had occurred over many years within the family while others were events (e.g. the death of a parent or sibling, parental separation) that dramatically altered the home context. However, these events did not cause homelessness in themselves and a simple cause-effect relationship between a single family issue and young people's home-leaving was rarely reported. It could be suggested, however, that there were insufficient protective mechanisms within the family for the repercussions of such events or changed circumstances to be dealt with without leaving home becoming a consequence. In other words, both event-triggered home-leaving and long-term process-generated home-leaving can be identified, with the caution that in most cases there was a combination of the two to varying degrees. The extent to which young people initially entered situations of 'hidden' homelessness is particularly noteworthy. A strong interaction also emerged between contexts of 'hidden' homelessness and home, as young people left and returned, often over a considerable period of time, prior to making contact with services and becoming 'officially' homeless. This interaction, as well as the experience of 'hidden' homelessness, is discussed in greater detail in Chapter 5.

# Chapter 5: Young people's pathways into and through homeless services

A large volume of data was generated on the young people's movements, as well as on the impact of various living situations on their lives, following what they identified as their first 'out of home' experiences. Their interactions with services featured strongly in their accounts but, for many, these experiences occurred long after they had left home for the first time. This chapter examines young people's paths or trajectories into and through homeless services. It includes an exploration of participants' experiences of 'hidden' homelessness, which emerged as a striking feature of their accounts, and also documents their first and early encounters with services. The chapter concludes by examining a number of challenges— related to substance use, criminal justice contact, and mental health problems—that emerged as potential and/or ongoing sources of instability in the lives of many of the young people.

## The Experience of 'Hidden' Homelessness

The vast majority of the young people did not make contact with services when they initially left home and, instead, sought informal solutions to their home-based crises. Thirty-eight of the 40 participants reported at least one episode of 'hidden' homelessness, that is, time spent in the homes of relatives or friends, upon leaving home for the first time; most had in fact experienced multiple episodes of 'hidden' homelessness. Perhaps significantly, the young people's narratives indicate varied understandings of first and early experiences of homelessness. For example, a number were able to 'name' the experience of 'hidden' homelessness.

> *"No, I was staying on doors and floors and basically I was couch surfing, you know hidden homeless, so that's what I was doing for a while."* (Bryan, 22)

Chloe, who had never slept rough, depicted the experience of "sleeping on people's couches" as "homeless" and equated it with living in hostels.

> *"Oh yeah, well there was plenty of times when I felt homeless, when I was just sleeping on people's couches or we were just living, we just ended up going to stay with my mum for a week or where I was in* [adult hostel accommodation] *and,*

*yeah, loads of times but I've never slept on the streets."* (Chloe, 22)

Recalling his 'thinking' about his various living situations after he left care at the age of 17, Craig's account reveals uncertainty, which later shifted to a realisation that his circumstances constituted 'homelessness'.

*"I suppose really since I left residential care, it was always in the back of me head really, you know. But like the times when, like I'd stay, the time I stayed with me auntie in England, the times I'd stay with me nanny and granddad, I'd be saying to meself, 'What are you talking about, like you know, I'm not homeless, I'm never going to be like that'. But then at the back of me head I'd be always sort of telling meself, 'Well, cop on Craig, you are homeless'."* (Craig, 22)

Many others did not perceive themselves as homeless at the point of seeking accommodation in the homes of relatives or friends. For these young people, the shift to understanding their situations as 'homeless' only transpired after they had exhausted informal supports and connections and found themselves visibly homeless, without personal resources, and with no option but to sleep rough.

*"I was kind of sleeping on the streets and things, and then I was sleeping in friends' houses. I remember sitting on the step one night, and it was freezing cold, and I was thinking to myself like, 'Oh my God, I'm actually homeless like'. And you feel so alone like there is nobody in the world there for you either like, nobody actually gives a shit if I just curl up here now and die like in the freezing cold. And it's horrible."*
(Rebecca, 18)

As outlined in Chapter 4, the home-leaving of many young people was an outcome of complex familial, social, and community processes and a large number left to escape difficult or fraught home environments, including experiences of violence, in some cases. For many, running away was a first attempt to cope with these distressing experiences: *"I actually remember I ran away for most of my Junior Cert because of it* [violence in family home] *but I went to the Garda station and reported it and then I was brought back home and there were social workers involved"* (Sarah, 23). In contrast, many who absconded from care settings reported that they were 'running' *to* family in order to reconnect and recover a sense of belonging: *"I just ran away* [from foster care] *and wouldn't come back, I kept to myself* [sleeping rough] *and then within a week I was back with my mother"* (Sam, 19).

Several of the young people had been 'kicked out' of home on multiple occasions during their teenage years, a pattern which eventually led to their exclusion from the family home: *"I've been in and out of black bags,*

*it's just me and me ma arguing for years . . . so it's just I had to leave, I've been living out of black bags since I was 14"* (Fiona, 19). These young people often described a pattern of seeking accommodation in the homes of relatives: *"Oh I always had somewhere to go. Like I could go back to my auntie's, go and stay in* [other aunt's], *Granda's"* (Shane, 17). This pattern of movement between the homes of relatives provided a temporary solution to their accommodation needs and was typically perceived as positive compared to other alternatives such as sleeping rough. However, several of the young people's narratives pointed strongly to the practical limitations of family support, as well as the unsustainability of these informal living arrangements. In Ross's case, the breakdown of his relationship with his parents was strongly implicated in his home-leaving and he subsequently stayed with his older brother and young family. However, his position in the household became untenable after several months due to overcrowding.

> *"It's too small of a house* [brother's home]. *And me niece is eight and me nephew is four, do you know what I mean, and I was sleeping in her room for them two months like she was in me nephew's room. So I felt in the way."* (Ross, 17)

Many others relied on friends when they first found themselves out of home. Siobhán described the challenges she experienced as she transitioned out of home and stayed temporarily with various friends. Like Ross, she was conscious of the burden she was placing on those with whom she stayed temporarily and was anxious not to "over-stay her welcome".

> *"I was here and there, I was up with one of me friends for about three weeks and then, obviously, I had to leave like because I don't want to be living in someone else's house either. Then I stayed with another friend for a week so I was there for about a month I think or something like that. I just wouldn't feel comfortable with it like. It's not fair on the person I'm staying with like, do you know, or their parents as well like. I didn't want to over-stay my welcome."* (Siobhán, 19)

Most who stayed with friends slept on a sofa or on the floor. Privacy was therefore limited and a whole host of restrictions were placed on their lifestyle, including when they came and went, their access to and use of washing and cooking facilities, and so on. These informal living situations were inherently insecure and short-term in nature, merely serving as a 'stop gap', and ultimately led to young people accessing homeless services. Aaron and Michelle's accounts capture the pattern of movement between home and situations of 'hidden' homelessness described by a large number of the young people and which eventually led them into the 'official' network of homeless youth.

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*"*[Mother put him out] *and I was in my brother's for a month and then I went back to my ma's and she just kept fucking me out and I kept going everywhere else then to stay. But then I got to a stage where she wasn't having me back and I had nothing else to do, I was getting sick of being out and all . . . So I went to the* [Out of Hours Service].*"* (Aaron, 16)

*"I was always moving in to my friends when* [mother] *would kick me out like. I never thought about like going into a hostel but I was like, 'I can't keep doing this when she kicks me out, moving in here and then moving home, moving back'. I was sleeping on a couch like for a couple of nights and then my ma would say sorry and then I'd move home. This went on for years. So one morning I just went up to the council like and said, 'I have nowhere to go'. I actually had nowhere to go."* (Michelle, 20)

A smaller number relied on partners when their home situations reached a crisis point or, alternatively, when they had been excluded from care settings: *"When I left that place, it was in, residential, yeah . . . lived with me girlfriend for a while"* (Craig, 22). Sarah left the family home abruptly to live with her boyfriend at the age of 16 in an effort to escape many years of family conflict.

*"I moved in with me boyfriend and I was living with him and his mam and dad and like it wasn't ideal because like the family didn't know me really, like we were only going out with each other probably two or three months."* (Sarah, 23)

Highlighting the hazards that young people may be exposed to in situations of 'hidden' homelessness, Sarah was physically abused by her partner at the age of 17 and subsequently sought refuge in the home of her grandmother. Ashley had also relied on her boyfriend and his parents over a two-year period for respite from her ongoing difficulties at home.

*"I used to be allowed stay in his* [boyfriend's] *house and he had a spare room and everything, his ma used to let me stay, like pretty much three or four nights a week to get away from my house like."* (Ashley, 19)

When Ashley was permanently excluded from the family home, she re-evaluated her relationship with her boyfriend and subsequently accessed emergency homeless accommodation for the first time: *"But then like I had to break up with him, I couldn't just use him obviously to stay in his house"* (Ashley, 19).

For many young people, the threat of further episodes of sleeping rough precipitated their entry to emergency homeless accommodation. Over half of the young people in the study (9 young women and 14 young men) reported at least one episode of sleeping rough and many continued to

sleep rough intermittently after they accessed homeless services for the first time. Irrespective of duration and frequency, accounts of sleeping rough typically depicted the experience as distressing. Ross described the impact of his first experience of "sleeping out".

> *"Every time I was kicked out like, or like proper sleeping out like that time and, you know, you've nowhere to go and you feel like shit, do you know what I mean, you feel horrible. It changes your mood, everything, I'm telling you now, it does. It changes everything."* (Ross, 17)

Several described the experience of rough sleeping as a practice of avoiding sleeping in the open (for example, in doorways or on the street) and, instead, "wandered" throughout the night: *"A few times I just wandered, so I just walk around for the whole night"* (Ross, 17). Sarah, who had frequently walked alone to pass the night away, often during periods of trying to remain drug-free, questioned the potentially positive role of drug use in these circumstances.

> *"Yeah, like I remember spending two days straight just walking around town, just wandering . . . so I would literally just walk around on me own . . . It would be easier if you were on drugs, you know, because it wouldn't bother me as much. But I am saying I am still being vulnerable I am still walking the streets on me own."* (Sarah, 23)

Like many others, Sarah had used internet cafés for shelter: *"It's depressing as well because you are walking around and you are kind of stuck in limbo like and I just go into an internet café and sit there"* (Sarah, 23). She had also employed strategies to ensure her physical safety, including remaining in the company of other homeless individuals: *"Last Thursday I had to sleep rough but then five of us stayed together so it wasn't too bad. I got drink and I tried to stay up drinking all night"* (Sarah, 23).

The family members of young people were sometimes aware that they had slept rough or were currently sleeping rough. Teresa described her fears for her son, Paul, who was 'sleeping out' at the time of interview as well as the impact of this knowledge on her life.

> *"Paul's been sleeping rough for the last two months. I'm at the end of my tether now at this stage. I spend my life waiting for the knock on the door, that's the way I live. I mean I go through the motions, but I'm waiting for the Guards to knock on me door to say that he's dead, that's what I'm thinking of all the time."* (Teresa, Paul's mother, 49)

Young people's accounts of 'hidden' homelessness were embedded in complex past and recent experiences of family conflict, instability, and

personal difficulties. Their attempts to negotiate home-based conflict and navigate early experiences of homelessness through their own social networks highlight the limited options and resources available to them. These accounts of 'hidden' homelessness and sleeping rough highlight the inherent vulnerabilities of young people who attempt to avail of less visible and discrete sources of support and shelter during times of crisis.

### First and Early Engagement with Services

There were numerous issues, including the stigma of homelessness, lack of knowledge about support services, and the fear of entering homeless accommodation, that impacted on young people's willingness to engage with services: "*I didn't know where to go basically, I have just heard of places that you go into that are not very nice. I was just afraid really, I was frightened*" (Sophie, 20). These same issues frequently resulted in delayed entry to services and it was very often at a point when the limits of their personal connections and finances had been reached that young people reluctantly accessed homeless services. As outlined in Chapter 4, the age at which young people intitially embarked on a pattern of leaving home ranged from 10 to 17 years for the majority (n = 36), while four left home for the first time when they were over the age of 18 years. However, most did not make contact with homeless services for a considerable period of time, sometimes for up to two years (n = 8) or, in a smaller number of cases, four years (n = 5). This section examines the processes and dynamics surrounding young people's entry to the 'official' network of homeless youth as well as their experiences of these services.

### *The Out of Hours Service (OHS)*

Approximately one-third of the study's young people first accessed homeless accommodation through the Out of Hours Service (OHS) (Dublin) or Liberty Street (Cork), which target 'out of home' young people under the age of 18 years. Most had moved on from these services at the time of interview, although a considerable number reported repeat entries, particularly to the OHS.

> Q. *"In terms of the Out of Hours, how many times do you reckon you have used it?"*
> A. *"I don't know. A good few times. I can't really remember but it actually is a good few times I had to go through the Out of Hours . . . I'd say about 40, 41 or something."* (Alan, 17)

Several of the young people talked about the process of presenting at a

Garda station in order to access OHS accommodation, often recounting a lengthy waiting period prior to the arrival of a social worker.

*"I was waiting there one night from like 12.30 until bleeding four in the morning."* (Alan, 17)

*"Yeah just had to sit there waiting on them for hours though, five and a half hours . . . Terrible."* (Aaron, 16)

Seán, who was accessing the OHS Service at the time of interview, described the process of accessing emergency accommodation.

*"I only go to the Garda Station to ring Out of Hours and they come and collect you and bring you back in . . . like . . . you stay here* [OHS emergency accommodation] *for three nights then the Out of Hours come again and you've to wait here, you're not allowed go to bed until they come. So like they'll bring you in to that little room there and then they'll ssay 'So we'll put you on three nights again.' And then you have to wait another three nights till they come and then do it again."* (Seán, 17)

Young people's accounts of using the OHS service were diverse, with some reporting long-term cycles of using the service, as well as frequent movements between emergency accommodation types. Warren, for example, explained that his previous use of under-18s emergency accommodation had led to a succession of placements which he felt were ill-equipped to provide him with the supports he needed at that time.

*"Then I was, like I was homeless at the age of 13, like under-18s homeless houses then. So I was back and forward, but you can't live in* [under-18s 'out of home' provision]*, you can't, like you can only stay there and you have to leave at 8 o'clock in the morning, that's terrible, that is like."* (Warren, 23)

In contrast, others reported that they had accessed stable supported accommodation very quickly following their first contact with the service: *"I went through Out of Hours and I didn't go back to her's* [mother's] *then. That was really it then and then I was here* [residential home for young people in crisis]*"* (Shane, 17). Moreover, Shane's experience of the service challenged his prior negative ideas about the service: *"They* [OHS Service] *are meant to be bastards like but they weren't bad to me"* (Shane, 17). Similarly, Ross, who had recently accessed the OHS Service, reported a positive experience: *"They're brilliant, they are* [OHS]*, I wouldn't lie. They're nice, they're very nice, they're caring, if you ask me"* (Ross, 17).

It is perhaps important to note that younger study participants who had accessed the OHS more recently reported shorter waiting periods in Garda

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stations as well as less 'cycling' between emergency placements than those who had had contact with the service several years previously. The more positive experiences of recent service users may be related to the decline in the number of young people presenting to the OHS (see Chapter 1) which may well have enabled a more rapid response to young people's accommodation needs.

*The Transition to Adult Services: Narratives of Resistance*

Young people who were aged 18 years or over (n = 31) almost always depicted their recollections of entering adult hostels or other emergency living situations in negative terms and the first point of contact with adult systems of intervention was difficult for most. The transition from youth to adult services was typically abrupt and always identified by young people as a point when all supports were removed. Maria explained.

> *"I mean, just because I turned 18* [pause] *I was supposed to move into* [under-18s 'out of home' provision] *and obviously that didn't happen . . . but I mean the difference from before I turned 18 and when I turned 18; it was like, 10th June I had my social worker and key worker and the staff in the* [under-18s] *hostel and then, on the 11th, like that all went away. There was no support there, there is no, I don't know where? I mean, the only reason I knew about the free phone to get a bed in a hostel was because when I was under-18 I rang it for other people so I knew the number."* (Maria, 23)

The fact that most hostel residents were older than the young people was an additional source of anxiety and the omnipresence of drug use within hostels was repeatedly raised by participants. Fiona described her experience of staying in an adult hostel for the first time four months prior to being interviewed.

> *"Aw it* [adult hostel] *was the most disgusting place I've ever stayed in in me life. I'm only 19 and these were all 30, 30 something that had been living in* [hostels] *all their life . . . so through that whole night I had to sleep with one eye open. And I had girls takin' drugs all around me, I mean, from injecting, from smoking, from doing everything around me like. I actually had to sleep with me bags tied around me legs so I couldn't get, so I couldn't get robbed."* (Fiona, 19)

The following day Fiona advocated on her own behalf for alternative accommodation: "*I went, when the office opened I was the first person on that phone. I said, 'I'm 19 years of age, yous might as well offer me a syringe on a plate.'*" She was subsequently placed in B&B accommodation which she described as a "big step up", although her account points strongly to her vulnerability at the point of entry to this living situation.

*"[B&B accommodation] was a big, was a big step up compared to [adult hostel] but I still didn't like it, it can't have been right, I'm 19 years of age. I was confined to a bedroom with a toilet . . . and I had junkies next door knocking on me door . . . just because I was the new person and 'cause they knew I was 19 years of age and I had to, like I had to be strong because strong is my only option."* (Fiona, 19)

Fiona left this accommodation after a short period because she had personal items stolen and constantly felt threatened and intimidated by other residents.

*"At the end when I left* [B&B]*, when I actually left I rang up and I said, 'I'm not coming back, I'll come back to collect me stuff'. I didn't care. I got robbed, eh, even though the junkie next door was a size fucking twenty-something, she robbed me clothes like so . . . I just went in got me stuff and said, 'See yous later', and then I stayed in me ma's, I went back for a week but I didn't unpack bags I didn't do anything I just said I'll be gone soon."* (Fiona, 19)

Like Fiona, others resisted entering into emergency hostel accommodation due to perceived threats to, for example, privacy, personal property and personal protection as well as exposure to substance use: *"I was sick of sleeping in mates' houses and all so I said 'I have to get out of here' and someone was saying like* [name of adult hostel] *and I said 'I'm not goin' in there 'cause I know they're full of drugs'"* (Bryan, 22). In these instances, young people recalled that they actively sought alternative accommodation. Sinéad, who had a history of State care, told of the following interaction with her social worker who suggested that she access an adult hostel at a point when she could no longer live in the family home of her boyfriend. Determined to avoid hostels, she entered into other situations of 'hidden' homelessness and subsequently moved between the homes of relatives and friends for a period.

*"When I finished with my boyfriend I rang my social worker and was like, 'I've nowhere to stay', and she was like, 'Go to* [adult hostel]*', and I was like, 'I don't want to go to* [adult hostel]*'. It's full of junkies and like I don't want to put myself down that road, I really don't want to, like."* (Sinéad, 19)

Feelings of fear about the prospect of entering into adult systems of intervention were often exacerbated by young people's lack of knowledge about services: *"Like I sat with* [housing officer] *and I didn't know what to say"* (Ashley, 19). Ashley explained that she relied on the family member of a friend to assist her at the point of entry to adult homeless services. The guidance and intervention on the part of this individual resulted in her being directed away from what her advocate considered to be an unsafe environment.

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*"When I went to* [homeless service allocation officer] *he was adamant on putting me somewhere like* [adult hostel] *and she* [family contact] *was like, 'You can't do that' . . .* [family contact] *automatically went mad. It was like, 'Are you for real, you're going to put her in an environment of drugs and drink'".*(Ashley, 19]

Aoife's account, like many others in the study, demonstrates young people's reluctance to enter adult homeless services: *"When I was homeless I was only after turning 18 and I was terrified"* (Aoife, 19). However, Aoife's options became increasingly limited as she learned that her social welfare payments were linked to her use of homeless services: *"They'd* [social welfare officers] *be like, 'If you don't stay in the homeless accommodation you won't get paid* [social welfare benefit] *'"* (Aoife, 19). Susan similarly explained that her sister, Alison, was forced to enter emergency accommodation because of her limited financial situation: *"So she* [Alison] *was living in me friend's gaff* [house] *again, and she wasn't getting paid* [social welfare benefit]*, so she had to come into the hostels"* (Susan, Alison's sister, 22). Young people's reluctance to access adult homeless services emerged strongly from their accounts and it was almost always at a point when all other options were exhausted that they entered these services.

### *Adult Emergency Services: "They're just putting a band aid on it"*

Young people frequently described problems of access, as well as a lack of understanding of the day-to-day workings of adult emergency services. Several also talked about the difficulties they experienced in accessing accommodation through these systems, often describing long and frustrating queues on the telephone: *"It is a joke because you're ringing, you ring it, right, and you're on hold, you're in a queue of 50 people I'd say, yeah. And you'd be in the queue and it'd go down to 20 because everyone would be getting fed up"* (Kevin, 23). Due to service capacity constraints a number were left without nightly accommodation on one or more occasions: *"If you're ringing at 10.30 you're 50-odd in the list then they're saying—'Oh, we've no beds. There's a sleeping bag here for you'"* (Oisín, 24). A considerable number also claimed to have been treated badly at times when they were trying to gain access to nightly accommodation.

*"They're just very smart like, you know, you phone them up trying to get a fucking bed for the night and they're just being bleeding thick with you. I know that a couple of them are aware of the fact that you have to fucking bite your tongue because you want to get a bed so they have all the power and they abuse it. Now that's not everyone, but there is a couple of them on the* [emergency accommodation allocation service] *like that."* (Michael, 24)

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Alison, who had accessed services on a nightly basis during the previous three months, highlighted the unpredictability of service access: *"I could lose my bed any day and like, it's not my place, you know like it's not mine."* (Alison, 20) She went on to describe the consequences of not booking a nightly bed on one occasion in the recent past.

> *"I had to walk around for the whole night like, he* [service provider] *told me to use the* [emergency accommodation allocation service] *at 12 o'clock, I rang him, no beds anywhere. I was screaming now, I was going mad, 'I've nowhere to go, I've nowhere to fucking sleep tonight'. I said, 'Where am I going to stay tonight?' That was the roughest night."* (Alison, 20)

When young people did access a service they were often shocked by the standard of the accommodation provided.

> *"The place is supposed to be a hostel, supposed to have cleanliness, everything was messed up all the time, there were people doing drugs and the toilets are messy. All the time you see people are just smoking, smoking tobacco, a cigarette or hash or weed. It wasn't good."* (Raphael, 22)

Hostel life is characterised by transience and unpredictability; residents move in and out at a fast pace and, for this and other reasons, the ebb and flow of daily life is typically uncertain and sometimes chaotic. Young people did not necessarily know where they would stay next and this level of uncertainty tended to generate high levels of anxiety: *"It was horrible because you are going to sleep thinking of where you are gonna stay the next night, where you are going to stay"* (Sinéad, 19). Most depicted the experience of living in adult hostels and other emergency living situations in negative terms and the first point of contact with adult systems of intervention was invariably difficult and often traumatic. Particularly among young women, feelings of anxiety and distress were strongly apparent as they recounted the experience of initially entering adult homeless services. Rebecca talked about fears for her safety on her first night in an adult hostel.

> *" . . . the place was falling down around you like. You're allowed smoke in your bedroom and I was terrified someone was just going to get drunk and drop a fag and the whole place would go on fire. I think like in hostels someone should feel safe. It's bad enought that you're in there in the first place without feeling terrified for your life."* (Rebecca, 18)

Paul, who was accessing emergency services at the time of interview, described the measures he was forced to take on a nightly basis to protect his personal belongings.

> *"So waking up to that every morning, waking up to fucking whether me clothes*

*were gonna be robbed, I had to sleep in me runners and a little pillow, I had me jacket, me good jacket wrapped around me pillow with all me belongings in it and I would just be cuddling onto that all night."* (Paul, 21)

Restricted opening hours presented difficulties and risks for many young people. Michael's and Aoife's accounts of their use of nightly emergency services highlight the challenges and negative cycle of behaviour frequently associated with young people's use of emergency hostels.

*"Like it's hard to put fucking structure on your life and be positive when you are homeless in emergency accommodation. Like when you're sitting out on the fucking street all day and you don't want to be but you've have no choice, you have nowhere to go it pisses you off like so I'd say, 'Right I can either feel sorry for myself or I can just get drunk and forget about it'."* (Michael, 24)

*"It's not nice like getting kicked out at half nine and actually like knowing that you have nowhere to go. Like it's a horrible feeling and sometimes I would be on my own, it's not a nice feeling to think that you actually, there is not one person that you can go to."* (Aoife, 19)

Bullying, as well as the threat of violence, in hostel settings was commonly reported by young people. Indeed, some comments suggest an acceptance of what they depicted as a culture of intimidation within hostel environments.

*"I think there is an awful lot of bullying going on, but, there's not much you can do about it really, there isn't because we are all in the same boat and you just have to get on with it, like."* (Sarah, 23)

Sam's sister, Stephanie, was acutely aware of the threat of violence in her brother's accommodation: "*My brother is young like, and I think he should be in a better place. Like all the fighting and stuff like that*" (Stephanie, Sam's sister, 20). Furthermore, some young people considered sleeping rough to be a safer alternative to the hazards associated with 'hostel life'. Oisín, who was sleeping rough at the time of interview and had previously experienced violence in hostel and prison settings, explained his reluctance to access emergency homeless services: "*It's a lot safer* [sleeping rough] *than sleeping in hostels. I know it doesn't sound right but it is*" (Oisín, 24).

Young people rarely talked about any supports they received during their stays in emergency hostels. Indeed, the city-centre location of hostels, as well as the rules and the routines that typically govern the day-to-day running of these settings, served to alienate young people by placing them in potentially precarious situations and restricting their access to their

families and home communities.

> *"You get fucking kicked out at 9.30 in the morning . . . it's not nice being kicked out at half nine and, actually, like knowing that you have nowhere to go . . . like especially when you are stuck in town. Like I have no family in town, my family aren't from town."* (Aoife, 19)

A large number of those who had accessed adult homeless accommodation insisted that hostel life had exacerbated their problems, often because they became more heavily involved in substance use during their stay in these settings.

> *"And then when I got out of prison I had, then I had to start staying in hostels. Hitting drugs like, do you know what I mean in* [adult hostel]. *Yeah, I got strung out in there."* (Warren, 23)

> *"Fucking Dublin City* [pause], *you know, the* [emergency accommodation allocation service], *and you're going in and I was not taking any sort of drugs and I wasn't drinking and they were putting me into places like that* [adult hostel]*, like it's absolutely shocking."* (Paul, 21)

Family members also frequently raised concerns about the omnipresence of substance use in emergency homeless accommodation: "*In the hostels they just learn how to drink and to do drugs"* (Jacqui, Rebecca's mother, 57). Tracy, who was aware of her son's drug use, questioned the logic of placing young people in situations where they have easy access to substances and experience high exposure to drug use.

> *"You're going to end up with them people back in the likes of* [adult hostel] *and these are non-drug users, why should they be around people like that? It's not right, it's not right."* (Tracy, Eric's mother, 39)

Similarly, Paul's mother believed that her son's ongoing substance use problems have been exacerbated by the presence of other drug users in emergency adult hostels:"*He wants to get out of that situation, but he just finds it very hard because he's surrounded by drug addicts, it's like a vicious circle"* (Teresa, Paul's mother, 49).

Many who had been navigating the homeless service system for a considerable period of time highlighted the negative impact of this level of instabilty on their lives. Aoife had moved between various emergency homeless services for a period of over one year.

> *"I was in* [adult hostel 1] *for about two or three months like trying to get somewhere better and we were up in* [adult hostel 2] *before I went into* [adult hostel 3]. *The majority of the time being homeless we were in* [adult hostel 1] *and now I'm back in* [adult hostel 3]. *I'm in here nearly two months now."* (Aoife, 19)

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Family members also demonstrated an awareness of the cycle of hostel use that can result from the absence of safe and appropriate housing options for young people who experience homelessness.

*"It's like they're just going round in circles—like he's going from hostels to this place to that place, from that place to* [pause] *and it's like they're bouncing around and there's nothing, you know."* (Teresa, Paul's mother, 49)

Asserting that adult hostels merely provide temporary or "band aid" solutions, Maria, who had accessed numerous adult hostels, felt strongly that there was an urgent need for accommodation options that could potentially divert young people from adult systems of intervention.

*" . . . there needs to be more places like this* [supported temporary accommodation] *than places like* [lists three adult hostels]*. They are not helping the situation. You know, they're just putting a band aid on it, you know, 'We'll figure it out later'."* (Maria, 23)

The risks, including increased drug use and criminal justice contact, associated with young people navigating and/or remaining within adult systems of intervention for lengthy periods are well documented in the Irish context (Mayock and O'Sullivan, 2007; Mayock and Corr, 2013). Furthermore, the capacity of emergency hostels to interrupt and resolve ongoing homelessness appears to be limited (Busch-Geertsema and Sahlin, 2007; May, 2000), a point that was in fact raised repeatedly by young people and members of their families.

*Experiences in Supported Temporary Accommodation (STA)*

At the time of interview, almost half (n = 18) of the young people were living in Supported Temporary Accommodation (STA). Of these, seven reported that they had entered this accommodation during the previous two months and four young people had been living in STA for between three and six months. While the maximum stay (officially) in STA is six months, seven had been granted one or more consecutive placement extensions and had now been living in this accommodation for one year or more. Paul explained that his placement in STA had been extended because of the lack of move-on options.

*"I'm here* [STA] *nearly fucking 14 months or something. It's only meant to be fucking six months like. I really feel like I'm not going to get out of here, no matter how hard I try and it's killing me it is."* (Paul, 21)

Likewise, Patrick's time in STA had been extended. In his case, however,

his extended stay was related to staff perspectives on his lack of prepared-ness for independent living: *"Yeah, they* [staff] *didn't think I was independent enough to live on me own"* (Patrick, 20).

In sharp contrast to the experience of living in emergency hostels, young people who had accessed STA targeting young people under the age of 18 years (n = 2) or those designated for 18–26 year-olds (n = 16) provided positive accounts of their experiences of living in these settings. Fiona and Paul, who both had previous extensive experience of adult emergency ser-vices, provided striking accounts of the relief they experienced when they entered STA.

> *"They rang me back to say, 'Right you're eligible to stay here* [STA]*'. I came in and like I actually walked into the room and I started crying, I started crying 'cause I had me own space."* (Fiona, 19)

> *"I walked into these apartments* [STA] *and I said, 'Is this all for me?', like yeah, and I said, 'Are you fucking serious'. I could not believe it, like me dreams just came true, like I was so happy."* (Paul, 21)

Many of these young people's accounts described a perceived new 'posi-tion' and sense of a positive future as they began to establish new routines: *"Yeah my time here* [in STA] *is kind of mostly going to school, college. Keep myself busy"* (Raphael, 22). Supportive individuals and flexible approaches were identified as important in helping them to maintain their accommo-dation and in enabling them to acquire the skills to live independently in the future. Others highlighted the practical and emotional supports they received from their key workers as particularly important to their personal development and their progress generally.

> *"The staff here* [STA]*, they understand. They support you and give you the best help they can give you like she's* [key worker] *helpin' me to get things sorted like, get this course and all like."* (Patrick, 20)

> *"I've stopped picking up charges and all, you know. Just stuff like that. I've been getting courses. It's mainly positive stuff. When I moved here* [under-18s STA]*, I got given two key workers. It's pretty helpful."* (Eoghan, 17)

Simultaneously, however, many pointed out that their stay in STA was time limited and relatively short: *"My time is up here* [STA] *you know, it's just meant to be six months placement"* (Raphael, 22). This situation gener-ated anxiety for a considerable number of the young people as they con-templated the next move: *"What's gonna happen with that like, what are we gonna do,* [move-out date] *is fucking nearly four weeks and that's one thing*

*that is fucking scaring me so much*" (Paul, 21). Several family members also expressed concern about the time constraints associated with the services delivered to the young people.

> Q. *"And what do you think of the six-month plan or the six-month timeframe?"*
> A. *"No, I don't think it's good, I just don't think so. I think people need support."*
> (Kelly, Conor's sister, 29)

Eric's mother, Tracy, highlighted the potential for the current structure of services, and in particular the six-month time frame allocated to STA, to result in a 'revolving door' response to young people's needs.

> *"It's* [homeless support services] *a recycle programme, they're taking people in to put people out. If they're putting people out, where's them people going to be in the next few weeks? Back in* [adult hostel] *and then back in their services . . . It's just going around, the problem ain't going away."* (Tracy, Eric's mother, 39)

Young people's reports strongly suggest that their exposure to drug use by other service users within STA settings was lower than in adult emergency hostels. Bryan, for example, outlined his experience of living in both settings: *"It's all different like there's people off drugs and people on drugs but like I don't mind that because the drugs aren't being shoved in my face . . . Like even though there is a bit of drugs in here* [STA], *it's different to the* [adult] *hostels"* (Bryan, 22). Despite reports of lower exposure to drug use in STA settings, a number of young people nonetheless expressed concerns about relapse and the implications that this might have for their lives in general and their ability to access stable accommodation, specifically. Indeed, several highlighted the need for drug-free accommodation settings.

> *"I think that it's terrible and there is so many hostels where like for people that are on drugs and that are mixed and then for alcoholics and I do be like say, 'Where's the stuff for people that never did anything'. You know, there's not one of them out there for people who never did anything so you don't have to share with people who are on drugs."* (Sarah, 23)

### Instabilities and Risks

The young people in this study reported a whole array of personal challenges associated with their past and current life experiences. Prominent among these were reports of criminal justice contact, substance use, and mental health problems. This section explores these issues, documenting young people's accounts of what were overlapping and long-standing challenges, in many cases. Their biographical accounts strongly suggest that these challenges and problems were often exacerbated by many years of

uncertainty while living at home, difficulties related to transiting out of home, and their later homeless experiences.

*Criminal Justice Contact*

Reported levels of criminal involvement varied widely across the sample, as did the types of reported law-breaking activity, which ranged from minor violations, such as loitering and public order offences, to more serious criminal offences, including violent disorder, aggravated burglary, and assault. The frequency and persistence of reported offending also varied, with some stating that they engaged in criminal activity as a last resort in order to secure basic needs such as food or clothing, and others reporting more frequent, sometimes daily, offending: "*Usually I would be out and I would get a young fella to do the car and I'd go out and rob a place. That's what I used to do* [every day]" (Kevin, 23). There were also notable gender differences in reported patterns of offending and criminal justice contact. All of the 25 young men interviewed reported 'trouble' with the Gardaí at some point in their lives. Ten of these young men had served a prison sentence and a further three had been placed in custody while on remand, while four had spent a period of time in a children's detention school during early adolescence. The sentences served by them ranged from two weeks to three years, with the majority having served a sentence of between three and nine months. Five had been incarcerated more than once, often for a range of offences, as Eric's account demonstrates.

> "*I went into* [young offenders prison]. *That was the first time I went in when I was 16 and then like I was going in and out lots of times . . . over 20 times, yeah. Like on remand and then getting six months. All for different* [offences]*, like robbing cars, robbing drink, hitting Guards, probably snatching phones.*" (Eric, 21)

Although there were a small number of exceptions, young women reported less frequent contact with the law enforcement agencies and the nature of their offending was generally less serious and persistent. Of the 15 young women interviewed, 10 reported contact with the Gardaí at some point but only one had been remanded to a place of detention and none had received a custodial sentence. A number of young people, including one young woman, reported that they had outstanding criminal charges and, for many of these participants, the prospect of returning to prison was an acute source of anxiety: "*Public order. That's what I'm up in court for, that's why I'm terrified for tomorrow, I know this time if it happens again I'm goin' to lose everything*" (Patrick, 20).

The young men's accounts in particular indicate that first contact with the police typically occurred in their home communities during their early to mid-teenage years and prior to their leaving home.

*"When I was 13 and all I just started getting in trouble with the Guards . . . Just basically robbing, getting caught robbing. Like every time I got arrested it was probably robbing. I was robbing out of the shops, robbing bikes, robbing something, I was just robbing."* (Alan, 17)

*"About 14 or 15 I was getting in trouble, I was drinking, I started drinking about 14 or 15. I started getting in with the wrong crowd and then I was doing drugs and then just coke and all and I started selling coke, selling E, selling hash, weed. I got my step ma's house raided a few times."* (Gareth, 24)

For a majority, involvement in criminal activity increased— and, for a number, only began—following their entry to homeless services. Several linked their involvement in criminal activity to financial strain and the need to generate income to fund basic needs. Eric, who first experienced homelessness at the age of 13 years, had resorted to low-level drug dealing activity to support himself and to avoid what he considered to be more serious criminal activity: *"It was just to get paid somehow because otherwise I would have been out robbing"* (Eric, 21). Similarly, Raphael, once out of the care system, found it difficult to manage day-to-day life on his limited income: *"I had little money, I needed money so I did stupid things. I robbed a mobile phone and I got caught. The police caught me and put me in prison"* (Raphael, 22). Others told that they engaged in criminal activities to fund their alcohol and/or drug use: *"I needed money for things like drink and drugs and obviously to support my fucking habit"* (Paul 21). As a newcomer to the hostel 'scene', Michelle's alcohol consumption increased following her transition to adult homeless services and led to her first experience of arrest in a public setting.

*"I actually got like arrested for the first time like in* [adult hostel]*, like I would never have got in trouble with the police or nothing and then I just, I went on a mad one . . . was just fighting and giving out, not to the staff, like just the residents and then people outside and just drinking on the street. Like I never drank on the street before like."* (Michelle, 20)

Aoife similarly explained that her criminal justice contact was always associated with her alcohol use, which typically occurred in street-based settings.

*"They* [police] *never arrest me sober like when I have a clear head on me, like there*

*is no way I'd ever, I'd never get arrested sober, it's always like when I'm out of it or drunk."* (Aoife, 19)

As the accounts above demonstrate, there was a strong overlap between accounts of substance use and criminal justice contact: *"I've been arrested a few times this year and then over the last few years I've been arrested a lot as well like, just over stupid things like but . . . just drunk"* (Paul, 21). Indeed, initial contact with the police was almost always linked to public order offences: "*God, I got arrested for public orders most of the time, it was just drunken disorders and public orders*" (Rebecca, 18). Since homeless young people's daily lives are often played out in public places, they are of course vulnerable to police attention and intervention. Aoife explained that she tried to 'hang out' in more secluded settings in order to avoid contact with the police: *"We'd* [friends] *be sitting out drinking in anywhere you can kind of that we're not going to get pulled by the Guards"* (Aoife, 19).

Young people's accounts of prison frequently described the physical and emotional hardship of incarceration: *"Doing six months in* [young offenders prison]*, I was depressed, crying all the time"* (Oisín, 24). Furthermore, the prison experiences of several of the young men were dominated by accounts of violence, as Patrick's and Bryan's accounts illustrate.

> *"You could get involved in all sorts and come out worse than you went in* [to prison]*. And the shit you see in there, people getting sliced and fights and all that."* (Patrick, 20)

> *"So in prison, it's sort of like 'hit or be hit', like I was seein' people's faces gettin' like sliced open. This was an everyday thing, so it just kind of became normal to me."* (Bryan, 22)

Bryan had spent a total of two years in prison between the ages of 18 and 20 and explained that prison life, and his experiences of violence in particular, negatively impacted his transition back to mainstream society upon release: *"I was going delusional . . . this is why like prison can have a bad impact on your confidence like, when you're not talking to anyone, it felt weird for me to try and communicate with people when I got out and all"* (Bryan, 22). Similarly, Peter struggled to reintegrate and reconnect with friends in his local community following his release from prison: *"It took me a while to get back used to it everything yeah, I mean I wouldn't even go out with my friends, I was all paranoid"* (Peter, 22). However, a number of others acknowledged some unexpected positive dimensions of their incarceration, particularly in relation to addressing drug use problems: *"It*

[prison] *got me off the drugs like"* (Peter, 22). Furthermore, several reported that periods of incarceration had helped them to distance themselves from neighbourhoods and individuals that they associated with 'trouble'. Bryan was "relieved" at the point of receiving his last prison sentence because it provided him with temporary respite from activities in his home community.

> *"I mean the second time I went in to prison like I was a bit relieved I suppose in a way 'cause I was like at least everything is out of the way, you know, like my area is just full of like gun crime, gun crime, knife crime, you know?"* (Bryan, 22)

Perhaps reflecting on the harsh reality of hostel life, one young man depicted prison as preferable to emergency accommodation: *"Like at least in prison you know you have a routine, you have a roof over your head, you know, you're having three meals a day, there's stuff you can do, you know"* (Craig, 22).

### Substance Use

Of the 40 young people interviewed, only three (all young women) had never tried an illegal drug. For those who reported drug use, early initiation, most often to cannabis, was a common feature of their stories and the average age of first use was 13 years for both males and females. Two of the young men and one young woman reported that they had been introduced to cannabis before the age of 11 years and all the young men had experimented with several drugs by the age of 17: *"I used to smoke hash and I used to take tablets and they fucked me up so bad because obviously half of me bleedin' childhood is blanked out over it"* (Bryan, 22). Typical accounts indicate that young people's initial drug experiences sometimes occurred in the family home or were motivated by curiosity, most often in the context of peer gatherings: *"Friends out of school, out of the class like, it was just they had it* [cannabis]*, and smoking it like, and just passed it"* (Peter, 22). However, many others recounted a pattern of drug initiation and early use that was initially facilitated by older acquaintances and drug users/dealers in their local communities. While the nature and frequency of reported drug and alcohol use varied across the sample, more than half of the young people (n = 22) self-identified as either being dependent on, or having a problematic relationship with, alcohol and/or drugs at the time of interview.

Cannabis use dominated as both the drug of initiation and choice. Indeed, all participants who used drugs had smoked cannabis at some point

in their lives (n = 37), with 24 describing themselves as 'heavy' users of the drug, often reporting daily or weekly use at the time of interview. Lifetime benzodiazepine use was reported by just over half of the young people (n = 21) and 16 stated that they had used cocaine at some time in their lives (n = 16). A smaller number reported a history of intravenous heroin use (n = 7) and, of these, four continued to smoke or inject heroin whilst simultaneously accessing a methadone maintenance support programme. In general, polysubstance use was the dominant reported pattern of drug use.

> "... *just like weed, hash, coke a few times, ketamin—just tried that once though and didn't like it, MDMA, D30s, yellows. E as well but like that was only the odd time, you know.*" (Ross, 17)

> "... *it was cocaine before. I also tried LSD, speed, Ecstasy, tablets like the benzos but only the odd time.*" (Raphael, 22)

Many of the young people described the negative impact of drug use on their lives: *"I advise anyone never to touch it* [heroin]*, it's a bad drug, you lose everything, you lose your friends, you lose your family, you lose everything you have"* (Phoebe, 22). A smaller number also described a pattern of taking one drug to replace or counter the effects of another, a practice which led to a cycle of entrenched and overlapping substance use problems.

> "*I was making myself worse because cocaine and Ecstasy led to taking tablets and then I was dependent on tablets and then I couldn't get tablets and that turned to crack cocaine.*" (Sarah, 23)

> "*We done a sniff of that snow blow but I ended up strung out on it. I was on that stuff for around, about a year. I mean that snow blow, that's bad. And about a year after that I started smoking weed to get off snow blow and then the tablets.*" (Eoghan, 17)

Young people sometimes articulated an awareness of the risks associated with their drug consumption but explained that the perceived benefits outweighed these risks. Aoife's and Michael's accounts demonstrate the emotional complexity underpinning their drug use.

> "*I know like if I drink and I sniff* [take cocaine] *and I do E there is a chance of me dying but I don't care, it won't bother me. It's not going to stop me from doing it. That's why like I drink every day and I take tablets and I smoke weed and that's, like I do when I leave like to block out my feelings and my thoughts so I'm actually like ... And I know it only pushes something back in my head for an hour but I'll still take that bit of like peace in my head.*" (Aoife, 19)

> "*Life seems like it would be easier if you just got stoned* [referring to heroin] *because*

*that would just pass the day. Like it wouldn't make things easier but it would make it, it would fuck my life up but in the short-term it seems like it would be helping but really it wouldn't.”* (Michael, 24)

As noted earlier in this chapter, the perceived 'culture' of drug and alcohol use within homelesss services, and in emergency adult hostels in particular, was claimed by many young people to have had a dramatic negative impact on their lives. Several who reported problematic or dependent drug use explained that the onset of patterns of regular, heavy drug use coincided with their entry to adult service systems in the city-centre.

*“When I came into town* [became homeless] *like I started smoking* [tobacco] *and then I started smoking hash. And as I got older then when I was about 15 I started taking Valium. Then that led on, for years I kept on taking Valium, Valium, Valium. Then at the age of 18 I started trying the heroin I did.”* (Warren 23)

*“I ended up in town* [became homeless] *if I didn't end up in town, maybe I wasn't going to end up on heroin. Maybe the only reason I ended up on heroin was because I was in town, I didn't even know what it was up until then.”* (Maria, 23)

A considerable number of the young people recounted a process of forming connections with other homeless youth, often because of a need for companionship, and these friendships also appeared to anchor them in homeless and street 'scenes' where they were exposed to further risks. For example, Peter, who left home at the age of 18 years, quickly made friends with other residents and through these social connections was quickly exposed to heroin use.

*“I just stuck to meself for a couple of weeks, and then I started making friends in here* [STA]. *I didn't even know that they were on gear* [heroin] *or anything like that, and I just seen them all down in laneways—“What are they all doing down there?” I asked as I went down like. And then it took me a couple of weeks to get into it* [heroin] *like. I was smoking for about two weeks, and then I was using* [injecting] *for the rest of it.”* (Peter, 22)

Similarly, Ashley, who did not consider her drug use to be problematic, explained a dramatic increase in her exposure to drugs following her entry to STA where she currently resides.

*“There's something about being around people like in this kind of environment* [referring to STA] *that you just, you can't, like you can't just not do anything* [referring to drugs]*, like. I didn't even realise how easy it was like to get whatever … I'm sitting there and I feel like I'm in an episode of* Love/Hate. *I feel, like I feel a completely different person, it's really weird like.”* (Ashley, 19)

She went on to question the logic of providing accommodation that

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permits young people with shared problems to congregate: "*It* [STA] *was just in a different world, like I wasn't used to being around people like that, with so many problems like . . . Just, I don't know? I think all of us put together is just like a recipe for, like destruction*" (Ashley, 19).

Reports of heavy and problematic alcohol use also featured prominently in young people's accounts, with many describing a dual role for alcohol in their lives: as a social activity, on the one hand, and as providing a temporary escape from personal struggles, on the other. Young people often simultaneously acknowledged that this form of self-medication merely served to exacerbate their problems: *"My problems with life, when I drink it gets out of me head. But it's not solving anything because the problem's still there the next day"* (Gareth, 23). Several also identified a need for help and support to address their use of alcohol and/or drugs.

> *"I know I need help* [with alcohol use]*, I know that I can't do it on my own, like I knew that from the start but I just had to try and give it a go* [abstinence]. *I don't know what's up with me like, I don't know why I feel like I keep needing, trying to go off my head like, I need to get something out of my system like. I don't know what it is."* (Paul, 21)

Six of the young people had entered a residential treatment programme at some point, sometimes on more than one occasion. Nearly all reported relapse, although a number highlighted the value of the treatment experience: *"They* [keyworker] *actually put me into a drug rehabilitation programme or whatever it's called. And I actually got off it* [heroin]*, do you know what I mean, I was proud of myself"* (Oisín, 24). A further two participants had entered a residential programme for young people 'at risk' because of their substance use, while a further 13 had attended specialist counselling or harm reduction programmes. Young people's accounts of addiction counselling services varied, and while some appeared to benefit from this kind of support, others—particulary those who were 'forced' by a parent(s) or mandated by the courts to attend—were far less likely to identify any benefits: *"I don't have a drug problem. It's* [counselling] *a load of bollix"* (Aaron, 16). Beyond this, several emphasised the need for a stable living situation in order to successfully address substance use issues.

> *"I have done about five sessions with her* [addiction counsellor] *but like because I need some stability in my life, like before I get a course obviously I'll have to be drug-free. I want that, that's all I want in my life. She* [addiction counsellor] *goes like 'That's the main problem in your life that you have been thrown around all your life.'"* (Aoife, 19)

An association between substance use and homelessness has long since been established in the academic literature and it is recognised that the relationship between the two is complex (Fitzpatrick *et al.*, 2009; Neale, 2001). The vast majority of this study's young people had initiated alcohol and drug use prior to leaving home for the first time. However, practically all reported new drug transitions as well as more regular use patterns subsequent to entering the homeless service system. There is strong evidence to suggest that the experience of homelessness—and hostel life in particular—led to increased substance use, often because of young people's high exposure to alcohol and drugs and also because many increasingly used substances as a survival and coping strategy.

*Mental Health Problems*

A large number of the young people reported psychological distress as well as specific mental health problems. Over half, for example, described periods of feeling 'down' or depressed, either currently or in the past. Several also reported conditions that had been previously diagnosed by a mental health professional, including Attention Deficit Hyperactivity Disorder (ADHD), although the most commonly reported diagnosis was depression: *"I knew myself like that I was depressed and had anxiety for years like"* (Eric 21). A smaller number of participants reported a diagnosis of specific psychiatric conditions including borderline personality disorder (BPD) (n = 2), schizophrenia (n = 1), and bi-polar affective disorder (n = 1).

Reports of psychological distress pre-dated young people's entry into homeless services in a large number of cases. Some of the most severely affected in terms of instability, both during childhood and later as teenagers and young adults, were three participants who reported a diagnosis of ADHD. These young people experienced exclusion from home and school, as well as from care placements; their accounts suggest a self-awareness of their behavioural needs and the difficulties they experienced as a consequence, particularly at key transition points: *"Then like I was too wild for them* [residential placement] *as well but they knew I had an anger problem and ADHD and all"* (Warren, 23).

Almost all of the young people outlined challenges to their psychological stability and a considerable number described overwhelming feelings of anxiety and fear as they recounted their life stories: *"I've been in* [hospital] *three or four times over panic attacks, thinking I was going to die you know what I mean"* ( Sam, 19). The young people's narratives reveal a spectrum

of distressed thinking, ranging from vague contemplations of suicide, to more intense thoughts and, in some cases, actions taken in an attempt to end their lives. Several described feelings of hopelessness which they sometimes framed as suicidal ideation. Sarah, who had attempted suicide in the past, had also self-harmed as a coping mechanism.

> "... *like the self-harm, I have thought about an awful lot, I mean that's ... I don't do that out of, 'Oh I want to die, I'll self harm', 'cause I'd neck* [take] *a load of tablets if that was the case or just do something else. Like self-harm for me is like how I feel and I need the feeling.*" (Sarah, 23)

For a large number of the young people with histories of care, uncertainty and instability undermined their mental health and wellbeing, and care placement disruptions were identified by a number as a significant source of psychological distress.

> "*I just turned me phone off* [after leaving foster home] *and like after that like after a few weeks I just got more and more depressed I was just thinkin' of suicide ways then, just thinkin' of ways to kill meself then and then when I moved in here* [STA] *I knew I had to get help then.*" (Patrick, 20)

> "*I've been in about, say I've been in about 13 houses like and then there has been about 10 hostels. In foster care like I was just fucked around and ... 'Just fucking throw her around and it's nothing to her like', like I was kind of looking at them saying, 'Do you think like I have no feelings that you can just fuck me around like that?'*" (Aoife, 19)

In terms of mental health supports, a small number of the narratives suggest a crucial but complex distinction between medication prescribed to them by a professional and unprescribed medication purchased on the street (e.g. Valium). These accounts also reveal the perceived stigma of help-seeking and engagement with mental health services. Eric's account highlights his reluctance to use prescribed medication to manage his mood, although he frequently purchased benzodiazepines as a coping mechanism during periods of particular difficulty.

> "*I've took tablets of my own choice like sleeping tablets and stuff like that. But I'm never going to take any tablets like that* [prescribed by a doctor]. *I said like I'm grand to function on my own.*" (Eric, 21)

Similarly, Aoife spoke of her unwillingness to take her prescribed medication because she preferred to assert her autonomy and maintain control of this aspect of her life.

> "*I don't know why I won't take them* [prescribed medication]. *Like for someone*

*that takes tablets why would you leave free tablets that are going to get you out of it. I think it was because I needed to take them that's why I wouldn't . . . but I think it's because it's someone is like telling me that I need them."* (Aoife, 19)

A number of young people who self-reported mental health difficulties had attended counselling either recently or in the past. Much like reports of addiction counselling, some recounted positive experiences and relationships with individual counsellors, particularly over time, while others identified a number of barriers to engagement. A small number of young people highlighted the difficulties they had experienced at the point of transfer from child to adult psychiatric services.

*"I found adult mental health really, really difficult . . . I was seeing my psychiatrist from when I was living with my mam, I stopped seeing her when I was 18, when I turned 18 . . . you had to stop seeing her so you can go on to adult mental health. I was so upset because she was my psychiatrist for three years like, you know, and really she knew so much about me."* (Abigail, 18)

Several stated that they did not feel "ready" for counselling while others reported negative perceptions of this kind of therapeutic intervention.

*"I went to see a counsellor, that bleeding therapy stuff. It's all bollix, it doesn't help me."* (Alan, 17)

*"I do go* [to counselling] *once or twice and then drop out and I think it is 'cause I always had a fear of like you can't trust a counsellor, that was always put in to me 'cause they'd* [referring to father and step-mother] *be afraid of what I was saying, they'd be saying, 'You can't tell them this, you can't tell them that'. So that is why like now like I need counselling I'd be a bit wary of going to counselling over that, do you know?"* (Sarah, 23)

While previously lacking the readiness or willingness to fully engage with counselling or other therapeutic services, a number appeared to have become more open to the idea over time.

*"I've tried a lot of counselling and it never really worked. I went when I was younger a couple of times and then I just got fed up with that like. That's when I got sick of it like, I was only young then but now I kind of feel like, 'Ah well I'm getting a bit older now like, just have a bit of cop on and go to it.'"* (Paul, 21)

Several other young people outlined the benefits of having received less formal therapeutic supports through education programmes, recreational, and activity-based interventions. Both Craig and Maria, for example, had previously found it difficult to engage with formal counselling services and were now actively engaged in, or seeking out, rehabilitation and recovery

through a creative arts programme.

> *"It's* [referring to programme] *a recovery through art and drama, you know. It's one of the most positive things I've done over the years . . . It's just helps me, you know, it helps me fill in me day and gives me something to do. And I do genuinely enjoy it, you know. Yeah, especially the drama, I do like it. And it is good, we do stuff like plays and shows."* (Craig, 22)

> *"It would be nice to have something to do because I love art. I really want to do it. Because I didn't know about it* [referring to programme]*, I didn't know there was a course that was like recovery and art."* (Maria, 23)

Others, like Eric, highlighted the value of activity-based support which had enabled him to rebuild self-confidence and develop leadership and communication skills.

> *"Down there* [rural community development project] *you're doing all team leading and all, then you're doing all like challenges and all like how if you're left in a forest and all, like it was deadly, like it made you, it was real eye opener to what you can do."* (Eric 21)

## Conclusion

This chapter has documented young people's paths or trajectories into and through service systems. Critically, there was a significant time lapse between young people's first 'out of home' experience and their first point of contact with homeless services. During this time, they stayed temporarily with relatives and/or friends, often returning home for short or more lengthy periods and subsequently reverting to situations of 'hidden' homelessness. It was typically at a crisis point, when all other options had been exhausted, that they accessed homeless services. Many of the young people strongly resisted entry to adult systems of intervention and this reluctance was strongly linked to stigma, fear, and their negative perceptions of these service environments. A large number had navigated the emergency service system for lengthy periods and the experience of hostel life was invariably negative. The young people, as well as several of the family members interviewed, were critical of the cycle of hostel use that many embark upon and also demonstrated an awareness of the risks associated with this cyclical pattern of service use. In general, young people reported far more positive experiences of STA, although a large number who were currently living in these service settings expressed anxiety about the future, primarily because of the lack of move-on options. Indeed, several had been living in these

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settings for a period which far exceeded the six-month official maximum stay.

High levels of instability—compounded, in many cases, by overlapping risks related to substance use, criminal justice contact, and mental health problems—emerged strongly from the young people's narratives. While many of these problems preceded their first homeless experience, the condition of homelessness invariably exacerbated these difficulties. The extent of self-reported mental health difficulties and substance use problems points to an urgent need for stability and continuity in these young people's lives. Equally, these problems highlight young people's need for a range of services and supports in addition to stable housing.

# Chapter 6: Young People, Family and Family Relationships

The significance of family histories and family relationships in generating a more holistic understanding of young people's experiences of homelessness and housing instability is increasingly recognised. This chapter examines the role of family contact and relationships in the lives of 'out of home' young people. Drawing on the accounts of young people and their family members, it explores the complex and sometimes changing nature of family relationships. It also examines the role of 'family-like' relationships, particularly among those young people who had limited or no contact with family members. Experiences of intergenerational and intra-generational homelessness, as well as young people's experience of parenting in the context of homelessness, are examined in some detail and the chapter concludes with a discussion of family member perspectives on services and service provision.

## Young People Negotiating Homelessness: Family Relationships and the Role of Family Support

Despite many reports of difficult, fraught or strained family relationships, a large number of the young people had maintained, or expressed a desire to re-establish, bonds and some level of contact with one or more family members: "*I wish me and my mam had a better relationship 'cause I do love her but I still have hatred for the life she gave me but I do, I do want things to be different.*" (Patrick, 20) This section explores the nature of family relationships as well as the extent and perceived importance of family contact among those who had maintained family connections. It also examines the experiences of those young people who reported limited or no contact with family members at the time of interview.

### Family Contact, Family Relationships and the Process of Reconciliation

While many young people described a sense of relief at the time of leaving turbulent home situations, a majority nonetheless expressed a strong desire to maintain positive, regular contact with one or both parents:

*"I still love him to bits, I still love me da and I always will."* (Sarah, 23)

*"I'd like to repair the bonds with my father and my sister. So if I could do that, I'd be happy."* (Conor, 21)

Levels of contact between young people and their parents varied widely. Eighteen participants (nine young men and nine young women) reported regular (and typically positive) contact with family members. These participants tended to have weekly or daily telephone conversations, called regularly to the homes of family members and/or met them frequently, often in city centre locations.

*"Me ma is always ringing me, she's always like; 'Do you need?', 'Are you OK?', 'Have you got everything?' Yeah ma, relax, you know? Constantly, yeah. Every day . . . like I'd see me ma around every second day, I call up to them or else me da, like he'd come over to* [STA]*."* (Simon, 19)

*"They* [family] *only live up the road so whenever I wanna see them . . . I'd probably see them three times a week. My mam calls up to me* [in residential aftercare setting]*, she came down on Thursday, we went shopping with her and she bought me loads a new clothes and stuff."* (Sinéad, 19)

Approximately 15 young people (11 young men and 4 young women) reported less frequent contact with family members: *"I could see him* [father] *say once every two months. It depends; it's up to myself if I want to see him"* (Shane, 17). In these instances, family contact was depicted as limited and unplanned and meetings were often described as unpredictable and brief.

*"I haven't seen her* [mother]*—I have seen her once, twice this year and once was last week; just 'Howaya?' 'Grand' and just walked into my sister's house then. I didn't want to sit and have a conversation with her or anything. I couldn't be bothered like. It's like talking to a stone wall like . . . You see her, you don't see her, so it's not something that you are expecting like, you are not expecting to see her twice a week or fucking once a month if you are lucky do you know what I mean?"* (Shane, 17)

*"I seen him* [father] *in town there the other day, he said; 'What's up?' I said 'Alright'. Gave me a smoke. He said he had to go, you know. It's different you see, like sometimes it might be a few weeks* [before I see him] *then it might be a few months or years like I was saying so it changes all the time . . . if I see him I see him."* (Ross, 17)

Although these young people had remained in touch with family members since leaving home, they often stated that contact had ceased

temporarily at times for various reasons. For example, during periods spent in prison or when they experienced depression; because they had moved location or been excluded from their home neighbourhoods; or when young people did not want to inform parents of specific set-backs such as losing a job, terminating their participation in a training course, or relapsing on drugs and/or alcohol: *"I didn't want them* [family] *to see me, I didn't want them to see how bad things had got* [referring to drug and alcohol use]. *So I blanked them"* (Sarah, 23). A number also reported that they temporarily lost touch with a parent(s) because of ongoing tension and/or conflict. Paul explained that he and his mother mutually agreed to cease contact just over one month prior to interview because they needed "space" from each other.

> *"About five weeks ago, six weeks ago she* [mother] *said, she text me then saying, 'Ah look I need time, I need space away from all, like I just can't deal with the stress and all like, I just can't deal with it, blah, blah'. And I swear that was perfectly fine with me because I can't deal with your* [referring to mother's] *stress."* (Paul, 21)

Frequently, re-engagement with family members was contingent on improved communication and trust between young people as well as a willingness (on both sides) to accept responsibility for the various issues that had served to previously undermine their relationship.

> *"If I prove to her [mother] over a two or three year period that I am after changing— I'm off the drink and I'm off the drugs—I think we will go back to the way we were, but it will take a lot like for me to gain her trust."* (Rebecca, 18)

> *"Like I see it now like there is two of us in it* [referring to relationship with father] *so like I done wrong and you also done wrong so I shouldn't be the only one that has to apologise or anything, but I would apologise."* (Sarah, 23)

The process of renewing family relationships was typically an incremental one that was often depicted as lengthy and difficult by young people. Successful reconciliation therefore took time, considerable negotiation, as well as multiple attempts in many cases. Conor described the challenge of re-building his relationship with his parents.

> *"It's* [referring to relationship with parents] *a work in progress, big time, a work in progress. There's still a lot of stuff that needs to be gone through, the bonding still isn't there like. It's still surface level stuff, that's the only way I can describe it like. And I find it very hard, I'm still punishing my father in a way for stuff that happened, and stuff I can't let go and that I'm working through in counselling . . . You can feel the resentment, you know, it's still very much alive and the wreckage of that is still there. So I think it's an ongoing thing."* (Conor, 21)

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For many of the young people, finding a balance between distance and closeness appeared to be crucial to their efforts to re-negotiate relationships with their parents.

*"I think it's just to a certain extent we're best off just being the way we are now because it's the best we have been.* [The distance] *eases the tension."* (Fiona, 19)

*"I don't see any way there could have been any kind of repairs made to the relationships* [referring to parents] *if I didn't move away from home . . . it would have been impossible."* (Conor, 21)

For many, separation from family and distancing themselves, at least temporarily, from difficult home situations appeared to help young people to resolve problematic family relationships, as Sinéad explained.

*"I've a better relationship with my mam since I left home like. Like we always used to clash like our personalities are the same . . . We're fine now, we're stronger than ever like I go up to her and stay with her and stuff and we always go out and stuff so it's great now like. The distance has made us way better. I'd rather go into a homeless shelter than stay in my mam's like, I couldn't like, 'cause I don't wanna cause trouble between us like."* (Sinéad, 19)

### The Role of Family Support: Parents, Siblings and Extended Family Members

Many young people acknowledged that it was not possible for them to return home on a permanent basis, certainly at the time of interview, due to fractured relationships or volatile home situations: *"It would be much easier like if I could just move home but I know if I move home everything will be grand for two weeks, everybody will be happy and then I'd be back to square one, do you know what I mean, and I'm not going through all that again"* (Michelle, 20). Nevertheless, the narratives of young people who continued to have some level of contact with family members revealed the strong value they placed on maintaining family links: *"If I didn't have my ma to help me I would be lost, I wouldn't know what to do, do you know what I mean"* (Kevin, 23).

Family members provided numerous supports, including financial aid (e.g. money for food, clothes, college fees, bus fares, rent, tobacco etc.), practical assistance (e.g. transport, baby-sitting, help with signing forms, sourcing housing, and moving between accommodations), and information and advice (e.g. in relation to health care, housing, education, training, etc.). Furthermore, parents, siblings and extended family members were often described as a vital source of emotional support, particularly at critical junctures in young people's lives when, for example, they experi-

enced 'bouts' of depression, an unplanned pregnancy, or criminal justice contact: "*I was only in there* [prison] *for three nights 'cause me ma bailed me out*" (Patrick, 20). Colette and her two children had stayed temporarily with family members after she left her husband several months prior to the interview. She described the important supports they provided until she could no longer stay in their homes (due to over-crowding) and began accessing homeless support services.

> "*I'm very close with my family, thank God they helped me like to get through it* [leaving husband and becoming homeless]*, and they were there for me, do you know, and they were a great help with the kids when I was feeling down now, so, they're a great help that way. I would have been lost without them.*" (Colette, 20)

The supports provided by family members did not cease for many following their entry to homeless systems and services. For example, Jacqui had supported her daughter Rebecca throughout her pregnancy during a period when she alternated between sleeping rough and staying with friends, acquaintances and extended family members.

> "*I was there throughout all her pregnancy, and her clinics, and at* [grand-daughter's] *birth I cut the cord, I looked after* [grand-daughter] *for ten months while* [daughter] *suffered depression.* [Daughter] *was going through a hard time, you know. I was there for her, I'd always be there for her.*" (Jacqui, Rebecca's mother, 57)

During the interview, Rebecca talked about the 'unconditional' love and support she received from her mother, Jacqui, which she depicted as "what family is".

> "*My mother's always there to listen to you like, and no matter how much wrong you ever do to her like she'll always still stand by you, and be there for you as much as she can like . . . That's what family is.*" (Rebecca, 18)

For many young people, simple gestures and everyday actions on the part of family members, such as offering to meet regularly, inviting them for dinner, phoning to check that "everything is ok", or "being there" if they had a problem or needed to talk appeared to encapsulate the meaning of 'family'. Contact of this nature also instilled a sense of safety, security and belonging.

> "[Having contact with family members] *is good, happy like, happy to have some-one that cares about you, you know what I mean. It's a nice feeling.*" (Gareth, 24)

> "*Just being able to talk to her* [mother]*, you know, like a mother and daughter. Having that closeness, it's a kind of closeness you don't get with anyone else, just knowing that she'll always be there for me and that.*" (Rebecca, 18)

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Family members were also said to provide personal encouragement, particularly in relation to returning to education and training, and a number of young people referred to a desire to make their family members feel 'proud' of their achievements.

*"It's great, it is when you have your family supporting you . . . like me sister is seeing me going to college and all and she's like, 'Ah you're doing well!' And you know like I'm working for me money and I'm not standing in the dole queue . . . It motivates me, 'cause then I know once they're not worrying about me I'm happy."* (Bryan, 22)

*"It helps me a lot, you know? It's just, it makes me proud to see her, seeing me ma happy, you know? My number one goal is to make her happy, you know."* (Simon, 19)

The family members of young people also strongly emphasised the benefits of maintaining family links, which a number depicted as mutual in nature. Jacqui first talked about the importance for her daughter, Rebecca, of their regular contact and interaction and later explained that she too benefited from a better knowledge and understanding of her daughter's situation.

*"It's important to keep that link. You can still help to guide them* [children], *you know. I mean they may not always want to be guided like that but at least you're there if they need you. You can get them food, or clothes, or help them out in little ways and you can also be, you know, you can be there emotionally as well."* (Jacqui, Rebecca's mother, 57)

*"It's hard being away from your child as well, you know, so I think it's* [keeping regular contact with 'out of home' children] *good for parents too because you want to know how your child is doing, how they're getting on you know. You want to be there for them."* (Jacqui, Rebecca's mother, 57)

The role of siblings and members of the extended family, particularly grandmothers and aunts, in helping young people to negotiate difficult home situations and subsequent experiences of housing instability and homelessness was emphasised by a large number of the young people.

*"I'm just very lucky really with my family like me aunty and to have me grandparents, you know, because they've always, they've always been there for me and that, you know?"* (Craig, 22)

*"I've a brilliant relationship with them* [grandparents]*, I can talk to them about anything, and I can talk to my nana mostly about anything and tell her everything like, they're like me ma and da like basically."* (Phoebe, 22)

As documented in Chapter 5, young people very often told a story of a

family under enormous pressure at the point when they left home for the first time. At this juncture, a majority did not access homeless or other support services and the 'next stop' for many was the home of a relative. This step away from a nuclear or reconstituted family in crisis meant that relatives sometimes acted as mediators or, alternatively, their presence and intervention served as a 'cooling-off' period between young people and a parent(s): "*If me and me mam were fighting, I'd be the one that'd be running up to me granddad for me grandda to give out to her 'cause I was me grandda's pet*" (Fiona, 19). Family members, including siblings, also provided financial assistance (e.g. money to pay for food, clothes, mobile phone credit, hostel accommodation) as well as practical supports during periods of homelessness, particularly in relation to helping them to secure accommodation: "*Still to this day she* [aunt] *has tried to get me moved in somewhere; she's asked her friends' have they got a room or do they know anybody*" (Sarah, 23). Sarah, who grew up in an abusive home situation and had not spoken to anyone in her immediate family in a number of years, described her aunt as her "next of kin".

> "*She* [aunt] *used to say to me, 'If you need me knock on the door'; she would never turn me away. She is the only one I'd talk to, she is the only one I trust out of me family . . . She is the only person. She is my next of kin and everything I have her down for everything, like she is just everything.*" (Sarah, 23)

Indeed, young people frequently stated that they would be "lost" without the support they received from extended family members, often referring to them as 'like' or 'more like' a parent.

> "*She's* [aunt] *like a ma to me like. She helped me through an awful lot. I'd be lost without her I really would, 'cause she's the closest thing I have to me ma as well and she has always been there.*" (Sarah, 23)

> "*She* [grandmother] *has done everything for me. I'd call her my ma. I wouldn't say 'Ma' but I think of her more as my ma.*" (Alan, 16)

Simultaneously, young people sometimes perceived limits to the supports they could expect from family members, often pointing out that they were themselves dealing with personal issues and challenges.

> "*There's only so much your family can do to help you as well, you know what I mean? Me sister has her own, she's renting a place but you can't be going up every day and staying like, you know what I mean? Can't be burdening people.*" (Gareth, 24)

> "*They* [family] *support me as much as they can but they have their own shit going on as well like.*" (Gareth, 24)

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A number of the young people reported that they sometimes felt reluctant to ask family members for help because they did not want to burden or "worry" them: *"I don't want to bring any worry on them* [family*], they've already got enough worry and then they're worrying about me you know"* (Bryan, 22). And others explained that family members, whilst in contact, preferred to maintain some level of distance: *"Me and my sister have a love/ hate relationship. She's there for me she'd never see me stuck or anything but she wouldn't involve herself in my life"* (Sarah, 23).

Where contact with family members was positive, several young people expressed a desire for accommodation that would allow them to see their families more frequently and under better circumstances. These accounts indicate that visits, including visits from family members, were not permitted in their current accommodation and this emerged as a significant source of stress for those who wished to maintain regular contact with parents, siblings, and other family members.

*"I'd love me ma to be able to* [visit in STA] *. . . I'd love to be able to just come in and show me ma."* (Fiona, 19)

*"Not being allowed have people in like. That's the biggest one* [disliked rule in accommodation]*, like how are we ever supposed to have a relationship or how are we supposed to do anything or, just feel normal and independent and have a normal life when you're fucking living here* [STA].*"* (Paul, 21)

Concerns relating to the rules surrounding visitation were also articulated by family members. While almost all acknowledged that such rules were important in terms of safeguarding young people's well being, they nonetheless felt that exceptions needed to be made for parents and other family members.

*"These young people, the parents should be allowed in to sit with them . . . why can't they do this? It would actually be teaching them for going into a living accommodation on their own, that they can have people with them . . . So you need to be doing that, and that needs to be brought in."* (Tracy, Eric's mother, 39)

*"They're not allowed bring in any visitors . . . she* [daughter] *would like to have visitors because she said it is quite lonely. But even, apart from that, just for me to see where she is would be nice. It would put me at ease you know, yeah, because I mean you'd feel, 'Well it definitely is that', and you know, 'That is where she is' . . . I would have liked even just as a once-off to be able to go in, have a look."* (Geraldine, Maria's mother, 53)

The value placed by young people on family relationships is significant,

even if past events and/or their current circumstances did not, certainly at the time of interview, permit them to return home. Significant also is that many young people and their family members did not feel supported by the existing service systems to re-build and maintain family relationships.

### The Development of 'Family-like' Relationships

Approximately seven young people reported that they had little or no contact with family members at the time of interview. In some instances, these young people stated that they had not spoken to one or both parents in several years: *"I have no family. They don't want to know me. Honest to God they don't want to know me"* (Gary, 18). Young people's estrangement from family was often directly related to long-standing rifts between the young person and their parent(s) or step-parent(s) and, in many of these cases, family relationships had deteriorated to a point where the young person felt no sense of familial connection: *"My family never support me, I'm like the black sheep out of the whole lot of them for some reason. You get used to it though, you know what I mean, it's life"* (Sam, 19). These young people often indicated that they had 'given up' trying to repair broken bonds, following numerous failed attempts. Furthermore, a number did not perceive future family reconciliation to be a realistic option.

> *"Me and my mam's relationship is non-existent, haven't seen each other in a few years. I just don't see them, I don't see the point because if we see each other again we'll just be fighting again. So there's not really much point in my eyes."*
> Q. *"Do you think things will ever change over time or anything?"*
> A. *"To be honest, no. Too much has happened, too much has happened that's just how it is like. I've accepted that. I don't really think about it to be honest."*
> (Michael, 24)

> *"Like me and mam, I don't think we're ever going to speak again. Like it's that bad, like I could not be around my mam. That bridge has been burned. Like very badly, just no going back to that bridge. There was never a relationship there to begin with and now it's just completely gone."* (Ashley, 19)

> *"I have tried contacting him* [father]*, I have tried to get in touch and he just doesn't want to know so I am like, 'Fair enough', I am not going to hold a grudge against him and I am not going to keep trying because I need to move on."* (Sarah, 23)

The accounts of these young people frequently exposed a distinct absence of material resources as well as a lack of practical and emotional support. Indeed, a number stated that they frequently felt 'alone', particularly at crisis points in their lives: *"I'm depressed because I have no family to go to*

*. . . I have no money to pay me rent and I have nowhere to go then and I will be on the streets"* (Gary, 18). Aoife felt that she could not rely on her family for any form of support, a situation which engendered strong feelings of abandonment.

> *"Not one of them* [family members] *would help you like. None of my family would even offer you to stay in their houses or anything even though they know that you are walking the streets all night. I wouldn't even call them family."* (Aoife, 19)

Very often young people who had little or no current contact with family members described their attempts to form supportive attachments or connections with adults or peers with whom they had established relationships in the context of accessing services. For example, Paul and Ashley's hostel-based social networks provided them with practical and emotional support; the reciprocal interactions they described were also closely linked to their efforts to negotiate and 'survive' situations of homelessness.

> *"We* [referring to other residents] *all kind of help each other out, you know what I mean? I've had times when I've needed somebody to talk to . . . I'd look after them if they needed it, like teabags, sugar, milk, anything, like we all help each other out like. We only look to each other, that's it like, because we're all going through the exact same thing so we don't feel guilty or anything because we're all in the exact same situation and we're happy to support each other like, you know what I mean, which is great like and it's great to have them there like."* (Paul, 21)

> *"Everyone* [referring to other residents] *was like a little family. I liked it, it made me feel better like because like I was the youngest that was there* [emergency hostel] *and all the older people, like they kind of treated me like family, like; 'Ah you're like my granddaughter' or 'You're like my daughter' or that kind of way. It made me feel like nice that somebody actually cared like. I felt safe coming back to that room."* (Ashley, 19)

In the absence of alternative sources of support, Ashley appeared to have become increasingly dependent on these 'family-like' relationships.

> *"You have to depend on each other. It's weird like because you don't have family really or you don't have anybody else but them. And then you can't, you don't want to lose them obviously. But it's just, it's a really weird relationship, I'm not going to lie."* (Ashley, 19)

A smaller number of young people, particularly those with lengthy histories of State care, told that they had developed close bonds with staff and key workers in various care or homeless settings: "*I love them* [staff]. *It was like just having a mam, you know*" (Abigail, 18). Chloe described the significant emotional and practical support she received from staff members and

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likened these relationships to a quasi-parental role.

> *"The* [outreach] *staff were always really supportive and understanding. Like I feel they do the role that a parent does for a young girl like, you know, when you move out of home your parents help you move into a house or they help you when you're stuck or if you, if you're really upset about something in the middle of the night and you don't know what to do I call* [staff member]*."* (Chloe, 22)

Not all accounts of 'family-like' relationships were connected to homeless or care service settings. For example, Rayan, who had no family members residing in Ireland at the time of interview, told that his girlfriend's family had become his primary support system. His account illustrates the manner in which some young people sometimes developed new understandings of 'family' in contexts where they could no longer rely on the support of kin connections.

> *"Like my girlfriend's ma looks at me as her son, like, I know it's weird but she'd do anything for me. Like they're always there, like even if something was to go wrong or . . . like I've no family here, so they're like my family."* (Rayan, 16)

It is difficult, in the absence of longitudinal data, to anticipate the longer-term significance of the 'family-like' relationships described by young people who had very limited or no contact with nuclear or extended family members. Nonetheless, it certainly appears that those in this situation sought alternative forms of 'family' and valued relationships that they perceived as stable, reliable and supportive.

## Young People with Histories of State Care: Concepts of 'Family' and Family Relationships

> *"I feel I missed out on a family, I would need to be brought up around them, you know what I mean , that's what family are. I don't know half of them."* (Sam, 19)

Young people with histories of State care described particularly complex understandings of 'family' and family relationships. Many articulated feelings of abandonment, rejection, and dislocation, as well as a fractured sense of belonging, related to the lack of tangible familial bonds. This appeared to be the case even when relationships with non-kin foster parents or caregivers were described as positive and supportive: *"My foster mother was good to me but I just never had a relationship with her and I never felt loved by anybody, by the* [foster] *family like, I had no bond"* (Gareth, 24). Understood in this sense, a perceived absence of family and family connectedness during childhood strongly impacted young people's sense

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of identity and self-worth. Sam and Gareth had been placed in care at the age of two years and six weeks, respectively, and described the challenges they faced as they tried to make sense of their 'growing up' experiences in the absence of family.

> *"It* [referring to the experience of care] *was tough, especially being split up like we may not see each other for ages at a time. Like it's bad, you know. I don't really know my mother, like I nearly know my foster parents more than I know my mother like only seeing her once a week like. I see where they* [biological family members] *all get on with everyone else, you know what I mean. I didn't get the chance of that at all. I would have liked that, you know, to feel like I belonged somewhere like."* (Sam, 19)

> *"I just wanted to know where . . . like I had a lot of things in my head like, why I was fostered and things like that, I wasn't really told. I still haven't been told like. I missed a lot of my upbringing—only started getting photos of my real mother and all the last while, it just makes me more anxious like, just not knowing her, do you know what I mean? My other brothers would have known her and my sister—so I was taken into care so early I didn't have, I didn't want to have any relationship with them."* (Gareth, 24)

A smaller number, particularly those who had moved between multiple care settings, stated openly that they did not understand what it might have been like to have been part of a family during childhood: "*I have a few friends that were very close to their mams and I'd be kind of curious, I'd be like, 'I wonder what that'd be like'*" (Michael, 24). This sense of disconnectedness and lack of intimate knowledge and understanding of family and family life appeared to negatively impact on young people's ability to develop and maintain positive social bonds and/or supportive relationships: "*I don't really know how to talk to them* [family] *or what to talk to them about*" (Patrick, 21). Christopher, who had been placed in foster care at the age of four, felt 'out of place' in his foster home, leading to feelings of isolation and dislocation within the household.

> "*I always kind of felt like out of place there* [foster home] *because I called her Mam but I never really saw her as my mam . . . I never spoke to them* [foster family]*, like I never had a chat with them, I just, I don't know, just didn't.*" (Christopher, 16)

Similarly, Chloe had moved between numerous foster homes from the age of 13 years and explained that the "lack of love" she perceived throughout childhood had a long-lasting impact on her capacity to form emotional connections with individuals in later life.

*"I felt a serious like lack of love, so like feeling unwanted constantly definitely had a serious effect on me. It still affects me in a way with my relationships—probably pushing them away and going; 'You don't love me' or you know? It hurts a lot, you know, it's hard to come to terms with that."* (Chloe, 22)

Of the 14 young people categorised as having taken a care pathway into homelessness, 10 reported some level of contact, ranging from daily to yearly visits or phone-calls, with at least one parent. One young woman stated that she had not spoken to her parents for several years while another young man had never met his mother and father. Eleven of these young people reported regular contact with a sibling(s) and/or a member(s) of their extended family, most often their grandparents. While some stated that they were relatively "happy" with their level of contact with family, a smaller number reported that they would like to have more frequent access and visitation.

*"I want to have more contact with all of them* [family]*, just 'cause I'd see them once every couple of months and two, three, four months like, there was a visit last week and before that we hadn't seen them* [family] *in about six months . . . Like once every couple of months isn't enough, you know? It's your family, they're having visits for a reason, to keep you in touch. So what's the point in having two hours of, two hour visits every three months, you know?"* (Christopher, 16)

A desire for more regular family contact was particularly expressed by young people who reported a close relationships with a sibling(s). Abigail, who was first placed in care at the age of 15, described the distress she experienced when she was informed that she could only meet with her sisters once a week and in the presence of an adult: *"I just broke down, I got really upset, and I was like 'It's just not fair'"* (Abigail, 18). Several young people noted the benefits of maintaining links with family members, particularly siblings, whom they frequently depicted as an important source of emotional support in their lives. Sam, for example, described a close bond with his sister with whom he had entered foster care when they were two and four years old, respectively: *"I'm really close with my sister like because we went through all the different foster care placements together and . . . just, I don't know, we just like. She's the only one I trust, do you know"* (Sam, 19). Sam's sister Stephanie also spoke at length about their relationship, describing a close emotional connection which she attributed to their shared experiences.

*"We're very close like, we're best friends, and brother and sister at the same time, I'd be lost without my brother like do you know—he looks after me, and I looks after him . . . I don't think I'd be living if it wasn't for him like to be honest with you. I*

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*know I'm closer to him, because there's no one to look out for any of us. He doesn't have no one really, I am a support to him and if anything was the matter, he'd come up and tell me straight so that is a good thing like."* (Stephanie, Sam's sister, 20)

In a smaller number of cases, young people with histories of State care reported that they had only recently learned the identity of a biological parent or about the existence of siblings or half-siblings. Gareth was fostered when he was six weeks old and had just recently re-established contact with his "real family", a reconciliation which he depicted as a hugely significant life event. His account highlights a new sense of connectedness with his siblings, in particular, which he framed as a "bond".

*"It's the best decision I've made, I mean, just having people around that, it's your blood like, you know what I mean? I've never had it growing up, sort of like, brotherly love. Didn't have a bond with any of them. Now since I've met me brothers and sisters I have like. Some of them are similar like, you know what I mean? And it's good, happy like, happy to have someone that cares about you, you know what I mean? And it's all, it's a nice feeling, because I've never had it."* (Gareth, 24)

In some cases, however, young people described difficulties associated with re-establishing and re-negotiating birth-family relationships, as well as their role in the family unit, and this was particularly apparent among those who had spent a lengthy period in care. For example, Sam found it difficult to interact with his biological mother after he returned to her care having moved between foster placements over an 11-year period. As household tensions escalated, Sam left his mother's home at the age of 16 years:

*"It all just happened then in the one day like I was there, back in my mother's. If we grew up together like we would have been different like but we didn't like . . . so an argument turns into a big argument, you know, because we don't have a proper relationship like. Like when I was 15 like I'd be walking around with a bottle and nothing would be said about it. If I lived with my mother all my life that wouldn't happen you know. I would have been getting a clip on the head for it."* (Sam, 18)

Despite having complex understandings and experiences of 'family', young people with experiences of State care clearly attached emotional and symbolic importance to family ties. Maintaining links or re-establishing relationships with members of their birth family, particularly siblings, provided emotional support and also enhanced their ability to establish a social identity and form positive inter-personal relationships.

### Young People's Experiences of Intergenerational and Intra-generational Homelessness

As documented in Chapter 3, one-quarter of the young people (eight males and two females) reported periods of family homelessness, ranging from many weeks to several years, representing quite a high prevalence of inter-generational homelessness for the sample. The experience of family home-lessness might be expected to negatively impact young people and their relationships with their parents and/or other family members. Reports of intra-generational homelessness, that is, accounts of homelessness within families (among siblings or parents, for example) (Ravenhill, 2008) were also commonly reported and are examined later in this section.

The age at which young people reported initial contact with homeless services along with a parent(s) and sibling(s) ranged from five to 13 years, although most were under the age of 10 when these episodes of housing instability first occurred. The type(s) of living situations accessed by young people (as children) and their families also varied and included emergency hostel accommodation, squats, domestic violence refuges, 'mother and baby' homes, and hotel or Bed and Breakfast (B&B) accommodation. One young woman reported that she, as well as her mother, father, and siblings had slept rough for a six-week period prior to making contact with services and one young man stated that he had slept rough with his mother on several occasions.

> "*I slept rough with me ma when I was a kid loads. Me ma had to keep me warm. We'd walk around for hours just pulling up at a bench and just sit there for hours. It happened a few times.*" (Kevin, 24)

It was very often the case that young people had limited or only vague memories of these episodes of family homelessness and some were unable to recall the precise circumstances surrounding these experiences: "*I can only remember flashbacks of being there* [B&B accommodation].*"* (Ross, 17) Nonetheless, practically all depicted these periods as difficult, distressing and disruptive. For example, Craig, who had lived in a squat for a period of two months with his mother, two siblings and his mother's abusive partner at the age of nine, recalled the unsafe and sub-standard living conditions he and his family experienced before moving in with his grandparents.

> "It [squat] *had electricity in and all but it used to be freezing and* [pause]. *We had to sleep on mattresses on the floor and that, you know. We just put two mattresses together on the floor and just, because we only had two duvets, just to try and stay warm at night because it would be very cold.*" (Craig, 21)

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Eoghan reported a lengthy history of family homelessness that spanned seven years. The following account describes the constant upheaval associated with his family's transience as well as his profound lack of control and of sense of belonging, around place. The experience also meant that he had limited contact with members of his extended family throughout this period. His family was eventually offered a long-term tenancy in a family homeless support service when he was 11 years old.

*"I was living in B&Bs for seven years, like, nearly every one you can think of. That was rough, that was dog rough. Like all different places all the time, living in hostels. Moving from place to place, travelling all the time like, not seeing your other family. Like you'd be in once place for a few months and then you'd be packing your bags into one place or another and then packing your bags and then going. Scruffy places as well at that. It was disgusting."* (Eoghan, 17)

Kevin's account similarly illustrates the transience and disruption he experienced when, at the age of 11, his mother left his father and they embarked on a period of movement between private rented housing and homeless support services.

*"We stayed in the mother and baby home for a good while, stayed for about six months and we were getting houses for two weeks and hotels for two weeks and B&Bs for two weeks. So me, me ma and me sisters were staying in B&Bs and all. From seven up I was homeless with me ma."* (Kevin, 24)

One of the mothers interviewed was currently homeless and a second had experienced homelessness in the past due to domestice violence. Tracy had entered into situations of 'hidden' homelessness along with her children on numerous occasions during periods when she was forced to flee an abusive partner. She explained her reluctance to access homeless or domestic violence support services during this time, choosing instead to stay in the home of her father.

*"I came from an abusive relationship and stuff like that, I could have gone into one of these places for women and all but I didn't want that because I went to one to look at, a refuge centre, and to be honest with you, I was like to myself, 'I'm going to be stuck in this flipping system for years on end, I don't want that for myself, for me children'. I don't, because that's all it is, and it's a label on you . . . I didn't want that for me kids."* (Tracy, Eric's mother, 39)

Mothers who had experienced homelessness very often expressed guilt and regret about their situations and worried about their ability to support their children. Jacqui, who was currently homeless, explained.

*"I sometimes feel a bit helpless. I don't know what to do, I don't know how to help . . .*

*And that's what I'm afraid is going to happen to her, that she will get pulled down and accept this kind of life."* (Jacqui, Rebecca's mother, 57)

### Intra-generational Homelessness

Twelve participants (just over one quarter) were aware of a family member(s) (sibling or parent) who had experienced 'single' homelessness at some stage in their lives. Among the young people interviewed, a total of 17 family members were identified as having experienced homelessness in their lifetime and seven of these were currently homeless. In one case, a young man reported that his mother had moved into his apartment when she became homeless when he was 18 years old. She died soon afterwards and the young man subsequently lost the accommodation after he began drinking in response to her death: "*I lost the apartment and all like, because I went off the head when my ma, when my mother passed away*" (Warren, 23). In some instances, the experience of having a parent and/or sibling who had been homeless negatively impacted young people's views of homeless services. For example, Sarah recalled her reluctance to access services based on an awareness of her mother's experience: "*I didn't really want to go to the hostels just 'cause of my mam growing up, my ma going through hostels, everyone on drugs*" (Sarah, 23). She went on to explain that her mother's homelessness also impacted on her sense of security as she too felt "destined" to become homeless.

> "*When I was growing up I was just saying, 'I am destined to be like me Ma, I don't deserve anything better but what me Ma had.' It was just the lifestyle I lived as well. I thought we didn't deserve any better.*" (Sarah, 23)

While the knowledge that a family member had experienced homelessness was always difficult for young people—and, in particular, where contact had remained relatively positive—family members who had experienced homelessness appeared to provide valuable support to young people, often because of their personal knowledge of homeless service systems: "*He* [father] *knows everything really about it* [being homeless] *so if I've any questions about it, I normally just ring him or straight away I would ask him*" (Simon, 19). Siblings, in particular, who had histories of 'single' homelessness often acted as advisors by helping to 'connect' young people with suitable support services. Simon and Sam explained:

> "*My sister put me on to this place here* [homeless support service for under-18s] *as well you know, like she used this place before I did and like they help me now with everything.*" (Sam, 19)

*"Me da actually helped me out with this* [becoming homeless]; *he brought me in like, to sign onto the homeless and stuff like that. I didn't know anything about it but me da actually did because me da went through all the systems when he was young. And he brought me in, he showed, like he got me the number [of emergency allocation service] and like told me a few things about it."* (Simon, 19)

Stephanie had encouraged her brother to present to a homeless support service that she had found helpful in the past while Susan, who was also homeless at the time of interview, had guided her sister through the initial stages of living out of home.

*"I kind of, I just kept nudging him* [brother] *to come in* [under-18s 'out of home' provision] *because they're very good, they are. I used to love coming in here like but he needed a nudge, sure you know young people! And I'm only 20 like, but I'm a bit more mature than him like so. But being in here* [referring to homeless support service] *is very good for him like."* (Stephanie, Sam's sister, 20)

*"Alison* [sister] *wouldn't know where* [homeless support service] *is so I brought her over there, or like I had to walk up to the hostel a few times, she didn't know where she was going—I brought her to get paid like. Just simple things, where she didn't know where she was going, and what to do in the tax office and all. Because you have to do all that—get all them forms signed."* (Susan, Alison's sister, 22)

Similarly, Conor's sister Kelly, who had experienced homelessness at the age of 24 years after her discharge from a drug treatment service, was able to advise him when it emerged that he too had developed a drug problem.

*"From experience I have a lot of the information already. And I know how and what to do and where to go you know . . . I mean I've been through this* [homelessness], *and I knew what was available, I knew the services . . . Because of the awareness I had and what I had learnt I could point out that there is a way out, there is help, you know."* (Kelly, Conor's sister, 29)

During the interview, Conor acknowledged the advice and support provided by his sister.

*"Kelly's the one that sorted out an interview up here* [STA], *she helped me with all that. She's constantly advising me in the right direction, she's never led me astray . . . she's almost like a mother in a way. So she's been great."* (Conor, 21)

Family members also imparted information on the 'norms', expectations and structure of particular service environments, thus enabling young people to better navigate homeless support systems. Susan, a family member participant, had become homeless at the age of 18 years because of conflict in the family home, and her sister Alison first experienced home-

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lessness two years later following the death of their mother. Their accounts explain the exchange of information and advice from siblings who had more experience of accessing and negotiating service systems.

> *"Then I told her* [Alison] *to go to* [hostel name], *because I stayed there for the whole summer until I got into* [transitional housing service]. *But like* [hostel name] *is grand, it's a clean hostel, I think it's one of the best hostels for her age. Like I know people in there smoke heroin, but it's still clean. Every hostel you get someone smoking heroin but she's getting up at half-nine, at least she can get stuff sorted with the key worker and all."* (Susan, Alison's sister, 22)

> *"My sister's, well, more streetwise than I am. She says like, 'Don't, do not even dare put my sister in* [hostel 1]*' because, I mean, she knows 'cause she was in there and then the* [service provider] *says, 'We have a place for you in* [hostel 2]*' and Susan said, 'Take it, take that'. I was like, 'What's that like?' And she goes, 'It's clean . . . you'll get along with everybody in there and I know them all there as well.'"*
> (Alison, 20)

Thus, family members were depicted as important sources of social and emotional support as well as providing protection and encouragement to young people, particularly at their first point of contact with services. In many cases, these family members were depicted as role models and individuals that young people could relate to and depend on.

> *"She* [cousin] *helped me through an awful lot; I'd be lost without her, I really would. She kind of had a tough life, she went through similar things but she came through it. I look up to her, I really do, 'cause I do say, 'When I am 40 I want to have a life like yours.' I do be like, 'Yeah, if she can do it.' And she does always says, 'If I am able to do it anybody is able to do it.' And I do be like 'That is great to know.'"* (Sarah, 23)

### Homeless alongside a Family Member

A smaller number of young people experienced 'single' homelessness during their late teens or early twenties alongside a sibling (in three cases) or their mother (in one case). In these instances, it appeared that entering homeless accommodation along with a family member facilitated a smoother transition to hostel life. These young people often explained that they felt better protected in the company of a sibling.

> *"I felt safe because I had him* [brother] *with me and he felt safe because he was with me, do you know what I mean? So we were safe. It made a big difference, I wouldn't have been able to do it* [go into the hostels] *on me own. Now way would I have done it on me own."* (Kevin, 23)

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*"It was good like. We wouldn't get booked in somewhere without each other. If you offered me* [hostel 1] *and my sister* [hostel 2]*, no. You'd go to* [hostel 3] *if you have to because we wanted to stay with each other. I was terrified at the start when I was homeless to go in. I was only after turning 18 and I was terrified I wouldn't be able to, like I wouldn't have gone into the hostels on my own."* (Aoife, 18)

In some instances, young people became separated from a sibling at the point of seeking access to a service due to capacity constraints, a situation which generated enormous anxiety for both the young person and their family member.

*"Me and my sister would try ringing at the same time so we would get booked into the same place* [referring to emergency hostel]*. They would say, 'There's one bed up there' and you already know like I'm not going anywhere, like I don't want to go there on my own . . . my sister happened to get into a hostel and I had to go and get a sleeping bag, I had to go down and stay in a park on my own because I didn't get a bed. I felt it was more dangerous like."* (Aoife, 19)

While having a family member present had the advantage of reducing the stress associated with entering and residing in adult hostels, a number of young people also described the responsibility placed upon them to constantly "look out for" that family member. Aoife reported that she left her rental accommodation to accompany her sister to a hostel because she feared for her safety, while Susan felt pressure to 'protect' her younger sister who had recently accessed homeless services.

*"I left that gaff* [bedsit] *to go down to* [adult hostel] *to my sister, that's how close we were so I didn't want to leave her in the hostel on her own."* (Aoife, 19)

*"We weren't close sisters, but just became close, we had to, well I had to mostly because she's me little sister like, I had to look out for her. She hadn't got a clue what she was doing coming into town."* (Susan, Alison's sister, 22)

There is relatively little discussion of either intergenerational or intra-generational homelessness in the academic literature. However, a recent Australian study found a high rate of intergenerational homelessness among a cohort of clients currently receiving support from specialist homeless services (Flatau *et al.,* 2013). Patterns of intra-generational homelessness have been documented by Smith and Ravenhill (2004) in the UK and, like many young people in the current study, one sibling frequently taught the other how to navigate the service system. The findings documented here are important and suggest that "where trigger factors exist and are not dealt with, they can be transmitted down the generations (intergenerational) and within families (intra-generational)" (Ravenhill, 2008: 112).

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## Young People and Parenting in the Context of Homelessness

Of the 40 young people interviewed, six—four young women and two young men—were parents and one was an expectant father. Five of the six had one child and one young woman had two children. Another young woman reported a miscarriage at the age of 18 years during a period she had spent living in emergency accommodation: *"I actually was terrified of me life when I was staying in them hostels, I actually woke up in* [hostel name] *and I had a miscarriage—like that just shows how much stress I went under"* (Fiona, 19). Five of the six young people reported patterns of housing instability and experiences of homelessness prior to becoming a parent, and five became parents (or learned of a pregnancy) when they were living in homeless accommodation or situations of 'hidden' homelessness.[20]
*"I was in* [STA]. *And then went up to* [county name] *for a while and then my girlfriend got, she fell pregnant* [when living in] *my brother's house in* [county name]. *Then I ended up, just kept on staying in her ma's house and still getting paid off the homeless, I had to stay in the hostel just once a week."* (Warren, 23)

> *"I went in to the hostels then that was 17 . . . Yeah, I was sitting my Leaving Cert then when I found out that I was pregnant. So, yeah, found out I was pregnant then I was still in the hostels but I was moved to a different hostel and I had my own room and everything and I was there right up to a week before I gave birth, so I was there for me whole pregnancy."* (Sarah, 23)

Two of the young men stated that they had played a limited or peripheral role in their partner's lives during the time leading up to the birth of their child, often because of relationship difficulties or because the relationship had ended: *"She* [girlfriend] *had the baby, but I hadn't seen her in about five months or six months before that"* (Oisín, 24).

The young parents in the study reported varying levels of contact with their own parent(s) and/or other family members since they had become parents. Three of the young women stated that they had strong relationships with their mothers, either at the time of interview (n = 2) or during the pregnancy (n = 1). In these instances, the participants' mothers often provided crucial emotional and practical support to the young women during what was often described as a difficult transition to motherhood: *"I was there throughout all Rebecca's pregnancy, and her clinics, and at* [granddaughter's] *birth I cut the cord, I looked after* [grand-daughter] *for 10 months while Rebecca suffered depression. Rebecca was going through a hard time you know. I was there for her; I'd always be there for her"* (Jacqui, Rebecca's

20 One young woman was living in a private rented apartment with her child's father at the time she became pregnant.

mother, 57). In general, however, these young people found themselves negotiating family relationships and simultaneously coming to terms with their parenting role, a process that was difficult for most. Chloe and her mother, who had a turbulent relationship history, appeared to reconnect and become "close-ish" when Chloe became pregnant and subsequently returned home: "*When I got pregnant like and I was in a bit of a shit relationship and she* [mother] *was kind of there for me a bit and, and we kind of got 'close-ish' in a way*" (Chloe, 22). However, Chloe went on to explain that long-standing issues and problems resurfaced and that she and her child subsequently left the family home. She initially stayed with a friend before accessing emergency homeless services.

> "*Out of nowhere she* [mother] *just started a fight with me and just said, 'Get out of my house', and threw me and* [baby] *out. And I said, 'Well once you can hurt me and you can do me wrong because you made a mistake, but twice you don't do it and not to me and my little one-month-old baby'... So from then I haven't spoken to them* [parents] *at all and I don't plan to.*" (Chloe, 22)

Parenting in the context of homelessness was invariably depicted as a difficult, disruptive, and distressing experience. Three young people described situations of 'hidden' homelessness—when they and their children lived in the homes of friends and/or family members for periods of time—and two young women had accessed a service(s) for homeless families when their children were new-borns or infants. Apart from the challenge of meeting their children's basic needs in terms of providing food and clothing, access to health care, childcare, and education, these young women almost always highlighted ways in which the structure and settings of homeless support services served to undermine their ability to parent. For example, they typically encountered difficulties in their efforts to establish and maintain a daily routine for their children within hostel settings and they also worried about their children's exposure to environments that they viewed as inappropriate and/or unsafe.

> "*Like it's kind of mixed up, you can't actually do your own routine with* [children], *the way things are right now like* [in emergency hostel]. *Obviously you'd be happier in your own home where you can do your own thing, you know things like that.*" (Colette, 20)

> "*I didn't realise how bad* [adult hostel] *was until one of the girls that was like completely off her head on heroin just came up to me and she asked me for a fag and she kind of really intimidated me and then she asked me if she could hold* [child] *and she was like completely out of her head on heroin and at that point I just*

*realised that I'm surrounded by all these people, my child is in this environment."* (Chloe, 22)

Meeting the needs of their children typically became increasingly difficult for these young women because of the stress of seeking secure housing and employment and their efforts to simultaneously attend to their own physical and mental health and wellbeing. For example, Colette, who suffered from depression, recalled her reluctance to take medication whilst residing in emergency hostel accommodation because she feared that it would negatively impact her ability to care for her two children in an already precarious environment.

*"I was put on medication by the psychiatrist for the depression. Antidepressants. Like, being honest, I had a prescription for that for about a week, and she says, 'How are you getting on with the medication, are you feeling any better?' And I said, 'Being honest, I didn't take it'. I said, 'I don't want to be depending on tablets, I've two kids, I can't be doped out of it like.'"* (Colette, 20)

Three of the young women had discovered that they were pregnant while they were either sleeping rough or accessing homeless support services and all spoke at length about the challenges associated with being pregnant in the absence of stable accommodation and without financial resources. Rebecca recounted her experience of sleeping rough during the early stages of her pregnancy when she was 17 years old.

*"It was horrible. Like you'd never relax . . . We* [referring to boyfriend] *had nowhere to stay and we'd have to sleep out like, and I was pregnant, so sleeping out under the pissing rain you'd get absolutely soaked and everything. It was horrible, I wouldn't wish it on anyone like. You're freezing cold, and you're thinking like, 'Oh my God, what's going to happen to the baby now? Is it going to be ok?'"* (Rebecca, 18)

Young women in these circumstances either presented to, or came to the attention of, social services and were moved from street-based or emergency hostel settings to residential care or mother and baby homes until they gave birth. While these participants stressed the value and importance of the support they received from these services during pregnancy, a number found it markedly difficult to cope subsequent to moving from these support services to independent accommodation along with their child: *"After I had* [daughter] *we got an apartment, just like a week after I had her, and then that's kind of when everything went downhill"* (Sarah, 23). The problems these young women encountered as they attempted to provide adequate care for their children were often linked to accounts of violence from an intimate partner and/or experiences of one or more of the

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following: postnatal depression, suicidal ideation, substance use, problems with maintaining tenancies, and a lack of family support. Rebecca and Sarah had lived in homeless support services for most of their pregnancies and found themselves dealing with significant challenges as young parents following the move to independent accommodation after the birth of their children.

> *"So we got a lovely house then, and we moved in there, and I had my little girl and everything just went ape-shit. I got postnatal depression and all that, and I didn't bond with* [daughter] *properly I started drinking again after my brother died and then I started taking cocaine again . . .* [Daughter's] *dad got locked up, her dad like he used to beat me up and all that like. So I signed her into voluntary care for a while, while I got myself together."* (Rebecca, 18)

> *"It got hard because when I wasn't looking after meself I was finding it hard to look after* [daughter] *. . . He* [boyfriend] *was still violent and I had me postnatal depression and then me and* [boyfriend] *were finished and he was after moving home and I was on my own and he wasn't really helping much with the baby and I wasn't really speaking to me dad . . . the drinking just got terrible, it got out of control . . . and the cocaine was kind of on a daily basis; I needed it to get up and I wasn't paying my bills and I got cut off with me electricity so a friend took me and* [daughter] *in."* (Sarah, 23)

Sarah went on to explain that her daughter was subsequently placed in foster care. She returned to an adult homeless hostel, at which point her mental health deteriorated rapidly as she became increasingly isolated from family and friends.

> *"I went six months without seeing* [daughter] *and without talking to anybody without seeing family. I literally was just staying in town making a new life for meself in town . . . I had moved into a new hostel then because I didn't have* [daughter] *and all that stuff and then with the drinking and everything I just, I tried to kill meself, I don't know how many times. I took overdose after overdose and I am still here to talk about it."* (Sarah, 23)

Young people often expressed strong feelings of guilt and shame associated with their inability to "be there for" and parent their children: *"He* [son] *is getting older and I want to be there for when he is getting older, do you know what I mean?"* (Oisín, 24). This was particularly the case for young people whose children had been removed from their care, as Sarah and Rebecca's accounts reveal.

> *"It breaks me heart to know she* [daughter] *had to go through all of that because of my mistake. I used to look at myself and compare myself to my mam* [substance user] *and look at* [daughter] *and say, 'Ahh* [daughter] *is going to end up like me'*

*and I used to punish myself an awful lot."* (Sarah, 23)

*"I'd do anything for her* [daughter]. *And all I want to do now is get a home and get my head sorted, and get her back like—like a normal family, like do normal things like pack her lunch and put her to school, and go off and do my own little thing like—instead of being doped out of it all the time, that's my main priority."* (Rebecca, 18)

The following account from Rebecca's mother, Jacqui—who was also residing in an emergency hostel—is perhaps significant in light of the previous discussion of intergenerational and intra-generational homelessness.

*"I do feel sometimes, I get down, I be always saying, 'I'm a bad mother, I should have a home for them* [referring to Rebecca and her child] *to come to myself'. I really do get down over it sometimes. I always say, 'I should have a home for you and* [grand-daughter]*', you know."* (Jacqui, Rebecca's mother, 57)

### *The Experience of Parent-child Separation and Re-unification*

Four of the young people reported that their child had either been placed in foster care (n = 2) or had remained in the care of their ex-partner (n = 2). Most appeared to accept and support the decision to have their child placed in foster care or in the care of their ex-partner, acknowledging that they were not in a position to provide adequate care for their children at that point in their lives. Nonetheless, the experience of separation from their children was always distressing and impacted negatively on their mental health and wellbeing: *"I'd love to see me son more . . . that's what's really eating me alive. That's the killer"* (Oisín, 24). Rebecca's account illustrates the emotional trauma young people typically experienced following separation from their children.

*"I can get quite depressed so like when I get that way I can start thinking very suicidal thoughts . . . just when things get on top of me, you know. Just, you know, everything that has happened to me and the situation I'm in now. Things with* [daughter]*, like all I want is to get* [daughter] *back. It's affected me so much. Like she's all I think about."* (Rebecca, 18)

A number reported that their use of alcohol and/or drugs had increased after it became clear that they would not have contact with their children. Warren and Oisín framed change in their drug consumption patterns in the direction of 'heavy-end' use as a coping strategy.

*"I smoked it* [heroin] *before, I just wanted to get rid of the memories of pain, my heart was broke . . . because I had nowhere to go. I had a lovely house, I had a lovely son there waiting up, I was back to square one, had nothing . . . and that pain and*

*all was gone afterwards, it was gone so like, so I was taking it to block that feeling away."* (Warren, 23)

*"I actually got off it* [heroin]*, do you know what I mean. I was proud of myself. I was only smoking but then I wasn't allowed see me kid like and I was going back using* [injecting]*. I'm trying to cut down but just, it blocks everything out, do you know what I mean."* (Oisín, 24)

All of these young people expressed a strong desire to reunite with their children or to acquire housing that would allow them to see their children more frequently: "*My main priority is get an apartment and moving on out of* [STA] *so I can take my son for the weekend because I haven't been seeing as much of him and I miss him*" (Warren, 23). Parenthood appeared to act as a motivating force in the young people's lives, with many describing their efforts to find secure accommodation and address long-standing issues and problems in order to see their children regularly and play an active role in their lives: *"When I drink I get into trouble so I've gave it up, like I gave it up since my son is born . . . just want to get my own place, no more trouble, I don't drink anymore, just want to get on with my life so I can have my son and my own house like"* (Warren, 23). However, parent-child reunification was generally depicted as a difficult and protracted process that was further compounded by issues related to housing instability and experiences of homelessness, as Sarah's account demonstrates.

*"I have asked for applications for a mother and baby again so that I can start having me overnights. But like the social workers are pleased with; like I have done everything they have asked me to do. And it is actually just an inconvenience now that I am homeless again and that's kind of a kick in the teeth that I ended up back here* [emergency hostel]. *Once we get our overnights started then the process of moving* [daughter] *back home can be sorted."* (Sarah, 23)

### Family Member Perspectives on Services and Service Provision

During interview, both young people and their family members were given the opportunity to discuss, and to convey their perspectives on, services and service provision. This topic prompted detailed responses from parents, in particular, who very often identified perceived gaps in service provision, particularly in relation to support services for the families of young people who are living 'out of home'. Several stated that they had little knowledge about the homeless service systems and talked at length about a need for improved information, advice, and support services for parents that might help them to better understand their children's situations and the housing options available to them.

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*"I just don't know what to do* [to help Paul]*, I don't know half enough about, about the services or about what help is out there . . . I suppose it would help to have someone to talk to about how I can help him, you know? If there was light at the end of the tunnel like . . . I just feel at the end of my tether and that, you know, and I'm actually getting upset all the time over it [crying ]."* (Teresa, Paul's mother, 49)

Q. *"When you say services should be helping the parents, in what ways do you mean?"* A. *"I suppose to make them aware of the options out there for their children and what the parents should be doing to help. I sometimes feel a bit helpless. I don't know what to do, I don't know how to help* [Rebecca]. *I'm there for Rebecca, I'm always there for her emotionally. But I don't know what direction to say to her."* (Jacqui, Rebecca's mother, 57)

The need for support services for family members was particularly emphasised by the parents of young people with mental health problems and/or engaging in 'risk' behaviours (e.g. substance use) from an early age. Many stated that they had limited or no knowledge about illicit substances, problematic drug use, or the management of behavioural problems. For example, Tracy found it difficult to cope in the absence of support when her son Eric returned to the family home following a three-year period in State care.

*"*[Eric] *was a young person that was violent, he was disruptive to himself, tried to kill himself from a young age, there's no parent can fucking even imagine how to handle that, especially when you're on your own . . . They* [mental health service] *are very good, I'd swear by them, but at the same time, I was left to cope with everything after Eric came back out of a care having not lived with us for a long period. There was no link- ins, nothing, 'cause he was over 18, they didn't want to know."* (Tracy, Eric's mother, 39)

Like Tracy, others referred to the need for timely information and intervention when they talked about the challenge of dealing with their children's behavioural and/or mental health problems: *"It would have been nice to learn about that* [referring to daughter's behaviour] *in the beginning"* (Geraldine, Maria's mother, 53). Jacqui suggested that information would have helped her to identify and respond to her daughter's substance use while Kelly highlighted her parents' inability to cope with and manage her brother's drug use.

*"I think they* [services] *could've been giving me more information, maybe a bit of counselling or something—help me, educate me towards the drink and the drugs like and help me to recognise what drugs that was available out there that they could be taking like you know and all that. But nothing was offered to me."* (Jacqui, Rebecca's mother, 57)

*"My parents didn't really know how to deal with it* [referring to brother's drug use]. *They just became so overwhelmed with his behaviour and this is where I think, 'Jesus there needs to be more bloody interventions', whether it's linked in with school or wherever. I think there really needs to be something done and just more and more awareness and you don't get awareness from having one bloody talk. You know, it needs to be ongoing, ongoing. Constant support, constant awareness."* (Kelly, Conor's sister, 29)

Parents were appreciative of any help they did receive. However, several clearly struggled to engage, and interact positively and effectively, with service providers, often because they felt sidelined and inadequately informed about the nature of their child's problems.

"*For parents there should be some bit of a support there . . . the family are just kind of pushed to one side and left to their own devices and told, 'Well you have to this' and 'You have to that', and it's about you and you are failing."* (Patricia, Siobhán's mother, 48)

 *"I was supposed to understand all of that* [referring to daughter's heroin use and mental health problems] *without having no training. They* [services] *had all the training—we* [parents] *didn't have anything but yet we were supposed to understand this in the same way that they did."* (Geraldine, Maria's mother, 53)

A number also noted that services were invariably less responsive and/or available to them when their son or daughter reached the age of 18 years: "*To be honest with you I think when they're kids it's all about getting them to 18 and that's it then. Once they're 18 off you go"* (Teresa, Paul's mother, 49). Additional barriers to accessing support services included parents' reluctance to alert services to their children's needs because they feared getting their child into 'trouble' or, alternatively, having their child removed from their care. Rebecca explained that she disclosed the problematic nature of her drug use to her mother at the age of 16 and that her mother was initially reluctant to seek help.

*"I was like, 'Mam, I'm addicted to cocaine like I need help.' Before this my mother didn't even have a clue I was on drugs. And she never got me help . . . she was afraid to tell the social worker, you see, in case I got taken into care so she didn't know what to do with me."* (Rebecca, 18)

Rebecca's mother, Jacqui, did eventually contact social services at a point when she felt that she had no other choice.

*"So that's when I rang the social worker and asked them, 'Can they help?' I said, 'You have to do something with her or she'll be found dead like.' So they came out then and they made a Court Order to take her* [Rebecca] *into care at 16."* (Jacqui, Rebecca's mother, 57)

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Very frequently, family members articulated a need for greater investment in family support services aimed at helping parents and their children to resolve disagreements and conflict. Perhaps significantly, a number felt strongly that family was neglected and that there was little effort to engage with family members, particularly after the young people had left home: "*Family can help, they should be able to help*" (Tracy, Eric's mother, 39). Kelly was keen to emphasise the importance of family while Stephanie suggested that family engagement could potentially lead to a resolution and thereby avert young people's entry to homeless service settings.

> *"Not everywhere brings the family in. I think family they are just so big in your life like, you know. I know you have to do so much work on yourself but I just think there should be more where you could bring the family in to be involved."* (Kelly, Conor's sister, 29)

> *"[Services should be] bringing families back together . . . people could mend their families back together and work on it like. I think the people should help families get together, instead of just saying, 'Yeah, just get into that hostel.'"* (Stephanie, Sam's sister, 20)

Most simultaneously acknowledged that family reconciliation takes time as well as ongoing engagement on the part of young people and family members and also recognised that such services may not be appropriate in all cases. They nonetheless felt that it was important for young people and their families to have the option of engaging with family support or mediation services.

It is perhaps important to caution that the family member perspectives on services and interventions presented here cannot be presumed to extend to all of the parents and/or siblings of the young people who were participants in this study. As explained in Chapter 3, only a proportion of young people nominated a family member who might have been willing to participate in the study and a total of 10 family members (five mothers and five female siblings) were subsequently interviewed. Nonetheless, their accounts provide important insights into the kinds of services and interventions that parents and other family members deem relevant and enabling for 'out of home' young people and their families.

## Conclusion

All of the young people reported unique family situations and circumstances. However, their accounts demonstrate the numerous ways in which family processes, dynamics and mechanisms can shape and influence the

lives and experiences of 'out of home' young people. A majority expressed a strong desire to maintain positive, regular contact with one or more family members despite reporting difficult or fraught family histories, highlighting the value that young people place on their connectedness with family and the perceived and symbolic importance of 'family' and familial bonds in their lives (Kurtz *et al.*, 2000; Mayock *et al.*, 2011b; Wilson *et al.*, 2012). Although these relationships appear to be dynamic, changing, and continually negotiated and re-negotiated over time, they continued to have a significant and enduring presence in the young people's social worlds. Indeed, the nature and level of family contact (with parents, sibling and grandparents in particular) appeared to impact young people's ability to negotiate situations of homelessness and housing instability and also impacted their access to financial, practical and emotional resources (Mayock *et al.*, 2011b; Mayock *et al.*, 2012). This was particularly the case for young people who reported experiences of intergenerational and/or intra-generational homelessness in that siblings, in particular, who had experienced homelessness were able to help them to navigate the service system (Ravenhill, 2008).

Among those young people who were parents, typical accounts highlight the significant difficulties associated with parenting in the context of homelessness, as well as the emotional distress associated with parent-child separation. A number had accessed homeless services along with their children at some point and, during these periods, young people always reported numerous adversities and challenges, including mental health problems, post-natal depression, and/or substance use problems. These overlapping issues served to undermine their ability to resolve their homelessness as they simultaneously sought to adequately care for their children (Webb *et al.*, 2003). Young 'out of home' parents also reported tenuous peer and familial support networks, highlighting a need for targeted support services aimed at helping young people to access secure and affordable housing with integrated supports for young mothers, in particular. The need for support services that can allow young people to see their children more frequently and under better circumstances was strongly apparent among those who were no longer caring for their children.

In almost all cases, returning home on a more permanent basis was not considered by young people to be a realistic, feasible or, in some instances, appropriate option, certainly at the time of interview. Instead, finding a balance between distance and closeness appeared to be crucial to young

people in their efforts to reconcile fractured family ties (Monfort, 2009; Mayock *et al.*, 2011b). To a large extent, the findings presented in this chapter demonstrate the fluidity of family relationships as well as the practical and emotional support that family and 'family-like' relationships can offer to young people who are living with a great deal of uncertainty. Significantly, young people and their family members were critical of what they perceived as a lack of engagement with family, both prior and subsequent to first and early episodes of homelessness. It seems that these participants viewed family as central to resolving housing instabilty and homelessnes, even in circumstances where a return home was not a realistic option for young people.

# Chapter 7: Young People negotiating a 'way out' of homelessness

The young people in this study shared many experiences, but they were not a homogeneous group: their paths out of home and into homeless services varied, as did their movements following the first 'out of home' experiences and their living situations at the time of interview. Irrespective of their circumstances and experiences, past and present, many were focused strongly on the future and were actively seeking ways to achieve stability in their lives generally and in relation to housing, in particular. This chapter examines young people's experiences of seeking a 'way out' of homelessness. The analysis, which incorporates the views of family member participants, first examines their experiences of education, training and employment, issues almost consistently singled out by young people as critical to their futures, particularly in terms of finding a route to employment and sustainable housing. Young people's experiences of accessing and securing housing are then examined in some detail. The chapter concludes by exploring the young people's perspectives on their current situations and on the future.

## Education, Training and Employment

Young people who experience homelessness frequently report negative school experiences as well as disrupted educational paths; many leave school prematurely and with low or no educational qualifications which, in turn, diminishes their life chances as well as their ability to secure and maintain housing (Chamberlain and MacKenzie, 2003; Mayock and O'Sullivan, 2007; Quilgars, 2010). A majority of the young people in this study similarly reported disrupted school histories as well as early school leaving, processes which frequently started in primary education when many first experienced failure and alienation from school: *"I didn't go in to school for a lot of sixth class. I didn't go in to school, I spent a lot of time out of school on the hop* [truanting] *and I wouldn't go to school and no-one knew I wasn't going to school"* (Bryan, 22). However, despite having had negative school experiences, a majority talked spontaneously—and often at length—about

their educational aspirations and future goals. This section explores young people's perspectives on education, training and employment, highlighting their efforts to re-enagage with education as well as the challenges they are likely to face in securing employment in the future.

### *Schooling and School Experiences*

As documented in Chapter 3, only four of the young people were attending secondary school at the time of interview. In general, educational levels were low for the sample; over half left school before the age of 16, 10 of them without any formal educational qualification, and a further 11 left at the age of 16 years. A majority reported high levels of disruption to their schooling, including periods of non-attendance and suspension, and a large number found the school environment markedly challenging which, in turn, led to conflict with teachers as well as school avoidance, in many cases. Young people frequently openly acknowledged that their behaviour led to problems in the school context, culminating for many in poor relationships with their teachers, multiple suspensions and school exclusion, in fewer cases. However, their narratives also point to a whole range of negative experiences, including a lack of self-esteem, feelings of alienation, and a general inability to cope with the school environment. Chloe was placed in foster care at the age of 13 years and struggled with the academic demands of school because of her separation from her family, a lack of routine, and transience related to multiple placement breakdowns.

The following account describes her sense of alienation at the point of moving to a new school following a placement breakdown at the age of 17 years.

> *"I just didn't like the school, didn't like the people, everyone was way smarter than me in that school as well, everyone was like way above, getting A's and everything and I couldn't do it like so I just felt like, you know, everyone probably thought I was a bit stupid or something compared to them . . . I just felt that I couldn't do it and then I just dropped out before I did my Leaving Cert because I thought I would fail."* (Chloe, 22)

Rebecca, who reported a highly disrupted school history as well as long periods of absence from school, experienced specific problems when she transitioned to secondary school because of her perceived 'outsider' status.

> *"Secondary school, I got bullied in first year, and then in second year I just went psychopathic like because of it. I got piercings and dyed my hair, started wearing*

*fake tan, do you know, to kind of fit in with everyone else like. I found it hard 'cause I was the only Traveller in the school."* (Rebecca, 18)

She went on to explain that her efforts to "fit in" led to trouble and she was expelled at the age of 14.

*"I started doing things, and like getting into trouble, and do you know, just so people would start liking me like. And I know that sounds stupid now . . . I started getting into trouble, and I started dossing off school, and started smoking fags."* (Rebecca, 18)

The difficulties young people experienced with school spanned many domains of experience, including feelings of alienation and exclusion which, in turn, frequently led to negative coping strategies. Young people were acutely aware of the challenges they faced because of their lack of educational qualification and a large number expressed regret about having left school prematurely.

*"Oh yeah* [regrets leaving school], *do you know like, all my friends are going on to college now and all of that and, like, that should be me if I may have just copped myself on and like kept my head down and done it and took no notice of people."* (Rebecca, 18)

*"I wish I had done it* [Leaving Cert] *because I know I could have done it. I mean I didn't go to school very often, I wasn't really in my classes and I did really well in my Junior Cert . . . so I think I could have done well if I stayed in school. Doing my Leaving Cert is always something that I have said I'd like to go back and do at some stage."* (Maria, 23)

*"I wish, if I could change that time* [referring to school], *I wish I would be* [pause]*, I'd love to change it. I'd love to turn time and start from scratch. I wouldn't be in the place I'm in now like, do you know what I mean".* (Warren, 23)

When young people talked about the future and what might help them to achieve their personal goals, practically all highlighted the need to improve their educational achievements. Bryan, who left school at the age of 16 years and had served three prison sentences between the ages of 18 and 20, had enrolled in a training course just months prior to being interviewed, a step which he depicted as a 'turning point' in his life. Professional and peer support were strong positive influences on his success in completing this course.

*"Yeah, so I wanna learn, like. I wanna exercise me ability to learn. You know what I mean? . . . And I'll tell you now what actually inspired me to make a change . . . I had my probation officer on the side-lines eggin' me on while I was doin' me course.*

*So just to let you know he was givin' me the motivation, and like the staff in here* [STA] *and all were givin' me encouragement and like* [another young person] *in here and all was givin' me encouragement, you know what I mean? So like we encourage each other. It's good to encourage someone and bounce off each other, you know?"* (Bryan, 22)

Bryan considered that education was the "best way out of poverty" and homelessness.

"*Like this is what life's all about; gettin' out on your own, gettin' your education and doin' it, you know? Just like doin' what you have to do. Because I always thought like, 'How am I gonna get out of this situation?', and I thought like, education is the best way out of poverty, you know?"* (Bryan, 22)

It is important to note that, at the time of interview, many of the young people were experiencing multiple transitions. For example, some were adjusting to new living situations and a number were simultaneously—and anxiously—contemplating their next move. With the help of professionals, most were seeking ways to re-engage with education while others were trying to maintain a perspective that would enable them to complete their schooling. Alan was anxious to return to education, while Christopher was determined to remain in school.

"*I just need to get back into school. That's all I care about is getting back into school now."* (Alan, 17)

"*Yeah well I want to stay in school and I want education to go well for me and I want to go to college, I want to get a job, you know? Just the basic stuff, I want everything to go alright for me, you know? . . . I'd be able to, like, get my Leaving Cert, I'd be able to pass no bother, but that's not what I want, I don't want to just pass, I want something decent, you know?"* (Christopher, 16)

Believing that educational qualifications were critical to securing a better future, most had concrete plans to return to, or pursue further opportunities to engage in, education and training. These young people were therefore trying to re-establish or re-create a more structured routine to support day-to-day living, homework, and the negotiation of school or a training programme.

### *Training and Employment*

Twelve of the young people were attending a post-school education or training programme at the time of interview and a further 13 had completed a training programme (e.g. FÁS, Youthreach), apprenticeship, and/or FETAC accredited courses in the recent past. In general, young people

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placed a high premium on their participation in further education and training, which they felt would place them in a better position to achieve their educational goals: "*It* [Youthreach] *was the best thing that ever happened to me like . . . I got my Junior Cert and my Level 4 FETAC like*" (Michelle, 20). Several also noted that these courses had helped them to focus on the future and that their successful participation had also enabled them to gradually re-build self-confidence.

> "*My confidence would have been shot and my self-worth and my hope for myself going into a situation like that I would have been terrified. So, yeah, definitely that was a huge confidence boost . . . I enjoy education, I enjoy achievements and being useful more so than anything else. And you know, not waste my time like.*" (Conor, 21)

Fiona, who was soon to return to a training course, looked forward to the routine that accompanied attendance and participation: "*I actually can't wait to go back* [to training course] *in September. I need a routine . . . I love getting up early*" (Fiona, 19). It was very often the case, however, that participation in education and training was compromised by the absence of secure housing. Like others, Fiona and Paul spoke of the stress of trying to maintain attendance and engagement in a training programme during periods they spent living in emergency hostel accommodation.

> "*. . . like me mind wasn't there* [referring to training course] *. . . Like I had to bring, bring me clothes* [from hostel] *and stuff into FÁS with me and like it was breaking my heart and breaking their* [staff] *hearts as well . . . and then when they really seen me, when I was staying in* [B&B]*, when I went through that miscarriage like with all the stress . . . but, I'll tell ya one thing, I've gotten stronger.*" (Fiona, 19)

> "*There was only one module I didn't manage to finish, the only reason I didn't complete it was because there was, like* [adult hostel] *didn't have enough showers and I'm a clean guy. I mean it was absolutely horrible and I'd go, I'd brush my teeth and all, I'd wash me hair, wash me face, me hands and all, but I wasn't physically able to get washed.*" (Paul, 21)

Several young people have also explained that they found it difficult to maintain engagement with educational or day training programmes that they perceived to be below their academic abilities.

> "*I went to places like . . . they are like youth officers in school but like they think you are stupid inside there. The stuff they give you you wouldn't give to a four and five year old. That's why I stopped going. But the one in* [county name] *I didn't even go to because the test they gave me to see if I could get in like you could do it with your eyes closed, you know what I mean. It's not even testing you at all.*"

Q. *"So you wanted more?"*
A. *"Yeah to get your brain going like."* (Sam, 19)

*"Yeah it* [education and training programme for early school leavers] *was a bit boring because I'm used to school so it was too easy for me and I just got bored real easy."* (Alan, 17)

Other practical barriers that impacted negatively on young people's ability to maintain engagement with and participation in education and training included their limited income to pay for fees and/or transportation costs, difficulties in applying or qualifying for various government schemes, and a lack of knowledge and awareness about the types of courses or training programmes available to them.

*"I don't even know what's out there really. I don't even know what's available to be honest."* (Michael, 24)

*"It's miserable like. I pay fuckin' €25 a week to travel out to my course. It's like 45 minutes. It's €25 a week for my bus ticket. Straight away, that's €25 off me money, then I have to pay €12 straight away for this place* [STA]*, then straight away I have to pay for food and I know they give you dinner here but you have to buy your shopping and all and your smokes. So I'm not left with fuck all."* (Paul, 21)

All of the young people aspired to getting a job and many expressed a desire to work in caring professions such as youth work or social care in the future, even if most were acutely aware of the challenges they are likely to face in securing employment. None were employed at the time of interview, although several had endeavoured, without success, to find work. In Abigail's case, the lack of formal educational qualifications hampered her ability to secure employment despite her continued efforts to apply for work.

Q. *"Have you looked for any jobs over the summer?"*
A. *"I've applied for, I've applied for like 25 jobs and I heard back from two! It's all like child minding and stuff like that and I heard back from two. They said like that I needed experience and I was like, 'Yeah, I looked after my sisters', and they were like, 'No, you need professional experience.'"* (Abigail, 18)

When asked about the future and what might help in terms of finding a job, Abigail expressed concern about her history of depression and State care and worried that, if employers were aware of her past, they might not employ her.

*"Like I'm afraid. What if they find out that I have depression and they'd be like,*

*'No', you know, and I'm afraid that they will find out that I'm from care and they'd be like, 'No.'"*(Abigail, 18)

Other dimensions of the past, and the fear that these might impact negatively on their employment prospects, were raised by young people. Those who had histories of criminal justice contact frequently expressed particular concerns in this regard: "*But still I've learned over the last few years that I can make a life out of something. But . . . in the sense of getting a job and stuff like that, that doesn't really look clear but because I have a past* [referring to criminal record] *as well, that's why I don't like feel that I can get a job but I'm trying to get one*" (Eric, 21). While most of the young people might be described as having tenuous links to education, training and employment, they typically held conventional goals and aspired to achieving "the basics" in Warren's words: an education and a job.

"*. . . just go to college and get a job at the end of college when I'm older because I'm still 23 years of age, I've a lot ahead of me. Just get that and don't get into any more trouble with the Garda, then I get Garda clearance off them. And be able to work, that's what I want in my life. Yeah that's me main thing. I want to be like one of yous, I want to work like.*" (Warren, 23)

## Finding a Place to Call Home

"*I want a place that I can get my daughter home to and, for once in my life, have a proper home that I can relax in and settle in, and stay in.*" (Rebecca, 18)

"*I just, now, at this stage in my life, I just want to get my own place, no more trouble, I don't drink anymore, just want to get on with my life so I can have my son and my own house like, do you know what I mean?*" (Warren, 23)

All of the young people interviewed expressed a desire to find a secure home and a large number had some experience of seeking accommodation, particularly in the private rented sector. However, the experience of seeking housing was almost unanimously depicted as challenging and typical accounts suggested multiple barriers to housing security. This section examines these challenges and barriers and starts by exploring young people's views and perspectives on their readiness for independent living.

### *Ready for Independent Living?*

"*I want to get out, you know, my whole life, I never had my own room or nothing like that, you know what I mean? I just want my own space. I know I can get on much better like if I had my own place.*" (Eoghan, 17)

Like Eoghan, the young people almost always expressed an immediate desire for secure, stable housing and some stated clearly that they felt ready to take this step: "*I'm capable of looking after myself you know*" (Eoghan, 17). However, many others recognised that the transition to independent living situations would, in all likelihood, be accompanied by challenges, including those associated with the task of finding and securing accommodation. Warren, for example, was clear that he needed help and support: *"I just need somebody to help me with getting a place, that's what I need. There's nothing out there like, I just need help with getting a house"* (Warren, 23). Young people typically expressed anxiety as they contemplated a route to housing stability and a large number simultaneously articulated a need for preparation for housing prior to making this move. Aware that supports were likely to be removed once she moved from STA where she had been living for nine months, Michelle was anxious to "learn how to be independent" ahead of making the transition to private rented accommodation.

> *"I just want to do, like, because when I move out on my own I'm not going to have all this support and whatever, do you know what I mean like, so I may as well learn how to be independent now so it's not like a big bang when it is all left to me, do you know what I mean?"* (Michelle, 20)

Young people's perceived need to secure independent housing was often related to a belief that a return home was neither feasible nor possible. For example, Maria, who had first accessed Out of Hours accommodation at the age of 13 years and was living in STA at the time of interview, had returned home on numerous occasions over a period of several years, a 'solution' which invariably led her back to homeless services. She felt strongly that moving home was not a realistic option at this stage: "*No, I tried it many times over the years, it's never going to work. I mean, I'm nearly 24 now, I need to be moving on*" (Maria, 23). Her mother also pointed out that living at home "doesn't work" for either of them.

> *"So in actual fact, where she is living* [STA], *and the fact that I know she has somewhere is good for me as well as her. Because it doesn't work while she's living at home . . . I really wouldn't be able to cope with taking her home at the moment, you know? . . . I think the ideal outcome would be for her to get a little place that she could call home ... a little place that she could go on to from where she is now, with say she has support in there."* (Geraldine, Maria's mother, 53)

Paul was also living in STA at the time of interview but, unlike Maria, had prior experience of private rented accommodation. He had been evicted from a number of rental properties between the ages of 18 and 19

years because of his failure to maintain rental payments and/or complaints by other tenants about noise, partying and anti-social behaviour. The end date of his stay in his current accommodation was fast approaching and he expressed a need for help with finding and securing an independent living situation: "*Nobody's helping me and apparently I move out, I'm moving out on the 15th of August . . . It's very, very stressful, it's very hard . . . it's hard to concentrate on me course work and concentrate on having to move out like. I don't know what I'm going to do*" (Paul, 21). Aware of his chequered history of securing and subsequently losing private rented accommodation, Paul's mother held strong views on his need for support if he was to have any success with sustaining housing in the future.

> "*I think Paul, I suppose you know . . . I think he wants, I suppose, he wants his own place that he can come and go and and have people in and, do you know? And I suppose the biggest thing, he needs support, like you know . . . especially at the beginning like to, to learn to manage.*" (Teresa, Paul's mother, 49)

A number of young people expressed anxiety about their emotional wellbeing and their ability to cope with independent living. Patrick, for example, was taking medication for depression at the time of interview and continued to struggle with low mood: "*Like all the stuff I done and all the trouble I'm getting meself in has put me through depression, that's why I'm on depression tablets*" (Patrick, 20). He believed that he needed to continue to work on this specific mental health difficulty before moving to stable housing.

> Q. "*And have you ever tried looking for a place yourself?*"
> A. "*No. I want to get everything going well first. Just in my head, you know . . . I'm not right in meself and I will just lose all motivation . . . gonna wait until I'm fully with it all and then.*" (Patrick, 20)

Perhaps significantly, the family members of several young people expressed a range of concerns about their readiness for independent living and some of these focused strongly on mental health issues. For example, Jess was fearful about her sister's ability to cope with living alone because of her history of self-harm and her problems with anger management.

> "*I would just be real wary of her living on her own . . . Like, I'm just terrified like if she will hurt herself or if she is having one of them days or fighting with her friend . . . she can't control anger. I'm just terrified that she will do something that she shouldn't be doing.*" (Jess, Abigail's sister, 17)

Likewise, Kelly worried about her brother's ability to sustain a tenancy. With a history of mental health problems, having attempted suicide once,

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and having been treated for depression in the past, she feared that he would struggle with many practical aspects of daily life.

> *"No, no, I don't think so* [referring to his brother's ability to live independently]. *I was 24 years of age and I needed support for a good few years, you know. It's not just that, it's all the, the day-to-day stuff, that's the hardest things. It's the . . . it's the hospital appointments, making sure to remember to get to them."* (Kelly, Conor's sister, 29)

Young people also articulated an awareness of the risks associated with an abrupt transition to independent living situations, a move which Maria asserted "very rarely works".

> *But it's places like this* [STA] *where people feel secure. You can't go from* [hostel] *to private rented, you know, you might be able to but it very rarely works. You are not going to be stable enough, you know? It's just not going to work to go from places like that into private rented. You need a transition, you know? Normality for a while."* (Maria, 23)

Similarly, while Fiona looked forward to the "freedom" of living independently, she also perceived a need for support.

> *"Oh like the good thing about it* [STA] *is like, I know it's like, I know it's not, it's somewhere stable for me, like I needed somewhere stable because I don't want to be, I like me own freedom at the same time but like I need support, do you get me?"* (Fiona, 19)

She went on to explain a particular need for guidance on the matter of her cannabis use prior to 'moving on' from homeless accommodation services.

> Q. *"Would you be looking for your own place at the moment?"*
> A. *"No, it's not something that I'm ready for yet 'cause I'm smokin' hash . . . I want to get help for me not smokin' weed . . . I don't know what it is, it's just I need to be able to sleep without dependin' on something to sleep. I'd just like help with that and once I get help with that I'd like to like . . . be independent."* (Fiona, 19)

Several others acknowledged that they were likely to experience difficulties—particularly in relation to budgeting and managing money—that could potentially compromise their future efforts to sustain a tenancy: *"I struggle with managing money anyway"* (Michael, 24). Other concerns expressed, particularly among young men, were related to the potential challenge of managing peer relationships which they feared could lead to 'trouble'. Warren explained that his current search for accommodation had been purposefully limited to housing that was "hidden away" because of his prior experience of anti-social behaviour on the part of friends which

had led to his eviction in the past.

> *"Somebody smashed my old, when I lived in my old apartment, my other apartment when I was younger, somebody threw a bottle through, do you know what I mean? But now I'd say like more people would be jealous and all, like you get people jealous and all like do you know what I mean because I wouldn't let people into it."* (Warren, 23)

Finally, a number of young people expressed anxiety about feeling lonely and isolated in the context of living alone. Rebecca explicitly expressed a need for follow-on or floating support which she feared would not be available to her following the move to independent living.

> Q. *"So do you think you'd need support if you were living on your own?"* A. *"Yeah, definitely. Someone just to check up on me and to call in for tea and a chat and that you know? So you don't feel so alone . . . like they keep saying to you in all the hostels I've been to, 'There's outreach and you can call to outreach, and outreach will call to you.' You move out and you never hear anything from anybody. Nobody gets in contact with you. So the outreaching is just bullshit."* (Rebecca, 18)

Previous longitudinal research in Ireland has suggested that the process of exiting homelessness is an incremental one, characterised by transition and change as young people adjust to being housed and attempt to make a 'new life' (Mayock and Corr, 2013). This process also presents risks and many young people experience setbacks, including returns to homelessness, as they attempt to navigate the uncharted territory of seeking and maintaining housing. Young people with histories of homelessness or housing instability often lack the essential life skills and financial supports required for independent living (Broadbent, 2008) and are likely to need training and support in order to re-establish the skills they need to live independently (Jones *et al.,* 2001).

## *The Experience of Seeking Housing*

Young people's experiences of attempting to access housing related mainly to the experience of seeking private rented accommodation. All talked repeatedly about the barriers they faced, which centred largely on economic and systemic constraints of access. The challenge of saving enough money to pay a deposit in order to secure accommodation was repeatedly raised by young people who were currently seeking, or had previously tried to secure, private rented accommodation.

> *"Straight up deposit, they [landlords] all want money up front. And I haven't got*

*money to give them . . . I don't know how I'm going to manage, how I'm going to do it."* (Paul, 21)

*"It will just be the money, obviously social welfare help but once you move in you need to get the deposit which can be like a month's rent plus more."* (Maria, 23)

The challenge of saving for a deposit was significant, but an even more serious and frequently mentioned barrier to securing private rented housing was that most owners or agents of rental properties do not, according to young people, accept rent allowance: *"Any place I have rang it's 'No', it's 'No rent allowance'"* (Aoife, 19). Aoife had been actively seeking private rented accommodation and had met with strong competition from "cash in hand" renters.

*"I went up to view a place and I mean there was 20 people outside and like if they are before you, bang, straight away they are getting it. But I left my name down and nobody rang me . . . it's obviously if someone comes to you with cash in their hand, straight away you are going to take it."* (Aoife, 19)

The problems associated with finding properties where rent allowance is accepted were highlighted repeatedly by young people. Like a large number of others, Sarah and Alison talked about the stress associated with seeking accommodation in a rental market that discriminates against those in receipt of rent supplement.

*"It's hard. I ring, I go view places . . . it's just trying to find someone that will accept rent allowance, that will wait for a deposit. You know, some people are saying, 'Yeah, I will accept rent allowance but I want the deposit up front.' So it is just literally trying to find, trying to find something."* (Sarah, 23)

*"There was one place and it was gorgeous and she* [landlady] *was like, 'Yeah, you can move in and all.' But it doesn't accept rent allowance and I was like, 'Ah here'. But hopefully, like life turns around for the better—sometimes for the worse and the better—I've been through the worse so it has to turn for the better. It has to."* (Alison, 20)

In cases where rent allowance was accepted, additional problems were reported and young people almost always drew attention to the poor conditions of these rental properties*: "It* [apartment] *was very cheap rent and there was no deposit required because there was so many people living there"* (Paul, 21). Chloe, who had moved to private rented accommodation from an adult homeless hostel three months prior to interview, told that she did so in desperation despite the poor condition of the apartment.

*"I'd saved up €1500 to get the, to pay the deposit and the first month's rent . . . I*

*just took it* [rental property] *because I was desperate . . .I think she probably took advantage of the fact that I was in such a bad situation . . . But I'm trying to get out of there, having real problems with, you know, just the apartment, things broken, plug sockets hanging out of the walls, noise . . . So basically like I was, you know, trying to, hoping to get housed finally."* (Chloe, 22)

The problems that most experienced as they attempted to navigate rental markets were numerous. For example, most had little or no experience of dealing with landlords, they did not have a trusted individual to help them to view rental properties, they were unable to supply references from previous landlords, and several did not have regular or reliable internet access. Discrimination was identified as an additional barrier to securing private-rented accommodation, with several reporting that landlords and agents discriminated on the basis of age and stereotypes associated with young people, particularly those who are in receipt of social welfare payments: *" . . . they don't like the look of you at times and they tell you 'Go', like . . . if they don't like the look of you, they don't take you on either"* (Sophie, 20). Rebecca talked about adult perceptions of young people as a further barrier because of the assumptions they make about their lifestyles.

*"It's very hard because, do you know when you're young, they think , 'Oh, drink, drugs, partying, clubbing, the place being broke up.' That's instantly what they think like when they see a young person coming. And it's not fair like because we're all put under the same* [label]. *Like I genuinely don't want a place to drink or take drugs . . . when you're young they instantly see trouble like."* (Rebecca, 18)

The rejections by landlords and estate agents experienced by many were strongly associated with the absence of security of income, which severely curtailed young people's ability to save and secure enough money to pay the required deposit and a month's rent in advance of occupying a property. Landlords' low tolerance and rejection of tenants who relied on rent supplement were other critical barriers to securing housing, as was discrimination against young people within the private rental market based on their status as 'young' and often apparently on perceptions that they were incapable of maintaining a tenancy. Presumably in their pursuit to find the 'best' tenant, landlords and agents hold the ultimate 'key' to housing security for these young people, a situation which was strongly apparent to those who had been previously or were currently seeking privated rented accommodation. It is perhaps unsurprising in this context that several expressed strong concern and disillusionment, in some cases, about the prospect of securing housing.

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*"I don't know how I'm going to afford my own place like because with the rent allowance you still, it's still your responsibiltiy to pay at least €30 of the rent every week. I'm on €100, so that's €30 gone; then bills, then shopping, then college like."* (Michelle, 20)

*"I suppose like just more frustration about what's the situation with housing, what's possible and what's not possible. I think I got a bit of a run around . . . so I suppose I felt a bit left to the wayside that way or being treated differently . . . but to find residence is very tough, you know, to get somewhere in Dublin."* (Conor, 21)

The family members of young people were acutely aware of the challenges they faced as they attempted to seek and secure housing. Kelly, who had considerable past experience of homeless services, was critical of the multiple barriers to housing security that young people typically face.

*"This is your housing, this is your bloody security. Everybody needs their security, a secure place to live in, a place to call home . . . It causes a lot of stress for him* [brother] *now especially; he doesn't know where he's going or what's happening, you know. And he's so young. And the price of rent is absolutely crazy."* (Kelly, Conor's sister, 29)

Relative to young people in the general population who are typically staying for longer in the parental home (Eurostat, 2005; Jones, 2002; Smith, 2009), the experiences of this study's young people reveal an early independence trajectory, albeit not one synonymous with inclusion, and often precisely the opposite. The crucial moment of living independently was blocked for a majority for several reasons: because of their poverty, unemployment status, past traumas, and ongoing personal challenges, including substance use and mental health problems, in some cases.

### Identity, Self and the Future

Young people frequently talked spontaneously about the future and about their aspirations and hopes for a life beyond homelessness. As documented earlier, a large number were contemplating or actively seeking a route to stable housing and were also aware, often based on personal experience, of the barriers they faced to securing stable housing. Simultaneously, many were attempting to re-engage with education, while several were also trying to address other long-standing issues in their lives, including substance use and mental health problems. This section examines young people's perspectives on their situations past, present and future and provides considerable insight into the 'identity work' that typically accompanies transition and change in their lives.

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Young people's narratives frequently referenced the past, suggesting a self-conscious awareness of a 'link' between their earlier life experiences and their current situations. For example, Maria, who had a history of problematic drug use, felt that she had missed out on several years of her life: *". . . when you are taking drugs you are frozen at the age you took them so, even though I'm going on 24, I still feel 16. Time stands still in a lot of ways"* (Maria, 23). As Fiona explained her efforts to "find" or re-discover herself, she also reflected on the past and articulated a sense of a lost childhood.

> *". . . I'm trying to find me own person now because I don't know who I am like.. I want to be who I was when I was 13 . . . it's like I want me childhood back."* (Fiona, 19)

Ashley is another young person who talked about the past and how her life had been transformed in a negative sense—*"I'm like homeless obviously"*—over the past year.

> *"Like I feel a completely different person, it's really weird like. I feel like I'm associated now with drugs and drink and crazy people* [laugh]. *And I'm like homeless obviously and all this. And then like compared to a year ago, where if somebody had have told me that, I'd be like 'Ah no way, that's never going to happen to me.'"* (Ashley, 19)

A large number of the young people were dealing simultaneously with homelessness and the legacy of difficult and often traumatic life experiences. Those with a history of State care stood out in this regard. Abigail was unusual in framing her experience of care in positive terms.

> *"I'm proud of where I am now. Like if I didn't go into care I don't think I'd be the person I am now. Like, I'm independent and I don't know many people my age that are independent, you know? So I'm proud of that."* (Abigail, 18)

Most with a history of State care constructed their pasts negatively, describing feelings of abandonment as well as a fractured sense of belonging. Chloe told that she felt unwanted and unloved while Raphael's account referenced loss and loneliness.

> *"Those kinds of things like, they really affect you like when you don't feel someone loves you literally like go out craving and looking for that love and that attention that you're missing. So definitely like feeling unwanted constantly like, definitely had a serious effect on me like."* (Chloe, 22)

> *"I felt kind of lost like . . . in that situation, leaving home and staying with parents that I don't even know and everything was hard. I couldn't speak to anybody like, in my house and nobody really talked to me that much like they used to, you know."* (Raphael, 22)

Many others, apart from those with a history of State care, were struggling to come to terms with sigificant events—bereavement, experiences of abuse or violence, and/or family breakdown—which they felt had altered the course of their lives.

*"Like I still suffer every day over my ma's death, you know like I still find it hard every day over my ma's death like I still get really upset about it as if it was only yesterday. But it's been, like it's hard like, like I am not saying 'Oh God it's been seven years' like that's how long out of home and everything as well, do you know what I mean?"* (Sarah, 23)

*"I never thought like at 18 I'd look at me ma dead and then at 19 look at me da fighting it* [cancer] *. . . And I heard me da had cancer and me and me da had kind of got close so I was kind of 'Why is this happening in life', like only 20 years of age and no mother, no father—like what the fuck? Like me head was just all over the place like."* (Alison, 20)

Despite the challenges they faced, there was a strong sense from the narratives that young people were actively seeking ways to re-build their lives. These narratives of change were particularly apparent among those young people who had moved to living situations that were more positive, even if many considered themselves to be "still" homeless. Maria, who hoped to move to private rented accommodation in the near future, explained: *"You are homeless if you are here* [STA]*, this is for homeless young people so, yeah, I'd consider myself in the homeless services. Obviously I have my own place now but it's still not mine, mine"* (Maria, 23). Like several others, Craig talked about the transformative effect of moving to accommodation that offered greater stability and provided him with a sense of purpose as well as a renewed sense of self-sufficiency. Unlike Maria, he preferred to consider his current accommodation "home" for as long as he remained there.

*"Like I pay rent here in* [STA] *every week and I have somewhere to come, you know? I consider this, while I'm here I'll consider this me home, I keep me flat tidy and I have all me stuff, I read, I do a lot of reading, I've got a lot of books and stuff, I've me own telly. Like everything in there is mine. I'm quite self-sufficient, you know, I look after myself. I try not to rely on people too much."* (Craig, 22)

Chloe, who felt she was "getting there", depicted the process of becoming "settled" or having a home as an incremental one: she had returned to education, secured childcare for her daughter, and wanted to continue along a path of re-building her life.

*"I would love to be settled now and that would really like top everything. I mean I'm in college, she's* [daughter] *in crèche, I know what I kind of want to do, I'm*

*kind of getting there with everything. Like you know, I've got like a set routine and everything and all I really want now is just to have a home that I know I don't have to move again and again and again and I can just settle my life and build it more."* (Chloe, 22)

Indeed, many of the narratives conveyed the notion of transformation and a reformulated 'self' focused on personal growth, capacity, and moving forward: *"I'm trying to keep meself straight. Like, I don't wanna be the old person I used to be . . . I'm not taking no steps back no more"* (Fiona, 19). Eric explained that his motivation to change had come about quite suddenly through a critical personal realisation, which he depicted as a 'turning point' in his life.

> *"So like all that* [referring to realisation that friends disappeared when he no longer had the financial ability to supply them with alcohol and drugs] *kind of affects me as well but it made me want to change then because I was standing on the street corner one day and it just came to me, 'I can't like this life anymore.' I've moved on from standing on the street . . . that time when I got that feeling: 'I don't want this life, to be feeling this way. I don't want to be feeling this way anymore.' So like I just said to myself I had to do something."* (Eric, 21)

Other narratives of change focused to a greater extent on shifts at a personal level related to a re-evaluation of past activities. Bryan was determined to "get out of this homeless stuff" and described a transformation in his thinking and behaviour.

> *"I'm more of a compassionate person now where I say, 'I shouldn't have been doing that and hurting people'* [referring to criminal activity] *and all that shit. Where I did used to think just about money and how I was gonna get me hash and tablets, you know? Now I think different, like I don't run from the police, I don't smoke hash, I'm gonna earn me money through education, you know? And I'm gonna get out of this homeless stuff."* (Bryan, 22)

Young people frequently recounted their more recent achievements, highlighting the progress they had made in areas such as addressing a substance use problem, preparing for parenthood, and progressing towards independent living.

> *"I was actually proud of me own progress 'cause like having come from* [adult hostel]*, having to fill meself with vodka and tablets to get me asleep from walking in here* [STA] *stone cold sober and able to go through me day without crying and like afraid to go to sleep. That's what I'm proud of myself for."* (Fiona, 19)

> *"I'm proud of the fact that I'm sorting myself out and I'm getting a place of my own, and done all the parenting classes and I'm doing things people are asking me to do.*

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*I'm proud of that. Like things are slowly but surely getting better like."* (Rebecca, 18)

Sinéad, who had a history of State care and felt she was "in a good place", was anxious to emphasise—and convey to others with care experience— that it was possible to overcome a negative past and to achieve personal goals.

*"Well I feel like I'm in a good place now, like I'm at a point now where I'm growing up and I know what I want and no one's going to hold me back. I want to do it like and anyone that's in care like should just think about themselves and not think about anyone else. It's like never say never just 'cause you're in care, like it don't mean that you can't do the things that you want to do."* (Sinéad, 19)

The language used by young people to frame their more recent positive experiences was distinctive, as many talked about "growing up", "moving on", and gaining or reclaiming a sense of "independence".

*"I'm looking forward to the future . . . it's just about moving on really, isnt' it? It's just, when I move on, I'm going to keep positive."* (Eoghan, 17)

*"It's* [life] *going good because I'm in school and moving on and all that kind of stuff. I'm doing my driving lessons so everything is going good at the moment."*
Q. *"Anything that might help?"*
A. *"Myself, just me. I can either make it or break it so it's all got to do with myself."* (Shane, 17)

*". . . like just growing up as well, yeah, so I'm really just changing me life around, become me own person really, you know, becoming independent on me own."* (Simon, 19)

Another striking feature of many narratives was that young people tended to construct progress and change as something they needed to accomplish individually. For example, Shane stated that it was *"just me . . . all to do with myself"*, while Simon was becoming independent on his own. There were many other examples of this narrative of individualisation, which suggests that young people felt responsible for their own biographies.

*"I think it's just me now, I think everybody has done so much for me that I need to* [pause] *. . . I know everything I need to do and I can do. I need to stop using drugs and go into treatment maybe and get a clean and fresh head. And then try it again."* (Maria, 23)

Furthermore, a number expressed a reluctance to accept help, feeling that it was "up to them". Some of these accounts also suggest an element of self-blame on the part of young people for their current situations.

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*"I have to do it myself like."* (Phoebe, 22)

*"I was kind of my own torture, like, I don't think anyone could have done anything for me."* (Rebecca, 18)

*"I mean, it's not that I don't want anybody's help. I just don't want . . . it's not anyone's job to fuckin' help me, you know. I feel like I got myself into this mess, I mean why should anyone help me?"* (Paul, 21)

While several young people constucted the present positively and seemed relatively optimistic about the future, the reflections of others and their aspirations for the future were complex, often replete with concerns about the past as well as anxieties about long-standing issues in their lives. When asked about the main challenges in her life, Rebecca responded: *"Dealing with problems without drink because that's what I used to use* [pause] *drink was a way of dealing with my problems"* (Rebecca, 18). Several others reported concerns and worries that centred on the challenge of dealing with a drug and/or alcohol problem, and those who were living in emergency hostel accommodation always expressed strong anxiety about the future.

*"When you're in here* [adult hostel] *. . . you're just drinking and fucking dabbling in drugs. Just, you've no self-confidence, you're just down and it's horrible. Town* [city-centre] *is full of it . . . you can fall into addiction very easy. Just drinking to pass the day."* (Gareth, 24)

*"My life, it's just going down the drain. I just don't want to be homeless. I just want to get my own house and just get a course and I don't know like. That's what I want for my future to get into a course and have my own house or my own flat or something, not walking the streets. I want to also get off drugs, which I am trying."* (Aoife, 19)

*"Where I'm going to end up. I don't want to be fucking homeless. I just don't know. Just to be able to see a way out sometimes."* (Michael, 24)

Stigma was perhaps one of the most significant barriers faced by young people as they tried to make positive adjustments to their lives. Many were dealing with marginality on several levels, as well as associated problems of mental ill-health, alcohol and/or drug use, and abuse histories, in many cases. These young people's narratives frequently pointed to a strongly devalued self because of their homelessness and substance use problems.

*"I suppose there's a lot, I suppose the stigma attached to being an addict, accepting being an addict, social anxiety. I'd be really kind of wary of people. Just don't feel worth anything after being that person and being in addiction, you know. It doesn't*

*matter what you used or where you ended up you are left in the same state of mind, the same, 'You are all addicts' kind of thing. So it's just kind of sitting with that I suppose I find the hardest."* (Conor, 21)

Referring to her history of heavy alcohol use, Rebecca pointed out that she had moved on from this phase: "*I went through a phase in my life as a teenager who grew out of it like*" (Rebecca, 18). However, she worried about the enduring nature of an 'addict' identity.

*"It's like, once a dog gets a name, they'll never get rid of it. Like no matter how much you come off it, or what you do, people still say, 'She's an ex-alcoholic, she's an ex-drug addict'. I don't want to be an ex-drug addict or an ex-alcoholic. I want to be a person."* (Rebecca, 18)

These devalued or 'spoiled' identities were often reinforced by others with whom they came into contact in their everyday lives.

*"So I've noticed people, people that would have everything given to them, treat people completely differently than people who have had it like hard. Like they judge people automatically . . . Like we all know that none of us ever expected to have this life so there's not point in judging us like . . . that's the stereotype obviously."* (Ashley, 19)

*"When they* [police] *see me now even still they're all like poking me and punching me in the arm saying, 'Oh yeah you'll never change, you're never gonna change.'"* (Bryan, 22)

*"You know, being honest, society in general, they just think, 'He's an addict', you know? 'Oh you better watch out, he'll rob your handbag, he'd take the ring off your finger.' I'm not like that, I don't fucking, I've never hurt anyone . . . So I just don't like the way people are very judgemental . . . like they think if you're homeless or that you're on drugs, they just look at you like you're a piece of fucking dirt on the ground."* (Craig, 22)

Young people's perspectives on the future were connected to their past experiences and, in particular, with their ongoing struggles with stressful or traumatic life events. Furthermore, their narratives of the future were strongly mediated by their current living situations: those who had accessed accommodation perceived as providing relative stability and/or the space to work towards the achievement of personal goals tended to offer (more) positive perspectives on their futures, even if many continued to experience challenges. Many of these accounts also demonstrated the narrative movement from 'homelessness' to 'home' (Farrugia, 2011) that often accompanied young people's perceptions of positive change in their lives. Those, on the

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other hand, who perceived no improvement in their living/accommodation circumstances, very often because they were navigating emergency systems of intervention, struggled to see a 'way out' of homelessness. Indeed, many considered that their situations had deteriorated and would continue to deteriorate in the absence of a route to housing stability. Irrespective of their current living situations, all of the young people were experiencing multiple transitions and many were living with a great deal of uncertainty. Perhaps more than anything, they were anxious to convey that they did not see themselves—or want to be viewed—as only or forever homeless.

## Conclusion

The young people in this study were often standing at very different transition points in relation to education, training, employment and housing. What they shared, however, was an early trajectory to independence, a 'journey' that was initiated prematurely and under circumstances not of their choosing. Most had experienced years of housing instability, were not well resourced materially or financially and lacked the kinds of support systems usually available to their housed peers. They were typically aware—often based on recent or past experience—of the multiple barriers they faced to housing stability and, in this context, many expressed anxiety about the future. Furthermore, the range of difficulties reported by the young people—substance use and mental health problems, educational disadvantage, lack of skills training, and deficits in life skills—strongly suggest a need for a range of appropriate housing options tailored specifically to meet their needs. Finally, since the transition to independent living is a process rather than a one-off event (Mayock and Corr, 2013), young people will need supports in housing, including the provision of specialist health and care services, that are responsive to each individual's needs.

# Chapter 8: Conclusions and Recommendations

As documented in Chapter 2, this research aimed to generate an in-depth understanding of the life experiences of homeless or 'out of home' young people in Ireland and comprises Phase 1 of a longitudinal study that will track the homeless and housing trajectories of the study's young people over time. The study priviliged the accounts of young people who are currently experiencing, or recently experienced, homelessness and also includes the perspectives of a family member of one-quarter of the participating young poeple. This aspect of the study design is unique and, although only a proportion of the young people consented to us contacting a family member, the accounts of these participants provide important insights into the complex and under-researched dynamics surrounding the family lives of 'out of home' youth.

This study is qualitative and the generalisability of the findings is clearly constrained by the small sample size. However, from the outset, the research was concerned with experience, process and meaning, privileging the life stories of young people and incorporating the views and perspectives of their family members where possible. This report has provided an in-depth account of the processes associated with young people becoming homeless as well as their transitions into and through the homeless service sector; it has examined family relationships and dynamics and has documented young people's experiences of seeking a 'way out' of homelessness. Importantly, the study's biographical approach has enabled an exploration of the subtleties and complexities of the lived experience of homelessness and housing instability. Finally, for the first time in an Irish context, this research provides valuable insight into the views, experiences, and perspectives of family members, thus providing a more nuanced account of the family relationships of homeless young people.

All of the young people who participated in this study had the common experience of leaving home prematurely. However, the events precipitating their home-leaving varied, as did their experiences following the initial days and weeks out of home. This diversity of experience, coupled with their varied life and homeless histories, posed genuine challenges to the analysis and representation of their life stories. However, these challenges

are themselves illuminating and demonstrate that there is not a single set of circumstances or experiences that defines 'homelessness' among the young. This final chapter discusses six key issues arising from the findings documented in the previous chapters:

- Young People's Paths 'Out of Home'
- Young People's Homeless 'Journeys' and Service Interactions
- Criminal Justice Contact, Substance Use and Mental Health
- Young People's Families and Family Relationships
- Experiences of Intergenerational and Intra-generational Homelessness
- Barriers to Housing Stability

## Young People's Paths 'Out of Home'

Perhaps the most striking finding arising from the analysis of the circumstances surrounding young people's first 'out of home' experiences is the range and diversity of the circumstances surrounding their paths to homelessness. The following four major pathways 'out of home' were identified:

Pathway 1: Histories of State Care

Pathway 2: Household Disruption and Family Instability

Pathway 3: Family Conflict, Family Violence

Pathway 4: Problem Behaviour and Neighbourhood Stressors

While these typologies help to capture and categorise particular types of experiences, it is important to emphasise that they were not mutually exclusive routes through which young people transitioned out of home. An important factor that permeated all of the four pathways identified was the extent to which young people had experienced personal loss, either by virtue of family breakdown or through bereavement (often the death of a parent or sibling), events that were frequently framed as 'turning point' experiences. Indeed, family experiences in general impacted on young people in complex ways and family environment emerged as a major theme in the reasons surrounding young people's home-leaving (Rosenthal *et al.*, 2005). The influence and significance of the departure or absence of a father was also strongly apparent in the life stories of a large number of the study's young people.

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Consistent with the findings of previous studies in Ireland (Mayock and Carr, 2008; Mayock and O'Sullivan, 2007; Mayock *et al.*, 2008), this research highlights a strong and ongoing association between histories of State care and homelessness, with 14 young people (35%) identified as having taken a care history pathway to homelessness. While these young people share many experiences with others who took different routes out of home, a striking and crucial element of their accounts centred on the impact of the care experience on their lives. At the point of entering the care system, many appeared to have only limited understanding of why they were placed in care and practically all reported multiple care placements, an experience which is linked to a host of well-documented negative consequences (Rubin *et al.*, 2007; Unrau *et al.*, 2008). Furthermore, at the point of leaving care, a majority appeared not to have access to the kinds of supports that would help to ensure a successful transition to independence. Indeed, exits from care were often unplanned and these young people frequently left the care system with only limited knowledge of availale support services and without aftercare support.

Finally, it is important to emphasise that a dynamic interaction between individual and structural factors was strongly apparent in young people's account of becoming homeless. For example, practically all grew up in deprived neighbourhoods and a majority came from impoverished family backgrounds. Most had experienced problems at school which led, in many cases, to their disengaging from the educational system. They had extremely weak ties to the labour market and very few were in receipt of any income from work-based activities. Therefore, while (sometimes severe) home-based difficulties permeated the narratives of a large number, their experiences of housing instability and homelessness are strongly linked to their economic and social marginalisation and associated vulnerabilities.

## Young People's Homeless 'Journeys' and Service Interactions

The young people's stories do not convey a simple or linear stream of events or experiences following their first 'out of home' experiences; rather, their situations were characterised by a multiplicity of changed statuses over time that were not necessarily connected in a neat or orderly fashion. Importantly, the vast majority did not become visibly homeless or make contact with services when they initially left home and, instead, entered into situations of 'hidden' homelessness, typically staying with relatives or friends for either short or more lengthy periods. This initial phase saw many

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moving back and forth between the homes of relatives and/or friends and the family home, often for a period of many months or even years. Indeed, many accounts reveal the unpredictability, insecurity and contingency of their movements subsequent to first leaving home. There was also strong evidence to suggest that young people actively avoided or deferred contact with homeless services, often because of the stigma of homelessness and the fear of entering hostel accommodation. While the vast majority of the young people (n = 36) first experienced homelessness between the ages of 10 and 17 years, only one-third first accessed homeless accommodation through services targeting 'out of home' young people under the age of 18 years.

Young people's reluctance to access the adult homeless service sector was even more apparent, and a considerable number had actively resisted entry to adult emergency hostel accommodation. It was typically when their options narrowed and/or their situations had deteroriated that most reluctantly made contact with these services. Young people rarely talked about receiving supports during their stays in emergency hostels and they, as well as several of the family members interviewed, were critical of the cycle of movement through emergency systems of intervention that typically followed. The risks associated with the move to adult homeless services has been repeatedly highlighted in the Irish context (Mayock and O'Sullivan, 2007; Mayock *et al.*, 2008) and is a transition which has been described as "one of the most significant contributors to ongoing or prolonged homelessness among young people" (Mayock and Corr, 2013: 59).

In sharp contrast to accounts of living in emergency hostels, those who had accessed supported temporary accommodation targeting the under-18s and/or 18–26-year-olds generally reported positive experiences, and several talked spontaneously about the sense of relief they felt at the point of securing a place in these accommodation types. In these settings, young people had access to supports, they typically re-engaged with education or training, and also began to form trusting relationships with staff members, particularly their key workers. The relative stability they experienced also enabled more frequent contact with family members, even if family visits were typically not permitted in these settings. Nonetheless, the future remained uncertain for those young people who were living in supported temporary accommdation at the time of interview and practically all expressed anxiety about their next move, often fearing a return to emergency hostel accommodation because of the lack of move-on options.

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Several of these young people had been living in supported temporary accommodation types for well over the offical maximum stay period of six months.

To a large extent, the findings of this research highlight the role of services in shaping the experiences of homeless or 'out of home' young people. A majority identified major changes in their lives since they first left home or a care setting and, for a considerable number, these changes were related to negative and harmful social and personal experiences. When young people achieved relative stability and moved out of emergency systems of intervention, their situations typically improved. Those who moved to youth-oriented service settings had re-engaged with education and training, and these service environments also engendered feelings of personal safety and security. Those, on the other hand, who cycled through the system of emergency provision invariably reported higher levels of substance use and criminal justice contact and they were markedly less optimistic about the future; furthermore, many articulated feelings of despair as well as acute anxiety about their ability to secure stable housing. Finally and importantly, the study's findings highlight the crucial role of aftercare provision for young people who are exiting the care system. Certainly, there is evidence that aftercare services are not currently reaching all children and young people with care experience, a situation which clearly compromises the life chances of this vulnerable group.

## Criminal Justice Contact, Substance Use and Mental Health

Consistent with the findings of research in other jurisdictions, homelessness was not the only challenge facing the young people interviewed. Indeed, most recounted one or a number of issues that are likely to pose risks to their wellbeing and their ability to secure and sustain housing. Across the sample, and particularly among young men, the early age at which a number became involved in anti-social and criminal behaviour is significant. Furthermore, irrespective of gender, alcohol and drug use were very present in the social activities of a large number, often from their early teenage years. At the time of interview, polysubstance use was the dominant pattern of consumption and 22 young people considered their use of drugs and/or alcohol to be excessive or problematic. Importantly, 'problem' behaviours, including substance use and criminal activity, invariably intensified subsequent to young people's first contact with the homeless service system and, in particular, following their entry to adult systems

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of intervention. The absence of a stable home exposed a large number to situations and experiences for which they were ill-prepared, and the instability of their living situations was a major factor in the emergence of many of the difficulties reported. Young people's heightened susceptibility to substance use and criminality as their 'careers' in homelessness progress has been documented previously in Ireland (Mayock and O'Sullivan, 2006; Mayock *et al.*, 2008; Mayock and Corr, 2013), highlighting the crucial importance of ensuring that young people do not embark on a cycle of navigating emergency systems of provision.

A large number of the study's young people recounted past and present experiences of psychological distress and a considerable number reported a diagnosed mental health problem(s). There were also numerous reports of suicidal ideation and deliberate self-harm. Issues related to unresolved grief and loss, traumatic childhood experiences, household instability, family conflict, and disruptions to care placements were frequently implicated in the distress experienced by young people. Reports of a preference for self-medication through the use of illegal drugs and/or non-prescribed benzo-diazapines, and a corresponding reluctance to engage with psychological services featured strongly in several accounts, highlighting the complexity of delivering appropriate mental health services to 'out of home' young people.

### Young People's Families and Family Relationships

Family circumstances and dynamics have traditionally been framed as precipitating factors in young people's homelessness. Indeed, several decades of research have produced strong consensus on the role of the family environment—including experiences of conflict, abuse and/or violence in the family home—in pushing young people out of home (Ferguson, 2009; Hyde, 2005). Experiences of childhood trauma related to conflict with parents or step-parents (Martijn and Sharpe, 2006; Pleace *et al.*, 2005; Smith *et al.*, 1998) and/or exposure to parental substance use (Mallet *et al.*, 2005; Ferguson, 2009) also feature strongly in the literature on youth homelessness. Nonetheless, in more recent years, research has also highlighted family as a crucial supportive mechanism in the lives of homeless young people. For example, research in the US and Australia has demonstrated the benefit to homeless young people of maintaining connections with family (Mallet *et al.*, 2010), while the positive role of family, particularly maternal, social support in facilitating the transition to stable

housing is relatively well documented (Milburn *et al.*, 2009; Mayock *et al.*, 2008; Nebitt *et al.*, 2007; Raleigh-DuRoff, 2004). Research in Ireland has demonstrated that family re-engagement is possible, even for young people who have experienced difficult or fraught family situations, and that renewed family relationships play a significant enabling role in the lives of homeless youth both prior to and after the move to stable housing (Mayock *et al.*, 2008; Mayock *et al.*, 2011).

In the current study, almost half (n = 18) of the young people had regular contact with a family member(s), often reporting at least weekly and, in some cases, daily contact by telephone or in person. The accounts of an additional 15 young people indicate some, albeit less regular, contact with a parent(s) and/or sibling(s), and a smaller number reported little or no contact with their family. The vast majority of the study's young people expressed a desire for family contact and they clearly valued family connections, whether with parents, siblings, or members of their extended family. Many were keen to emphasise the emotional support provided by family members, who frequently provided material assistance, including financial aid, practical assistance, and information and advice. The mothers and siblings interviewed similarly highlighted the importance of having and maintaining contact, with many describing a close emotional bond with the participating young person. Where contact with family was positive, both young people and their family members expressed a desire for accommodation that would permit more frequent contact and visitation. It was almost always the case that visits were not permitted in the accommodation types where young people resided and this rule was depicted by young people and their family members as diminishing opportunities for family communication and re-unification.

Young people with histories of State care had particularly complex understandings of 'family' and family relationships, often related to feelings of abandonment, rejection, and dislocation. Yet, a large number had some level of contact with a biological parent and, very often, with a sibling(s). Maintaining links or re-establishing relationships with members of their birth family, particularly siblings, provided emotional support and also enhanced their ability to establish positive inter-personal relationships.

## Experiences of Intergenerational and
## Intra-generational Homelessness

Intergenerational homelessness, which occurs when an individual who has experienced homelesssness in their own right has one or more parents who was also homeless at some point in their lives (Flatau *et al.*, 2013), featured prominently and was reported by one-quarter of the study's young people. This finding is noteworthy and suggests that earlier occurrences of homelessness during childhood pose a significant risk of subsequent homelessness during adolescence and young adulthood. In other words, a cycle of homelessness may develop in which the experience of homelessness as a child increases the risk of future homelessness and repeated use of homeless services (Flatau *et al.*, 2013). Typical accounts indicate that experiences of family homelessness were highly disruptive and traumatic for young people and these experiences are also indicative of high levels of poverty and social exclusion. Reports of intra-generational homelessness, that is, homelessness *within* families (among siblings or parents, for example) (Ravenhill, 2008) were also commonplace and 12 young people were aware of a family member who had experienced 'single' homelessness at some point in their lives. It is perhaps significant that these family members frequently advised young people about how to access homeless services and also provided them with information about the 'norms' and structures governing particular service environments.

The social and personal costs associated with homelessness are clearly magnified when homelessness is experienced over the generations and within families. Patterns of intergenerational homelessness are poorly understood and under-researched both in Ireland and internationally (Flatau *et al.*, 2013). While the current research did not set out to specifically examine the phenomenon of intergenerational homelessness, the findings point to a significant risk of subsequent homelessness among those who experience housing instability as children within the family unit.

## Barriers to Housing Stability

The young people in this study invariably expressed a desire for secure housing and a large number had some experience of seeking accommodation, particularly in the private rented sector. However, practically all talked repeatedly about barriers to housing stability and their accounts highlight numerous economic and systemic constraints of access, including: the challenge of saving enough money to pay a deposit; a rental market that

discriminates against those in receipt of rent supplement; the poor standard of more affordable rental properties; and discrimination by landlords due to age-related stereotypes and their status as homeless. Other problems that most experienced included: their limited experience of dealing with landlords and agents; not having a trusted individual to help them to view rental properties; the inability to supply references from previous landlords; and the lack of regular or reliable internet access. The young people interviewed also articulated an awareness of the difficulties they were likely to face in securing employment, often because of their poor educational qualifications. This emerged as an additional perceived barrier to housing stability because of issues related to affordability, particularly in light of the poor protective mechanisms available to young people who are welfare dependent.

Overall, the study's findings reveal strong structural barriers to housing stability for marginalised young people who experience homelessness. Social protection is one critical factor, particularly in the context of repeated reductions to the maximum subsidy available to rent supplement claimants in a rental market that is out of reach for a majority. Affordable housing options for young people on benefits or low incomes are currently extremely limited, which means that homelessness may be the only option for young people who are welfare dependent and, consequently, unable to access affordable housing.

### Recommendations for Policy and Service Provision

The recommendations arising from the findings of this study address the following issues:

- Prevention
- Early Intervention
- Crisis Intervention
- Aftercare Provision
- Education and Training
- Supporting the Family Relationships of Homeless Young People
- Housing and Housing Supports for Young People

### Prevention

Preventative strategies focus on children and young people who may be 'at risk', but who are not actually homeless, and these measures and actions

need to start at the earliest possible juncture. The *Youth Homelessness Strategy* (Department of Health and Children, 2001) placed a strong emphasis on prevention and this emphasis requires renewed impetus. All agencies working with children and young people within local communities have a role to play in preventing homelessness by providing early warning signs of risk factors and ensuring that there are referral arrangements with agencies targeting children, young people and their families. Since homelessness cannot be attributed to a single cause, multi-agency work, involving housing, social work, education, justice and health sectors, will be necessary components of effective prevention.

### Raising Awareness of Youth Homelessness

Raising awareness of homelessness among children, young people, parents and teachers is an important component of any attempt to prevent homelessness within local areas. A key challenge is to raise awareness about homelessness in a way that creates an understanding beyond 'rooflessness'. If this is not achieved, many recipients of messages that aim to raise awareness may well feel that they (and others) are invulnerable to 'homelessness'. Additionally, young people may not recognise that they are living in situations of 'hidden' homelessness when they find themsevles moving between the homes of friends and/or extended family members.

### Family Support Services

Family support services play a critical role in supporting children and young people 'at risk' of becoming homeless. Current thinking suggests that to be most effective, family support services must be integrated, community-based, and targeted at children and families who are most in need. More than anything, family support must seek to identify and encourage the strengths and problem-solving abilities of all families and foster confidence in their ability to overcome adversity.

The findings of this research indicate that earlier occurrences of homelessness during childhood pose a significant risk of subsequent homelessness during later life. This finding points to the fundamental importance of ongoing support for families who have experienced homelessness, particularly in relation to issues around early home-leaving and informal care arrangements, patterns which tend to precede young people's entry to the 'offical' network of homeless youth.

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*Engaging Young People*

This study's findings suggest that young people frequently rely on peer and family networks and 'word of mouth' for information about available services. It is also significant that many of the study's young people conveyed little or no sense of entitlement to help and assistance at times when they felt they were 'in trouble' or having difficulties in their own homes. Children and young people need to know more about services and they also need to feel that seeking help is a positive step toward resolving home-based difficulties.

### Recommendation 1

School and youth services are settings where work on raising awareness can potentially be achieved. Schools in local areas where there is a known high risk of youth homelessness should be identified and engaged with. A prevention package should be designed and delivered to these schools, in collaboration with teachers. This awareness raising process should be youth-friendly.

### Recommendation 2

The Child and Family Agency (Tusla) should establish a Working Group to:

- Prepare a training pack for family support services to support them in identifying and recognising the early warning signs of young people 'at risk' of homelessness. This pack should also identify processes to enable family support services to respond to the needs of 'at risk' young people.

- Develop a communications strategy which sets out a plan to raise awareness among young people of available services and their rights/entitlements. This awareness campaign should involve a range of communication approaches (such as the use of social media, youth cafés etc.).

### Early Intervention

While the aim of preventing youth homelessness is clear in Irish youth homelessness policy, the language and concept of early intervention is far less visible. Early intervention involves providing assistance to young people who are obviously 'at risk' or who are in the early stages of homeless-

ness (McKenzie and Chamberlain, 2003). Young people who live on the streets or in hostels are just one segment of the homeless youth population and there are many more who alternate between unstable living situations (the homes of family members, friends and so on). This study's analysis of young people's early trajectories into homelessness indicates that a very considerable number lived in situations of 'hidden' homelessness, often for considerable periods, prior to making initial contact with homeless services. Their reports also suggest that at least some young people (and their parents) may have been motivated to resolve their difficulties at this juncture. This finding strongly suggests that a substantial number of young people could be prevented from entering the homeless service system through earlier intervention to resolve problems within their families.

### Parent and Young Person Mediation Services

This research has identified family conflict and arguments with parents or carers as key factors leading to a pattern of young people moving 'in and out' of home and, ultimately, to their becoming homeless. In the immediate aftermath of a family argument, it is understandable that young people may think that the breakdown is permanent. Where there has been physical, emotional or sexual abuse a return home is unlikely to be a suitable option. However, for others who leave home after a family argument, it is often feasible to seek to resolve these underlying problems. Parent and young person family mediation provides a good mechanism for the exploration of relationship difficulties. Young people may perceive mediation to be less threatening than individual counselling, as the focus is on the family as a unit and not on them personally.

### Information, Advice and Guidance for Parents

The study's findings indicate that the parents of participating young people frequently felt isolated in their efforts to deal with challenging issues —including mental health problems, substance use and/or anti-social behaviour—that appeared to become more marked as their children transitioned from early to late adolescence. Very often, parents were reluctant to disclose problems because they feared getting their children into 'trouble' or being taken into care. Many parents in this study did not understand, or had no access to information on, the homeless service system. Information on the range of services and supports available to 'out of home' or homeless young people needs to be more accessible to parents

(see also later recommendations on Supporting the Family Relationships of Homeless Young People). It should not be assumed that parents are not in contact with their children, or that young people have limited or no contact with family members.

RECOMMENDATION 3

The Child and Family Agency should fund, on a pilot basis, a Parent and Young Person Mediation Service to support families. This model of mediation work could be provided by a family resource centre.

- Parent and young person mediation should consider the involvement of extended family members where appropriate, as many young people who are 'at risk' of homelessness appear to maintain relationships with grandparents, aunts, uncles, and others in their extended families.
- Where possible, fathers need to be included in family work. Likewise, young fathers, such as a number in this study, need to be supported and encouraged to maintain contact with their child(ren).

RECOMMENDATION 4

The Child and Family Agency should develop a handbook for parents on the homeless service system and on the rights and entitlements of 'out of home' young people.

RECOMMENDATION 5

Homeless services should ensure that staff engage and work with family members with the consent of, and on a basis deemed appropriate by, young people. Services also need to be aware that young people's perspectives on family may change over time, which means that family reconnection and/ or reconciliation is a process for many.

### Crisis Intervention

Where preventive measures and early intervention initiatives fail, there will be a need for emergency or crisis intervention. Crisis intervention services are also required for young people who suddenly or unexpectedly find themselves out of home. There is clearly a need for continued investment in crisis/emergency accommodation. However, our findings suggest that consideration needs to be given to community-based services and inter-

ventions in particular.

While Garda stations are visible in local areas and remain open and accessible for longer than most community-based services, their use as the venue of first contact for 'out of home' children and young people is problematic and requires a policy change (as recommended on numerous occasions over the past decade or more).

### *Community-based Services and Interventions*

It is rarely in the interest of young people 'at risk' of homelessness to leave their home neighbourhoods. However, this study's findings indicate that the vast majority of young people commuted to city-centres to avail of services, a move which often served to weaken their existing social and family ties. Where possible, young people need to consider services located within their local communities as a first option. As it currently stands, service delivery in the form of city-centre-based emergency and short-term hostel accommodation runs the risk of prolonging the duration of young people's homelessness (often, perhaps ironically, because of their reluctance to access 'homeless' services).

### Recommendation 6

While continued investment in city-centre based service provision is required, the development of local emergency and long-term accommodation for young people aged 18–26 years requires specific attention by local authorities in their future homeless action plans.

### Recommendation 7

Emergency accommodation for young people under the age of 18 years must be used for the purpose for which it is intended—as an entry point for young people in crisis—and should not become an interim or long-term response. In keeping with existing policy, young people must be transferred to an appropriate accommodation or care setting within two weeks and also need to be consulted and informed of new developments in relation to future placement possibilities.

### **Aftercare Provision**

Despite recent improvements in aftercare provision, many young people currently leaving care in Ireland do not receive the ongoing supports required to make a successful transition to independent living. Furthermore, those young people who are accommodated under Section 5 of the

*Child Care Act, 1991* do not have a legal entitlement to an aftercare service. While the Section 5 Policy, which came into effect in 2012, stipulates that this group should receive "on-going support", this does not include eligibility for a range of other services, including residential aftercare or financial support packages, nor does it include the allocation of an aftercare worker. This relatively small cohort includes young people with some of the highest needs among those 'looked after' by the State.

Those young people who reside in Crisis Intervention residential services and who are on full or voluntary Care Orders are entitled to an aftercare service if they have been in care for 12 consecutive months. However, these young people typically have complex needs, and many will require residential aftercare provision where they can be supported to make the transition to independent living.

### Recommendation 8

All young people who are accommodated under Section 5 of the *Child Care Act, 1991*, should be entitled to a full aftercare service as outlined in the National Aftercare Policy (HSE, 2012).

### Recommendation 9

Currently, the range of residential aftercare placement options is extremely limited and this situation requires urgent attention. The Child and Family Agency should pursue a policy of making an additional and wider range of residential aftercare placement options available.

### Education and Training

Full-time participation in education and training is critical to ensuring that young people are equipped for a successful transition to secure work and independence. Successful entry to what has become an extremely competitive labour market is strongly dependent on the acquisition of the appropriate mix of academic credentials, training and employability skills (Department of Training and Workforce Development, 2013). Indeed, this study's young people recognised and strongly emphasised the importance of education and training, with several depicting education as critical to finding a 'way out' of homelessness. However, a large number articulated a sense of dissatisfaction with existing training courses. This finding points to a need for Intreo (the new service from the Department of Social Protection) to review the range and suitability of current educational programmes targeting marginalised youth.

Recommendation 10

Homeless or 'out of home' young people who are participating in education/training and living in services targeting 'out of home' or homeless youth need the requisite income support to ensure they have the financial security to complete their education/training and engage in all aspects of society.

Recommendation 11

All young people's aftercare plans should continue to include education and training pathways that are adequately resourced.

### Supporting the Family Relationships of Homeless Young People

This study has documented the positive role of family contact in the lives of young people who are living out of home, and has also highlighted the value attached by young people and their family members to maintaining connections and re-building relationships. In part, because fractured family relationships and family environments characterised by conflict are factors known to precipitate homelessness, work with families is frequently neglected or not prioritised by those organisations charged with meeting the needs of 'out of home' young people.

Recommendation 12

Work with the families of young people who are homeless needs to be given greater priority within the homeless service sector, with a particular emphasis on collaborative approaches to working with 'out of home' young people and their family members.

Recommendation 13

Accommodation services (whether hostels, STAs, residential care or aftercare services) should develop mechanisms—as well as safe spaces—that permit and encourage visits by the family members and children (in the case of young parents) of residents. The provision of such spaces should be considered in the development of the National Quality Standards Framework for Homeless Services in Ireland.

### Housing and Housing Supports for Young People

Young people who experience homelessness are not a homogeneous group: they enter services with a diverse range of experiences and from home

circumstances that vary widely. It follows that they have different needs in terms of housing and other supports, and these needs must be assessed at the earliest possible juncture. Returning home may be an option for some but not for all and, for the latter group, the provision of age and 'stage'-appropriate housing options is essential.

### *Accommodation for Young People aged 18–26 Years*

The findings of this study indicate that young people who are facing the prospect of moving out of services targeting under-18s experience extreme anxiety about their future and, for a majority, the transition to adult services constituted a crisis point. The risks associated with the transition from child welfare to adult homeless services are very apparent in this research and have also been highlighted in earlier Irish studies.

### *Housing and In-Housing Support*

The need to get young people into housing with appropriate supports at the earliest possible juncture must be seen as paramount. This means that a range of models of accommodation and support for young people will be required in order to respond appropriately to young people's differing developmental stages and individual needs. Housing First approaches (that is, immediate routes of access to housing with no housing readiness requirements) need to be viewed as one of a number of potential solutions for homeless or 'out of home' young people. Crucially, there is a need to provide a range of supports *in* housing to those who move quickly to independent housing, and often for extended periods.

### *Supporting the Transition to Independent Living*

The findings of this research suggest that a considerable number of young people, particularly those who have experienced traumatic life events and/or are stuggling with substance use and mental health issues, may need an interim model of housing that provides a supportive environment, as well as a range of specific supports that aim to maximise the prospect of a successful transition to independence. Importantly, models of housing that aim to support the transition to independence should cater for small numbers of young people in any one setting; they must also be time-lined, support a clear pathway to independence, and provide the requisite supports at the point when young people move to independent living situations.

Irrespective of their personal circumsances and past experiences, all young people who experience homelessness are likely to need some level of preparation *prior* to moving to independent living situations. They will also need support *following* this transition and this needs to include both housing (e.g. advice on dealing with landlords, help in the event of problems arising etc.) and personal (e.g. encouragement, therapeutic intervention etc.) supports.

*Specialist Services*

This study's young people reported a range of pressing issues beyond those associated with the absence of a secure home – including substance use and mental health problems – that are likely to pose risks to their future and their ability to secure and sustain housing. Young people need to be supported to engage with mainsteam drug/alcohol treatment and/or harm reduction services as appropriate, both prior and subsequent to moving to independent living situations.

RECOMMENDATION 14

An immediate move to independent housing, with no housing readiness requirements, should be seen as a viable option for some young people. Equally, however, the needs of many of these young people are likely to be multi-faceted and will invariably extend beyond the need for accommodation alone; most will also need skills training, drug/alcohol treatment, as well as preparation and support both prior and subsequent to the move to independent living situations. Support in housing must be provided, and the nature and duration of this support needs to be ascertained in consultation with young people.

RECOMMENDATION 15

Interim models of housing in the form of supported accommodation may be the most appropriate option for young people who have high and complex needs and who need a supportive environment to enable them to develop the skills and confidence to live independently. Equally, the period spent in such accommodation needs to be time-lined and young people's stays in these settings should not be prolonged. The planning of appropriate move-on options needs to be initiated early and in consultation with young people.

## RECOMMENDATION 16

Young mothers need specialised support following the move to independent living situations, particularly in relation to parenting, post-natal depression and domestic violence, in some cases. This support should be provided by mainstream services, such as family resource centres.

## RECOMMENDATION 17

Young people who are out of home and on the reduced social welfare rate should have access to an adequate level of income support. This could, for example, be linked to an education plan and their engagement in education or training.

## RECOMMENDATION 18

The transition from Child and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services is problematic and is also a juncture when young people may discontinue treatment. More fluid systems are required to ensure a less abrupt transition to mainstream adult mental health services and to ensure the continuity of treatment in the case of vulnerable young people, in particular.

### Concluding Remarks

The main goal of this research was to enhance understanding of the social problem we call 'youth homelessness'. The study's biographical approach has permitted a detailed exploration of the events and circumstances leading to young people's homelessness as well as their experiences from the point of first leaving home. Although the category of youth homelessness is clearly marked by diversity, what united the young people in this study was their restricted access to stable housing and their lack of experience of independent living. All also invariably referred to difficult and sometimes traumatic life experiences, dislocation, relocation(s), and fragmentation and loss because of the instability of their housing. Youth homelessness is distinct from adult homelessness, both in terms of its causes and consequences (Gaetz, 2014), and it follows that the services, strategies, and interventions aimed at resolving the problem of youth homelessness must be distinct from the adult sector. Services and interventions need to be age and 'stage'-appropriate and simultaneously recognise that a speedy move to stable housing is paramount if ongoing cycles of housing instability are to be prevented.

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