Introduction
This Research Digest presents the key findings and policy and practice implications of Not Just Homelessness … A Study of ‘Out of Home’ Young People in Cork City, undertaken by the Children’s Research Centre at Trinity College Dublin and funded by the Health Service Executive, South. The study aimed to identify young people’s paths into homelessness, to examine the experiences and challenges of living ‘out of home’, and to make policy recommendations related to prevention, intervention and service provision. Thirty seven young people (20 men and 17 women) aged 16 to 25 years were interviewed for the purposes of the study. All were homeless or living in insecure accommodation at the time of interview.

Key Findings
- A number of distinct pathways ‘out of home’ were identified, namely young people with a care history, those having experienced an abusive family situation, those affected by family conflict and those reporting ‘problematic’ behaviour as teenagers.
- One third of the sample reported a care pathway into homelessness. This group was most strongly represented amongst those who were accessing adult hostel provision.
- There was considerable diversity in the range of accommodation types accessed by the young people, from that provided by social services to the private rented sector. A considerable number had spent time in prisons and/or in psychiatric hospitals.
- The under-18s did have access to age-appropriate accommodation but on reaching the age of 18 years many were forced to use adult hostels. The transition from children’s to adults’ services emerged as a critical marker of more persistent homelessness.
- High levels of mental health difficulties were reported by the study’s young people, from depression, loneliness and social isolation to self-injury, suicide attempts and suicidal ideation. They also reported high rates of alcohol and poly-drug use and a range of physical health problems consonant with exposure to the elements, general self neglect and substance misuse.
Key Policy Recommendations

- The cut-off point of 18 years for eligibility for statutory child care services is problematic. For those who remain out of home on reaching the age of 18, ongoing support is needed in the context of youth – rather than adult-oriented homeless services.

- Professional care planners need to be aware of the vulnerability of care leavers to homelessness and of the consequent need for robust and appropriately resourced care plans. All care leavers need to have their housing needs assessed well in advance of leaving care.

- Wider awareness among professionals of the impact of domestic violence on children, adolescents and their families is required. The HSE and partner agencies should develop protocols in order to provide an appropriate response to these children and families.

- There is an urgent need for appropriate community-based mental health services that cater specifically for the needs of adolescents and young adults. Youth friendly drug treatment services are required for young people who are homeless and abusing drugs.

Background to Study

This study was undertaken to generate in-depth knowledge and understanding of the experiences of homeless young people in the Southern region of the Republic of Ireland, with particular attention to Cork City. After Dublin, Cork has consistently recorded one of the highest numbers of ‘out of home’ young people nationally, yet relatively little is known about the factors leading to young people becoming homeless in this region or about the impact of housing instability on their lives.

Methodology

Following the broad methodological framework utilised in a recent study of homeless youth in Dublin city (see Mayock & Vekic, 2006; Mayock & O’Sullivan, 2007), the ‘life history’ interview was the core method of data collection, an approach particularly good at capturing biographical details relevant to understanding youth homeless pathways.

Interviews were conducted with young people aged 16 to 25 years over a seven month period between April and October 2006. Commencing with an invitation to tell their ‘life stories’, several key topic areas relating to family history, childhood experiences, school, history of alcohol and drug use, accommodation history and key life events were then prompted for discussion and questioning. Prior to this, contact had been established with service providers and senior managers in statutory and voluntary sector agencies to facilitate access to field sites and to guide the recruitment process.

Not Just Homelessness …

The life histories of the young people in this study strongly suggest that homelessness is one of the multiple adversities they faced as they moved through adolescence towards young adulthood. The stories depicted in this study speak to the marginalisation and risk that characterise the lives of socially excluded youth and to deficits within the systems of intervention designed to serve and protect them.
Pathways ‘Out of Home’

The identification of pathways into, through and out of homelessness can be useful in developing strategies for intervention and in adapting services to meet the needs of particular groups of young people. This study’s findings reveal the diversity of experience associated with becoming homeless as well as the complex mix of factors and circumstances that can potentially place children and young people ‘at risk’ of homelessness.

**Pathway 1: Care History**

Over one third reported this route into homelessness. Their care histories were generally highly problematic and five reported sexual, physical or emotional abuse in a care setting. Practically all reported multiple care placements and the transitions out of care to independent living proved extremely difficult for the majority. Accordingly, the study’s findings highlight specific challenges and difficulties related to aftercare provision and support for young people leaving care as well as the ongoing necessity for monitoring and evaluation of foster and residential care placements.

> And I think when you’re in care you don’t have a clue basically. Like I didn’t have any family contact really so, in a way, they’re kind of raising you and they’re kind of family to you and then they say to you, ‘You’re 18, here’s the door, out you go’, kind of thing. Sharon (19)

**Pathway 2: Abusive Family Situation**

This route was characterised by descriptions of physical, emotional and/or sexual abuse and neglect and/or domestic violence in the family situation. Social work involvement was unsuccessful in some cases because of young people’s fear of the negative repercussions of drawing attention to their families, or lack of knowledge as to how to engage with support services. The findings of this study suggest that the full extent of the abuse that young people experienced in their own homes was not adequately understood or recognised by professionals. They also indicate that young people need to know more about available services and to feel that seeking help is a positive step.

> I never answered their [social workers’] questions because, I don’t know, the whole lot of us would have gone straight into foster care. I knew it and my mother would have been left with nothing, like with no one except herself, and I didn’t need that either for her and also the fact that I wouldn’t tell anything [about the abuse] to my mother or my sister or my brother ‘cos I know for a fact they’d be all put into different foster placements. Donna (19)

**Pathway 3: Family Conflict**

Difficult relationships within the family home and arguments with parents or carers emerged as factors leading to young people leaving home. In such cases, family mediation services were perceived by young people to be less threatening than individual counselling since the focus was on the family as a unit. Early intervention by the Adolescent ‘Out of Home’ Service facilitated the return home of a number of the participants in this study.
The place where I stayed [‘Out of Home’ service] taught me a lot of social skills you know, taught me how to get out there and have some fun and actually enjoy myself for once in my life, taught me how to cook and clean … basically taught me how to behave myself. Frank (20)

Pathway 4: Problematic Behaviour
This path relates to features of the young person’s behaviour, such as substance misuse or criminality, which led to tensions within the family home and precipitated their leaving. As well as impacting on their relationships with their families, substance misuse affected their ability to cope with daily life. The lack of ongoing support for those in treatment and the inability of care placements to cope with young people who present challenging behaviour were issues highlighted by this study.

Living ‘Out of Home’: Young People’s Experiences

- Young people’s experiences of under-18s ‘out of home’ accommodation were largely positive and some had moved back home having accessed supports from the Southern HSE’s adolescent ‘Out of Home’ services.
- The private rental sector was viewed more problematically by young people with problems relating to poor quality accommodation, inadequate financial resources and feelings of loneliness and isolation present in many accounts.

  It’s very hard to get any suitable accommodation for rent allowance, no place takes it. Everything is a dive hole, do you know what I mean like, and the landlords don’t want to do nothing for you. Sharon (19)

- For those over the age of 18 the main form of emergency accommodation was an adult hostel. Entry into this environment was associated with a sense of stigma, confirming their homeless identity. The change from children’s to adults’ services emerged as a critical transition into more persistent homelessness.
- A more marginal group reported movement between psychiatric hospitals, prison, homeless hostels and sleeping rough. All were young men who experienced a range of difficulties exacerbated by mental health and substance misuse issues.
- Reports of depression amongst the study’s young people were commonplace and an alarming number reported suicidal ideation and/or acts of self-harm. Young people had few coping strategies and lack of access to mental health services is significant.

  I grew into depression. Everyone noticed that my self-harming grew worse at one stage. I did have to go to hospital but it wasn’t that bad because I’m a superficial cutter. I didn’t do it anymore. I managed to overcome it. Donna (19)

- Poly-drug use emerged as the dominant pattern amongst the group. Cannabis, cocaine, ecstasy and prescription medicine, all easily available, were the most commonly used substances with LSD and amphetamine being used less frequently. The study points to the particular vulnerability of this group and the difficulty of engaging and retaining them in treatment.
So I stay away from people who are into drugs. I just have to, I just corner myself off from everyone … I corner myself off from everyone ‘cos I’m afraid in case I get into it again because it’s such a good feeling to take drugs ‘cos it stops all the stress and worry that you have inside you. And when people think that you’re a junkie you’re not a junkie. You’re just taking drugs to stop all that hurt inside you ‘cos that’s what I was doing. Sheila (22)

Recommendations
This study suggests that the diversity of experience and complexity of young people’s lives requires interventions across a continuum, targeting young people who are at different ‘phases’ of the homeless experience. Recommendations point to specific areas of service provision that have relevance across the continuum of intervention. The points of intervention fall into three main categories targeting different phases of the homeless experience: prevention, early intervention and longer-term support. Recommendations are also made that have relevance across a continuum of intervention, i.e., to all three categories. This notion of a continuum of intervention is relevant to young people as they make transitions from children’s to adult services. Undoubtedly, a key challenge identified in the report is the need for supports that enable young people to manage this transition successfully.

Prevention
- There is a need for greater awareness of the complex issues involved in premature home leaving in designing adequate preventative policies. The HSE, in collaboration with partner agencies, should develop an information campaign aimed at raising awareness of youth homelessness and of the services available to young people, parents and professionals.
- The HSE South should continue to provide preventative services and supports to young people and their families.
- There is a need for the systematic monitoring of care placements to allow for the identification of those at risk of breakdown. Young people need to be consulted regularly regarding their care experiences and when a breakdown occurs, the reasons should be systematically reviewed. For those leaving care, appropriate care plans must be put in place.

Early Intervention
- The HSE South should continue to provide support and mediation to young people and their families. This early intervention model should be considered for dissemination to other HSE regions.
- There is a greater need for engagement with children and young people on the part of professionals, and more comprehensive assessment of child protection concerns particularly in the context of domestic violence.
- Rigid differentiation between under- and over-18s when it comes to eligibility for emergency and respite accommodation should be replaced by a more flexible approach by the HSE and partner agencies.
**Longer – Term Support**

- The 18-year cut-off for eligibility for statutory child care services creates a barrier to service access and reduces the potential for young people to achieve housing stability. The matter of accommodation and support for 18–25 year olds needs urgent attention.
- Key support issues emerged for young people who moved from children/young people’s services to adult services. The need to adequately support young people in transition is a key finding to emerge from this research. Consideration should be given to the development of models of housing provision for over-18s that prevent their entry to adult services.
- Models of transitional and supported housing tailored to meet the needs of specific groups require exploration.

**Recommendations Across the Continuum of Intervention**

- Within the HSE, improvements to leaving care and aftercare provision must be prioritised. The development of an assessment protocol aimed at identifying care leavers at risk of homelessness is urgently required.
- Multi-agency co-operation, particularly between the HSE and local authorities, should be developed in order to provide the accommodation options needed to meet the demands of care leavers.
- Protocols must be developed by the HSE and partner agencies to provide an appropriate response to children and families experiencing domestic violence.
- There is an urgent need for appropriate community based mental health services that cater specifically for the needs of adolescents and young adults.
- The Report of the Working Group on Treatment of Under 18 year olds Presenting to Treatment Services with Serious Drug Problems (Department of Health and Children, 2005) provides comprehensive guidelines in relation to the management of treatment services for this group. The development of such a model would be a substantial resource.

**Notes**

1. First published as the Children’s Research Centre’s *Research Briefing* issue no. 4, July 2008. Edited by Liz Kerrins, Policy Officer, Children’s Research Centre. The full study *Not Just Homelessness … A Study of ‘Out of Home’ Young People in Cork City* is available to download from the Children’s Research Centre’s website: www.tcd.ie/childrensresearchcentre
References


Children’s Research Centre
The Children’s Research Centre, Trinity College Dublin undertakes multidisciplinary policy and practice-relevant research into the lives of children and young people and the contexts in which they live their lives. Contact: + 353-0-1-8962901; crcentre@tcd.ie