The Culture of Homelessness

Megan Ravenhill

THE CULTURE OF HOMELESSNESS

This book is dedicated to Charles and Daniel Ravenhill

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ASHGATE

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Preface

Rebecca Tunstall

Megan Ravenhill's fascinating study *The Culture of Homelessness* enters a crowded field, but successfully introduces unique elements and new insights, with some tart but apt criticisms of existing literature and established ways of working in the area.

There has been a wealth of research on homelessness in Britain since the 1980s, but it has been variable in quality and has left notable areas uninvestigated. In 2000 Klinker and Fitzpatrick surveyed the state of knowledge, finding growing interest in the social and economic factors underlying homelessness, increasing sophistication in the identification of 'risk' factors, and evolving expertise in helping people resettle. However, they noted a real absence of research tracking homeless people over time – essential for understanding the roots of homelessness and to provide a context for policy and specific interventions.

The Culture of Homelessness fills just this key gap, and has been developed through the author's tenacious work over more than a decade. Ravenhill's work is based on long, intensive interviews with almost 150 homeless and formerly homeless people, as well as homelessness workers and policy-makers, and hundreds of hours of observation on the streets, in hostels and daycentres, in a range of sites in London, the South-East and South-West of England across the period 1996–2006. This unusually broad and deep approach allows very full exploration of routes into – and, in some cases, out of – homelessness, with an emphasis on the experiences of homeless people.

Ravenhill's life histories of people living on the street in the past decade show that the risks of homelessness were rooted in their childhoods, in earlier decades, as far back as the 1940s. Homelessness – like other extreme social situations – often develops after the gradual accumulation of risk factors over an extended period. Ravenhill shows that, on average, nine years passes between triggers – such as violence from parents – and homelessness finally occurring. Those who became homeless as adults realized themselves that rooflessness was a possibility an average of one to two years before it happened, although they often spend much of this time in denial.

Homelessness itself is an – or even the – archetypal example of 'social exclusion'. The biographies of Ravenhill's interviewees feature a torrent of extremely serious problems: abuse as children, institutionalization, prostitution, drug and alcohol abuse, personality disorders – as well as more mundane problems such as the breakdown of adult relationships and tragic-comically trivial barriers to resettlement. The study provides particularly detailed and painful evidence of the emotional and psychological worlds of some homeless and ex-homeless people: depression,

misery and suicidal thoughts; frequently astonishingly awful experiences in personal relationships, which perhaps equally awfully become normalized in people's minds, or reflected in their own behaviour.

Interviewees revealed how the strong barrier of fear that keeps most people from even considering sleeping rough, once breached, is quick to break. Ravenhill found that once someone has slept rough for as few as three days, their worst fears were over, they could start to learn how to 'be homeless' and to survive and begin accustomization to the life:

> 'The first night you're cold. You don't sleep. You keep walking around from place to place. You can't settle anywhere. The next day you are dead on your feet, desperate for sleep, but you daren't. The next night's not so bad, you get a little sleep. You get used to it really quickly, once you do, its not that bad. You start making friends and then that's it really.'

Early experience of family violence had an 'anaesthetizing' effect that reduced the fear of aggression and violence on the streets, making the street feel relatively safe in comparison with past homes.

Ravenhill's first great innovation is to see homeless people as social beings, an aspect overlooked by much policy-oriented and shorter-term research based solely on interviews with individuals. Her in-depth and open-ended interviewing and covert and participant observation opens up the 'cultures of homelessness', the subcultures of those who spend nights and days or days in the streets, which people may be thrown into as they start to sleep rough, or may gradually 'ease' into, for example through starting drinking alongside street drinkers. She uncovers a series of partly overlapping subcultures and roles within them: depressive contemplators, clowns, drug users, daycentre or hostel groupies, people with mental health problems, self-harmers, loners, drifters, those who are not homeless but may be precariously housed, and intermittent participants in street culture, including the 'homeless at heart'. Again, the words of interviewees provide startling insights:

> 'It's great in the squat, it's like a family. Most of the time we get on well, you have to. There are times when you need to know when to keep yourself to yourself though. We have some good laughs, we have some good fights too. But that's how it is. Rolling round punching one minute, but if someone from outside starts on one of us, we start on them.'

> 'What do you see, an alcoholic or a drunk? It's important. You think it's all the same, that we're drunks and alcoholics. Well remember this, we are alcoholics because we drink; because we drink too much. But a drunk is someone who beats up on his wife. None of us are drunks, none of us are like that. We have nothing to do with drunks.'

> 'Who, me love? No not me. I've never been homeless in my life. What made you think that I might have been? I started drinking after my two sons left home. The wife died and I lost my job. I come here because I get a free meal and you can have some good conversations.'

Each subculture is associated with particular social networks and patterns of behaviour. Each has emotional significance to participants and helps them to survive on the street, materially and in terms of security. An interviewee said:

> 'Mixing with the crowd, sleeping rough with them, joining in the banter gradually brought me out of myself. I found a new way of coping, just by chatting with the other people on the streets. I got to know lots of people and became very pally, they helped me forget about my family.'

Some, as Ravenhill says, felt anonymous in mainstream society, while on the streets they were known, and there could be times of humour and camaraderie.

At the same time, Ravenhill found that terrifying violence is paradoxically as much a part of the culture of homelessness as co-operation. Homeless people faced continual threats, not only from the general public, but from each other. These offences, including many incidents of GBH and rape, are not only rarely reported to the police but also rarely noted in available research.

The prior life experiences of many homeless people are extreme. On the other hand, the idea of 'running away' is an almost ubiquitous childhood fantasy, and more than 10 per cent of children have run away for at least one night by the time they are 16. 'Running away' for children and adults too is the ultimate in personal liberation and the greatest challenge to family and mainstream society. It remains a substantial sub-theme within mainstream culture, for example in novels and music. Ravenhill's work shows that the streets can provide a kind of liberty beyond what most housed and socially included people can imagine – if a dangerous and despised liberty. The streets can provide social and emotional support, and the ontological security ironically associated in much housing theory with home ownership alone – if, in bitter irony, at the cost of physical health and security.

Ravenhill's second innovation is in applying the same longitudinal and ethnographic methods to advance understanding of how people can move out of homelessness. She describes, from homeless people's points of view, how and when they may become motivated to change, and the psychological stages through which they may pass in attempting to change their lives. In practice, there may be just brief windows of resolve and capacity for change, which, too often, homeless service organizations may fail to recognize or to exploit.

In addition to the immediate risks of violence and exploitation, homeless group membership can prove a barrier to change in personal behaviour, reducing receptiveness to support from outside agencies, and ultimately keeping people on the streets. As a recently rehoused interviewee said:

> 'What I really want to do is go back to my old drinking ground to meet the people I've known for two or three years, but I know that I can't because everything I've worked for will go pear-shaped. They would just come, live here and wreck the place. Now I have to just forget about all of them, but I'm finding it really hard.'

Ravenhill found that those refusing to identify with any homeless culture or admit that they were roofless – while giving up some support and security on the streets – were likely to spend less time there. They often actively sought help and appeared to be more successful when moving into a secure tenure. However, as Ravenhill says, 'if we are serious about preventing and resolving rooflessness we need to understand the importance of the homeless culture, in attracting and holding members' (145).

Ravenhill's third major innovation is her overt discussion of the 'homeless industry', a label she applies to lobby groups and service providers aiming to help homeless people and to reduce homelessness, from a position of genuine independence rather than one of hostility. Firstly, organizations intending to support and help homeless people are – inevitably – involved in shaping and to some extent creating homeless cultures. Homeless people's own adoption of some of the language of this industry – 'I'm from what you call one of those dysfunctioning families' – is one example of this symbiotic process. Ravenhill also observes, originally, that the police were in some senses part of this industry, and were involved in shaping homelessness culture. They built trusting relationships with some street people, and, in another interesting case of symbiosis, police and shopkeepers recognized that homeless people provided some passive security to shops at night. Secondly, Ravenhill found competition between homeless charities themselves and with other causes. This meant that some issues, such as violence on the streets and the negative aspects of homeless cultures, were not investigated or discussed openly. There are also some cases of actively harmful behaviour by agencies. In a painful example, social services and some rehabilitation programmes sometimes held out access of roofless women to their children as a reward for achievement and good behaviour. Again, Ravenhill reminds us that if we are serious about preventing and resolving rooflessness, we need to understand that acts of omission and of commission by homeless support agencies and other social services can be part of the explanation for what she calls 'unnecessary rooflessness'.

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Rebecca Tunstall
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List of Abbreviations

ASBO	Anti-Social Behaviour Order
B&B	Bed and breakfast hotels
CUHP	Constructing Understanding of the Homeless Population
DEFRA	Department for Environment, Food and Rural Affairs
DETR	Department of the Environment, Transport and the Regions
DfES	Department for Education and Skills
DoH	Department of Health
DTLR	Department for Transport, Local Government and the Regions
DWP	Department for Work and Pensions
EUKN	European Urban Knowledge Network
FEANTSA	European Federation of National Organisations Working with the Homeless
HCH	Health Care for the Homeless
PTSD	Post-traumatic stress disorder
RAISE	Regional Action and Involvement South East
RSI	Rough Sleepers Initiative
RSU	Rough Sleepers Unit
SEEDA	South East England Development Agency
SEU	Social Exclusion Unit

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Chapter 1

Introduction

This is an ethnographic study providing a unique insight into homelessness. This book explores why it is that despite the fact that previous research appears to have established the causes of homelessness and formulated solutions to it, which have been implemented, homelessness still persists. The book will look anew at the causes or triggers of homelessness, discussing the life events and processes that often trigger, protect against and predict the likelihood of someone becoming homeless (or roofless). This includes a close look at the process of becoming homeless, the existence of homeless subcultures and their impact on long-term homelessness, plus the process of leaving homelessness and reintegration into housed society.

A detailed examination of the synergical and complex nature of homelessness will explore the interaction of this complexity with the structures in place within society that are designed to prevent or alleviate rooflessness. Unique evidence is drawn from a group of people who have experienced rooflessness. Uniquely, this is counterbalanced with evidence from people who experienced similar triggers but never actually became homeless. The complex, multi-faceted routes into rooflessness will be demonstrated in terms of biographical, structural and behavioural factors. It will be shown that this complexity increases with the age of the individual and the duration of their rooflessness.

Unique in British homeless literature is the ethnographic exploration of homeless culture, its nature and impact – a culture that developed and exists to serve specific needs that mainstream society has historically proved unwilling or unable to provide for. The research highlights the intensity, vibrancy and attraction of homeless culture in the context of individuals' need to belong, to be respected and to be able to feel ontologically secure. There is unique insight into the process of becoming homeless, fitting into the culture and the allure of the culture. This includes the strong, intense friendships developed, the inverse hierarchies and a glimpse into the violent side of the culture, as well as the fun side.

It will be shown that much of the current system for tackling homelessness evolved by default and can itself be a cause of homelessness. It is a system that inadvertently discourages and prevents people from leaving homelessness and fully reintegrating back into housed society. There is a tension between creating a system that is so easy that it encourages rooflessness, and a system so harsh that it discourages resettlement. This tension appears to paralyse policy-makers and providers, preventing them from moving to a point of equilibrium and creating an effective homeless prevention and resettlement programme for all homeless people. This suggests that radical changes are needed in the way rooflessness is perceived and tackled.

The reader will be taken systematically through the theoretical and policy backdrop, before being led sequentially through the experiences of the people

interviewed for the study. The book begins by discussing the definition of home and interpreting the various definitions of British homelessness in terms of home (Chapter 2). This includes the impact of such definitions on knowledge and the construction of homelessness as a social policy issue. Unique to this book, the notion of a homeless industry set up to tackle homelessness will be introduced. This will include an exploration of the co-dependence of the homeless and homeless industry on each other. Uniquely, Chapter 2 goes on to examine the relationship between this co-dependence and public policy, plus the interaction between homeless industry, policy generation, funding, stereotypes of homeless people and the generation of public opinion.

In addition to the traditional theoretical perspectives associated with homelessness, this book discusses unique theories implicit within the literature but not formally discussed elsewhere; for example deviancy, symbolic interaction, normalization, agency, structuration and risk society (Chapter 3). The overall conclusion drawn from this discussion is that no one theoretical stance is adequate to fully explain homelessness, although structuration perhaps comes the closest. Instead, a combination of a number of theories needs to be used to fully capture the complexity of homelessness.

The pervading theoretical perspectives at various points in time have historically driven welfare and homeless policy (Chapter 4). The book examines the evolution of current homeless policy in the light of the overall housing policy, employment and economic structures within the welfare state and Britain in general. Concluding that much of the current homeless policy has evolved by default, this creates the absence of any alternative cohesive policy that prevents or at least creates an adequate safety net against homelessness.

There are powerful accounts of people's 'homeless' experiences – before, during and after rooflessness. Chapter 6 explores the origins of people's routes into rooflessness, establishing a number of clearly identifiable factors that increased people's vulnerability to rooflessness. It will be established that it is not the triggers of homelessness themselves that result in rooflessness, but the accumulation of triggers – especially if they were experienced in quick succession. In fact, rooflessness appears to be predominantly a solution to existing problems rather than *the* problem. On average, 7–9 years elapse between triggers commencing and rooflessness occurring. Furthermore, there was an average of 1–2 years in precarious housing, episodic homelessness (not rooflessness) and continuous vulnerability to rooflessness before rooflessness occurred, despite, in many cases, determined attempts to avoid it.

There is a unique insight into the childhoods of roofless people, showing that the majority of people's routes into rooflessness began in childhood. Experiences during childhood began a series of experiences, decisions and gradual disaffection or alienation from society, the family and home. The family, relationships within the family and home environment were the strongest factors that either triggered or protected people against homelessness. Life events are depicted using route-maps that outline these processes and demonstrate the accumulation of triggers over time. The age at which a person first experiences rooflessness is linked to the number of episodes and duration of homelessness. Similarly, the age an individual first leaves

home is shown to have a direct impact on the degree and duration of rooflessness, with those leaving home early or experiencing rooflessness at a young age far more likely to go on to become roofless long term. There is also a unique look at the class of origin of the roofless. The book offers evidence to suggest that the social class of origin is much higher than most commentators assume (social class II and IIIa, rather than IV or V).

Chapter 7 offers a unique insight into British homeless culture. This is briefly contrasted with American and Dutch homeless culture. The homeless culture is a counterculture created through people being pushed out of mainstream society. The culture's attractions, mechanisms for inclusion and acceptance, the fun and the heartache are all explored in this chapter. What happened to people in the past creates the nature of the homeless culture. Furthermore, any serious attempt at resettling long-term rough sleepers needs to consider what it is that the homeless culture offers and whether or how this can be replicated within housed society. There are immense multidimensional difficulties to be faced by those exiting the homeless culture and rooflessness. These difficulties arise from complex structural, behavioural and emotional factors that are inextricably entwined within people's lives and, at times, negate positive influences or exacerbate existing problems.

Chapter 8 demonstrates the enormity of the task faced by roofless people trying to resettle into mainstream society. The book will show that the resettlement process at present appears to be an assault course, with obstacles designed to prove the individuals' desperation, rather than the intended gradual rehabilitation through preparation, support and assistance. This assault course has developed by default over a significant period of time, the obstacles being a combination of practical, structural, ideological and behavioural factors. This makes the current system counterproductive, actually discouraging people from trying to resettle, or locking them into dependency on the homeless culture for survival. There is a unique insight into the pervasive, deep, long-lasting impact of current resettlement practices and conditions homeless people are expected to accept as part of that resettlement.

This is contrasted with a number of factors identified as influencing successful reintegration into housed society and the struggle to prevent people from becoming locked into the homeless culture. Points are identified along the continuum of social exclusion and inclusion that highlight how excluded people from mainstream society become included in the homeless culture, then have to exclude themselves from that culture in an attempt to be included within the society that rejected them. This often has to be done without a safety net of support in the interim.

The book concludes that although long-term rooflessness is triggered and sustained by many complex, interlinked problems and circumstances, people can and do manage to avoid rooflessness or, once roofless, to leave and lead settled lives. Many factors that prevent people from doing so are identified. If there is to be a serious attempt at ending rooflessness, then there needs to be a number of changes that enable people to seek and receive assistance, both before, during and after rooflessness has occurred. This assistance needs to be easily available to people regardless of their geographical location or ability to ask for and/or receive that help. The fact that rooflessness is so complex means that solutions need to be client-centred, flexible and layered or administered in stages that reflect the individuals'

changing needs. Historically the current system has proved unable to stem the tide of new homeless people and tackle entrenched rooflessness. An ideological shift is needed. Without adequate alternatives to rooflessness being created, along with transparent access routes to those alternatives, rooflessness will remain.

Chapter 2

Defining Homelessness

The importance of defining homelessness should not be underestimated. In this chapter, particular emphasis is placed on the definition of 'homelessness'. Homelessness is an emotive word that conjures up in people's minds pictures of the tramp walking the street, smelly, dirty and hungry, or the alcoholic, obnoxious, loud and drunk. To view all homeless people in terms of these two stereotypes is to do many an injustice. It can also act as an obstacle to tackling a serious problem.

There is no consensus on the definition of homelessness in the literature. The definition used often relates directly to the objectives and ethos of the body or organization defining it. Thus all definitions become relative and prone to variation. In spite of this, definitions have shaped and formed public policy, moulded and manipulated public opinion, identified causes and defined solutions. For example:

Statutory definitions
Include families in precarious housing or temporary accommodation, but exclude most single male rough sleepers.

Voluntary organization promotional literature
Most literature promoting individual organizations define homelessness in terms of causal factors that evoke public sympathy (e.g. '84 per cent of young people arriving at Centrepoint are forced to leave home' – Centrepoint 1997).

The lack of a comprehensive definition that is acceptable to all prevents cohesive action on tackling homelessness, both as a phenomenon and before it occurs. Carter (Burrows et al. 1997) suggests this is because social policy itself has become so 'embroiled' in finding complex explanations that it has created 'individualistic discourses', which deny or obscure any ability to recognize real need even when confronted with rough sleepers. For example, homelessness is often analysed according to the two poles on a wide spectrum of attitudes, namely structural factors or psychological (individual pathological) factors (Watson and Austerberry 1986). Structural factors are arguments about, for example, the high demand for housing, unemployment, rising rents and house prices. Psychological factors focus on the individual and the way they fit into society. Caplow uses the second pole, defining homelessness as:

> a condition of detachment from society characterised by the absence or attenuation of the affiliative bonds that link settled persons to a network of interconnected social structures. (Caplow in Bahr 1973)

For Caplow, homelessness is a form of alienation from the rest of society, caused by the loss of an 'affiliative bond' (work, family or home) that links or connects the individual with society. The lack of an affiliative bond effectively excludes them from society. For Watson and Austerberry (1986), however, Caplow's psychological emphasis implies a need for institutional provision, psychiatric treatment or social work intervention.[1] The truth probably lies somewhere between the two. For some, the 'affiliative bond' can only be re-established through some form of psychiatric/ social work intervention; whereas others simply need the security and stability associated with well-being and 'home'.

There are currently five main types of definition of homelessness:

1. *Statutory or Legal Definitions*

These definitions are used by national and local governments and are enshrined in the legal framework via legislation. The British statutory definition defines families with dependent children and without access to accommodation as homeless and those accepted as in 'priority need' on the grounds of 'vulnerability' (i.e. aged over 60, pregnant, suffering from mental ill-health, young people in danger of exploitation). This excludes the vast majority of single homeless people, especially men.

Statutory definitions place the onus on the individual to prove that they are homeless and that they deserve help. Those single people identified as undeserving (i.e. not old, not pregnant, mentally healthy) are not entitled to be housed under the law. The UK's statutory definition of homelessness does not include roofless people. They are identified as rough sleepers, not 'homeless' (e.g. Crisis 1998). They are not counted in the Government's homeless statistics.

2. *Continuum Definitions*

Some authors use a continuum of definitions that incorporates all possible types of homelessness, from the roofless to those housed but who would rather live elsewhere (Meert et al. 2004; Bramley 1988). These definitions are based predominantly on the individual's relation to housing, their housing need and/or the type of tenure they have. Although this is the most versatile way of defining homelessness, it may be criticized for defining everyone as homeless apart from those who own their home outright and are happy with where they live.

Chamberlain et al. (2000) supports a move away from continuum towards a three-tiered definition of homelessness. Arguing, that by acknowledging degrees of homelessness in three simple levels,[2] statistics can be more precise creating a clearer picture of the extent of the problem.

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1   Also Cockersell's (2006) discussion on drugs, disease, madness and death, and FEANTSA (2006) on health and homelessness in Europe.

2   Primary (rough sleepers), secondary (hostels and temporary accommodation), tertiary (precarious forms of housing).

3. Statistical Definitions

Statistical definitions identify an issue as a social problem then measure the magnitude of that problem. Such definitions are not discussed in the literature as a separate category; they are incorporated into other categories. Yet they play an important role in shaping the general public's attitudes, fundraising campaigns and political agendas. Statistics on homelessness are derived from literally counting people identified as homeless.[3] Thus, the definition used determines the number of people that are counted and in turn the size of the problem. For example, in 1993 the homeless figure in Britain ranged from 140,000 households to 8,600 individuals (Shelter 1993). The former figure refers to those 'households' accepted as statutorily homeless in England and Wales; the latter refers to the estimate of how many people slept rough each night. Statistical definitions tell more about the organization collecting them than about the actual phenomena they are designed to measure (Hutson and Liddiard 1994).

Homeless people are a transient population; they move in and out of various forms of accommodation and spend time on the streets. Statistical definitions require precise categories of clearly identifiable groups of people. However, people's lives rarely fit neatly into just one category. Countries such as Denmark (Stax 2003), Hungary (Győri 2004) and The Netherlands (Doorn 2003) have found that the more you try to impose definitions suitable for statistical categories, the more complex defining becomes and the vaguer the concept of homelessness becomes. Smith's (2003) paper on defining British homelessness demonstrates this problem beautifully with a plethora of different categories – resulting in another continuum of definitions.

Rossi (1989) dismisses homeless statistics as irrelevant, as counting the uncountable, merely providing a representative snapshot of the problem, but with no way of identifying how representative that snapshot is. However, based on this unrepresentative snapshot, the general public's attitudes, fundraising campaigns and political agendas are shaped.

4. Housing Shortage Definitions

These are the most common definitions. They reduce all other factors or problems that may cause homelessness to the lack of accommodation (rooflessness) or its unsuitability. Thus homelessness is caused by a shortage of suitable affordable accommodation in the housing market (Avramov 1995; Shelter 1997; Baker 1997). Hostels are full because there is no suitable 'move-on' accommodation (Spaull and Rowe 1992). Little regard is given to individual autonomy or capability to cope in accommodation, sustain a tenancy or resettle in housed society.

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3   Or a subset of homeless people.

5. General Public's Definition

This definition is not discussed in the literature, yet it is an exceptionally important definition. The definition used by the general public establishes how much money organizations receive from donations[4] and therefore has a direct impact on solutions to homelessness. It can be moulded and manipulated by the media and charities promoting and advertising themselves. The definition held can create apathy or public outrage and it can create stereotypes that are useful or undermining (e.g. drunk not wanting help; lone mother struggling to keep her baby).[5]

Housed young people and parents in the 'What is Homelessness?' research believed that people visibly sleeping on the streets wanted to be there, it was a 'lifestyle choice' – an attitude linked to an unintended message sent out by the Government in their 2000 anti-begging campaign (Smith and Ravenhill 2007). In fact, the use of or manipulation of the general public's (populous) definition has never been more powerful than when it prompted a change in legislation via the powerful portrayal of homelessness in films like *Cathy Come Home* and *Johnny Go Home*.

More importantly, the general public's definition of homelessness affects when people in a housing crisis seek help to avoid or alleviate rooflessness. It also affects where friends of people in a housing crisis suggest they look for or access help (Smith and Ravenhill 2007). Thus, as will be shown later, the general public's definition can both alleviate and prolong homelessness, depending on their interpretation of its meaning.

European Context

It is important to look at British definitions of homelessness in a European context, as European law and strategies such as the Social Inclusion Strategy (or Lisbon Strategy)[6] impacts Britain. It is not possible to offer a European definition, despite FEANTSA's, the European Observatory, EUKN (European Urban Knowledge Network), EUROCITIES and CUHP's (Constructing Understanding of the Homeless Population) best efforts. The actual phenomenon of homelessness manifests itself in multidimensional ways according to each country's macroeconomic status, their social policy stance[7] and the voluntary sector organizations that work with homeless people.[8] The different definitions and causes of homelessness are inextricably linked with these three. Hence the default position is usually to produce a continuum of definitions that covers every conceivable angle in every country. The term becomes opaque and meaningless. For a number of European countries[9] there is tension between what can be observed with the human eye and what can be categorized and quantified, resulting in no official or statutory definition of homelessness.

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4   HWS (2006) discusses Australian attitudes to donating to the homeless.

5   See also May (2003) and Lee et al. (1991).

6   Launched in 2000, it is an action and development plan for the European Union, set out by the European Council.

7   See Esping-Anderson (1990).

8   See Marpsat (2005).

9   Bulgaria, Denmark, France, Italy, Netherlands, Spain.

Table 2.1 European definitions of homelessness

Country	Type of definition	Emphasis of definition(s)	Sources
Bulgaria	Statistical Housing Welfare	No official definition, no strategy for counting; 'no people, no problems'	Dandolova 2005
		Based on rooflessness and housing status (shared housing; temporary shelter)	
		Secondary cause being unemployment, capacity to work, poverty, asylum seekers and Roma displacement	
Denmark	Social exclusion Continuum Social process Welfare	Social exclusion is synonymous with homelessness	Brandt 1992 Stax 2003
		People have 'right' to shelter not housing	
		Definitions derived from existing projects/services	
		Association between childhood factors and homelessness	
		People's lack of housing is due to the individual's social and mental problems	
France	Housing Statistical	Based predominantly on housing (quality and type)	Marpsat 2003a Clanché 2000 Marpsat and Firdion 2000
		The 'norm' approach	
		Other contributing factors are causes or correlates of the housing problem	
Hungary	Social process	Loss of housing is last phase of a social process	Tosics et al. 2003; Győri 2004 Brietner et al. 2002 Albert and Dávid 2001
		Personal factors – including poor social networks, poverty	
		Roofless, those living in shelters for the homeless	
		Economic factors in post-socialist state – including mass unemployment	
Italy	Welfare	Primarily caused by poverty: extreme hardship, multiple deprivation	Tossi 2003, 2001, 1999, 1996
		Social welfare problem, focusing on serious marginalization and desocialization	
		No housing – part of the multiple problems of 'no abode'	

Table 2.1 continued

Country	Type of definition	Emphasis of definition(s)	Sources
Netherlands	Statistical Housing Welfare	No official definition	Wolf et al. 2000 Doorn 2003, 2002, 2000
		Based on rooflessness and housing status (live in institution, squat, the streets)	
		Socially vulnerable (social, psychological and physical well-being). Those unwilling/unable to access welfare facilities	
Spain	Statistical Housing	Homeless are statistically invisible	Muñoz et al. 2003a
		Housing conditions	
		To be excluded – have to have housing	
		Homeless are those using services for homeless people	

Disturbingly, the lack of statutory definition appears to be due not so much to the complexity of the definition, but (in part) to the political and welfare consequences of defining homelessness. This is primarily an economical and logistical decision. Where the political and economical consequences are perceived to be great, defining is left primarily to voluntary sector organizations and academics to grapple with (Doorn 2003). Where research predominantly stems from voluntary sector activity, greater weight is placed on needs, causes and solutions, and the hidden agendas of the funders. This is no different to British research; it is an inherent problem of research, suggesting social problems are as much a social construct as they are a problem.

Definitions used by countries within Europe fall into similar categories to those used in the UK (Table 2.1), with the addition of social process and welfare definitions. Housing (its quality and security of tenure) is the dominant definition. For these countries, rooflessness is considered a housing issue – the lack of *housing*. Denmark and Hungary focus more on the social process of becoming homeless, recognising that housing is one small part of homelessness and by no means the only solution to homelessness.

The Definitions Used

If we are serious about understanding what homelessness means and defining 'home'-less, it is necessary to first look at what 'home' means. Understanding what 'home' is and its function helps us to understand what it means to be without that 'home'. However, defining home is not that simple.

Home

Home is a common everyday term that has multiple meanings that vary enormously. This term is truly a synergy, the plurality of physical and emotional meanings attached to it adds up to far more than the term itself could ever convey. Based on both the general public's perceptions (Smith and Ravenhill 2007; Wilkinson 1995b) and the views of homeless and rehoused people, home is not only a physical place offering safety and security, but a place defined by individuals in terms of: family;[10] a social centre; a unique personal space that allows the individual to define him/herself; a place to relax enough to be 'yourself'; a means by which we order our lives and organize all our activities; something that defines us and our status in life (Wilkinson 1995b).

Young people defined home in terms of their feelings or experience of home (warm, comfortable, loved, wanted), people (family), activities within a building, self-definition and security (Smith and Ravenhill 2007). Homeless people, at times, defined home as their hostel room or a set of relationships within the homeless or travelling community:

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10 Family may include close friendships/relationships or a substitute family.

> 'It felt like I had a family there. I knew how to fit in. I just worked hard and kept my head down. I made good friends and I really liked travelling around. At that time I lived in cars and caravans.' (Alex, male, aged 35; rough sleeper)

This is not a new phenomenon. People can feel at home living on the streets and do not want to be housed (Rivlin and Moore 2001; Hutson and Lidiard 1994). The roofless have defined home in terms of: a social centre; a sense of ownership of that space (or relationships associated with it); a unique personal space to invite people into or choose not to; a physical place where they felt stable, safe, trusted and can trust; family-type relationships; a place for emotional and psychological refuge where they could be their true 'self'; a physical and emotional sense of equality with their peers in housed society:

> 'Home, it'd be somewhere nice and warm. With a telly and that to watch and to sort of sit and lie back for a few days while your mind's all running on and that.' (Tony, male, aged 31; rough sleeper)

From this research, it would appear that a definition of home as perceived by both members of housed society and by homeless and ex-homeless people could be:

> Home is a feeling of safety, trust, continuity and stability that permits the physical, emotional and psychological well-being necessary for experiencing friendships and relationships. It is a central point in our lives from which other activities like work, friendships and relationships can be experienced and developed. It is also a unique space, place or area through which individuals define themselves and allow themselves to be their true self. A space, or place, that allows them to feel anchored into their society and equal to or able to mix with their peers.

Buildings and furnishings are a secondary requirement. If the individual has no emotional response to their surroundings and no meaningful social contacts within the premises or the surrounding area and is unable to create them, they do not feel 'at home'; they feel 'sheltered' (Smith and Ravenhill 2007; Rivlin and Moore 2001). It may be argued that on this basis a huge percentage of the general population do not feel at home, and this may be true. However, not feeling 'at home' does not make people roofless; nor are those alienated from people in the area in which they live necessarily homeless. This definition does, however, point to what people perceive as home, what they expect from home and what they want when they are looking for a home. Those without a home, e.g. the roofless or precariously housed, are not necessarily seeking a physical place for home and thus can be at home on the streets, on friends' floors, in squats, hostels or temporary accommodation.

This definition comes into its own when looking at long-term resettlement. If people see the streets, an old ambulance or a hostel as home, they are not going to give that up willingly for feelings of isolation, loneliness, instability, stress and anxiety. Similarly, when providing accommodation for roofless people, they are unlikely to settle if they do not feel safe, secure and stable. Often these factors are not taken into consideration, which may account for the frequency of episodic rooflessness.

There is a danger here of defining home in such a way (i.e. psycho-social) that those preferring to view the existence of homelessness in terms of individual

pathology or inadequacy have a strong case. Thus it needs stating that this is a relational definition that encompasses individuals' relationship with themselves, their peers, the community as well as the employment and housing markets. It is a definition based on the individual's ability to interact with people and their environment as well as within the structures of society, thus it encompasses both structure and agency theories.

Homelessness

As has already been established, homelessness is far more than 'house-lessness', and there are various definitions of what homelessness could mean depending on who you are and why you want to define it. Within that umbrella phrase, homelessness has three sub-categories that have not yet been defined.

1. Roofless: Those people who literally have no roof over their heads at night and have to sleep on the streets, on benches, in parks or under bushes. These are the people that the vast majority of housed society defines as homeless (Smith and Ravenhill 2007; HWS 2006), though not all roofless people would define themselves as homeless.

2. Houseless: As more research has been done into homelessness and funding allocated to homelessness, some commentators have become pedantic about what is or is not homelessness and who is or is not eligible for assistance. The pedantic view is that those living in sheds, cars, caravans or tents are not roofless, but they are still broadly speaking homeless or, rather, *houseless*.

3. Precariously housed: Those living in hostels, squats, bed and breakfast hotels, temporary accommodation, friends' floors, overcrowded accommodation, and those about to be evicted.

There are other aspects of homelessness that also need defining, some of which are not considered in the literature, and others that have not been developed or have lain dormant for years. Nonetheless, they will form an integral part of the argument and contribute towards the understanding of the homeless process.

Homeless Community

The homeless community is not discussed in British literature. Perhaps this is, in part, because people working directly with the homeless do not perceive it as relevant to the causes or continuation of homelessness or the reintegration process into housed society. Alternatively, funders do not want to waste time and money establishing the intricate networks, rules and regulations of something that they are trying to end. Or perhaps they prefer to view the homeless as social isolates, lonely, vulnerable and in need of help (Rossi 1989). Stereotypes of helpless vulnerable victims are useful to fundraisers. They create an image that invokes public sympathy. The image of a

group of people with a code of norms, values and deep-rooted friendships or feelings of anarchy does not attract funding.

There is literature on Dutch (Doorn 2002, 2004a) and American homeless communities (Glaser and Bridgeman 1999; Liebow 1993, 1967; Wagner 1993; Boelen 1992), which are ethnographic in nature. Doorn and Wagner's studies were also longitudinal. The Dutch and American studies offer an insight into the worlds of homeless people that can be applied to British homelessness. They contain indicators of why 5 per cent of British homeless people prefer to sleep rough and why against all the odds people can survive and thrive on the streets, even in wintertime (Randall and Brown 1996; SEU 1998b. One aim of this book is to redress this paucity of British literature by examining the homeless culture and its impact on its members (Chapter 7). What will be established is that there is no single homeless community. Instead there are many communities, each geographic area having its own. In London, especially, there can be several communities in a small geographical area, some of which intermingle (for example, Trafalgar Square, Strand and Savoy Hotel). The culture comprises roofless and houseless people, plus street users and the precariously housed.

Street Users

Current literature does not separate the roofless from street users. Street users are a group of people who, for all intents and purposes, live on the streets. They look like and dress the same as the roofless, they are seen with their dogs and cans of larger and they frequent daycentres for the homeless. Yet they live in social housing nearby, which they return to at night. There are also those on the street who have secured a night-shelter or hostel place, but have to spend the daytime on the streets.

Homeless Industry

The homeless industry is a useful way of describing the many organizations and individuals that are involved with homelessness. Bevan (1998) alluded to it in his resettlement handbook, discussing the 'environment' that resettlement services worked within, which included all agencies, institutions and social, economic, political and cultural contexts. Elizaga (2002) argued that the fight against poverty (homelessness) had turned into a good business proposition. The term homeless industry was briefly used in the media[11] to describe the Government-funded quadrupling of the number of predominantly unregulated organizations working with the homeless in London over the previous 12 years. In London there were approximately 500 charities in 1991, rising to about 2,000 in 2001 (Walker 2001). This usage of the term, however, severely limits its meaning and ignores the extent to which homelessness has become an industry with raw materials and end products.

Homeless industry includes statutory and voluntary sector organizations, campaigners, churches and charities, plus academics, intellectuals, research organizations, authors and even university or college training courses. Many of these

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11 Walker (2001).

organizations and individuals rely on the existence of homelessness for their funding or wages. Moreover, some people are now specialists in their own right, experts on certain aspects of homelessness. A whole body of knowledge has evolved that includes its own special language and training courses, thus separating homelessness from other related issues such as housing, health or family.

Role of the 'Homeless Industry'

A realistic look at homelessness must include an examination of the impact of the homeless industry on homelessness. As with any industry, it is open to market forces; for example, since 1990 it has grown rapidly in terms of facilities and the prolific output in research and literature from government, academics and the voluntary sector (Klinker and Fitzpatrick 2000). This led to specialist government (Rough Sleepers Unit, Bed and Breakfast Unit, Homeless Directorate) and academic departments (York University Centre for Housing Policy), plus specialist knowledge, language, training courses and conferences. This is not necessarily a negative factor. It has acted as a catalyst for improving homeless provision. Nor is this a uniquely British phenomenon; it occurs in the USA and Australia too.

Furthermore, the industry is self-perpetuating, in that, whilst attempting to alleviate homelessness, it is also in its interest to ensure that there is always a next phase that needs to be looked into or addressed (i.e. suggestions for further research). For example, Phases 1–3 of the Rough Sleepers Initiative led to the Rough Sleepers Unit's focus on prevention and then an examination of the use of temporary accommodation via the Bed and Breakfast Unit. Conversely, without adequate self-regulation there is a danger of 'client hogging' and cream-skimming, with organizations competing for easy clients, or to keep funded beds full. Problematic clients and/or those with chaotic behaviour are difficult and not cost-effective to help. Similarly, many organizations are locked into crisis management rather than prevention, as this is historically where the bulk of funding has been aimed.

Market forces not only caused the homeless industry to expand rapidly, but it also resulted in huge conglomerates being formed as charities and organizations formed alliances or working partnerships in an attempt to gain more funding and meet client needs. Some of these conglomerates merged (or looked into merging), affecting their share of government funding, which then slowed the number of mergers. As we shall see, paradoxically, whilst the homeless industry tries to alleviate the suffering of roofless people and resettle them back into housed society, there is every indication that it is inadvertently part of the cause of rooflessness, thereby creating a never-ending supply of homeless people. In some respects, the nature of rooflessness and homeless culture means that in trying to assist these people, a natural by-product of the industry will be people returning to the streets. Similarly, the fact that services do exist has historically drawn some people out of precarious housing (or difficult living situations) and into homelessness and, in extreme cases, rooflessness, as is

shown in Watson with Austerberry's (1986)[12] discussion on late nineteenth-century philanthropic provision and Carlen (1994)[13] and Jencks' (1994)[14] discussions of modern British and American social policy. Though not overtly discussed in the literature, Table 2.2 is based on the hypothesis that some provisions increase homelessness.

Table 2.2 Examples of provisions increasing homelessness

Literature	Reason for increase in homelessness
The 1996 Housing Act	Designed, in part, to close the loophole between homelessness and a fast-track into social housing
The Homeless Act 2002	Ended two-year rule that potentially kept homeless people in limbo, continually vulnerable to rooflessness, for that period
Spaull and Rowe 1992	Silting-up of hostel accommodation through lack of move-on accommodation means roofless people cannot move into hostels because there are no beds
Ravenhill 2000b	Some hostels or bed and breakfast hotels offer no advice, support or resettlement programme, fail to prepare clients for holding a tenancy, budgeting and coping with day-to-day living, thereby triggering episodic rooflessness
Dane 1998	Resettlement programmes that rush, push or do not support their clients adequately are, in part, to blame for their clients failing to keep their tenancy

In addition, the policies and admission criteria of, for example, hostels, daycentres and housing associations can and do exclude people from assistance. Those on the brink of homelessness (not roofless) are excluded from most hostels, especially in London. Furthermore, the eviction and banning of clients from accommodation

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12 Philanthropists set up hostels, housing associations, lodging houses and a variety of other charities and organizations designed to tackle rooflessness and avoid the use of workhouses and casual wards. They realised that their provisions were in part causing and increasing homelessness. The more provisions they made, the more people stopped finding alternative solutions and went directly to the new schemes.

13 Bureaucratic procedures in statutory and voluntary agencies, housing policy and government policy in general were factors that excluded people from help or inhibited their progress, thus resulting in them becoming homeless.

14 Jencks looked at the effects of improvements to hostel provision in the US, easier access and a change in application procedures for federal housing that gave residents priority. He found that when the risk of spending months on the streets was reduced to a matter of nights, more people were willing to leave unsatisfactory accommodation (friends' floors, motels) and present themselves as homeless – thus gaining a fast track into federal housing. Homelessness increased over time, instead of decreasing.

because of debt or their behaviour may also result in rooflessness. The close-knit organizations working in conglomerates means that an individual is often blacklisted or banned from all facilities in that area. Whilst it is understandable that organizations need to discipline some clients and/or ensure the safety of other clients, staff and property, blanket bans exclude people from facilities and increase their alienation from services and wider society. This is a very difficult group of people to work with, they are disaffected, often unwilling to take responsibility for their own actions and persistently flout rules. Nonetheless, the homeless industry's response to that behaviour does inevitably result in rooflessness.

From discussions with the voluntary sector, local authorities and other providers in Camden, it appears that the homeless industry has become incestuous in nature. Funding mechanisms, the lack of regulation and market saturation in provision for specific client groups have prompted charities and other organizations to become unwilling to share or refer on clients that could be helped better elsewhere. In addition, a mixture of apathy, incompetence and ignorance amongst staff may lead to advice agencies (including housing departments) and professionals (hospital social workers) failing to refer people on to voluntary sector organizations that were better placed to assist certain homeless clients. This caused frustration, disillusionment and mistrust of authority, sometimes resulting in rooflessness, disaffection and alienation from the industry and people spending far longer on the streets or in precarious housing than is necessary:

> 'What might have stopped all this messiness, would have been if I had been told about New Horizon before. Or else a good keyworker at my first place would have meant that I wouldn't have kept moving.' (Anita, female, aged 20; hostel)

Imports and Exports

The absence of adequate facilities results in rooflessness and homelessness. That includes inadequate medical and psychiatric care, supported housing, hostels or rehabilitation programmes for substance abusers. The lack of facilities and provision for homeless people in general causes migration. The homeless industry inadvertently contributes to this. In Exeter, the strength and variety of its facilities drew precariously housed and roofless people in from surrounding villages, towns and cities (Ravenhill 2000a). Similarly, SEEDA and RAISE highlighted hotspots within south-east England, with high incidences of homelessness. These hotspots were triggered, in part, by structural factors that affected the availability of low-rent housing (near airports, prisons, teaching hospitals and university towns). They were also triggered by migration to cities (for anonymity) and places where facilities either existed or were better (Matthewman and Read 2002).

In addition to migration by homeless people, there is a vibrant export industry. For example, London local authorities and charities (e.g. Borderline) facilitate and/ or encourage some homeless people to go back to their 'home' area or the area in which they have a local connection. Additionally, some people are offered the option to move from areas with intense pressure on housing to ones with empty available properties (the North-east). Homelessness is about far more than a lack of accommodation. Exporting people moves the cost of provision of support

services elsewhere – 'outsourcing', in industry terms. Furthermore, if services are non-existent or these people are not dovetailed into services quickly enough, they become vulnerable to further roofless episodes. This may include migration back to areas with more plentiful or accessible facilities.
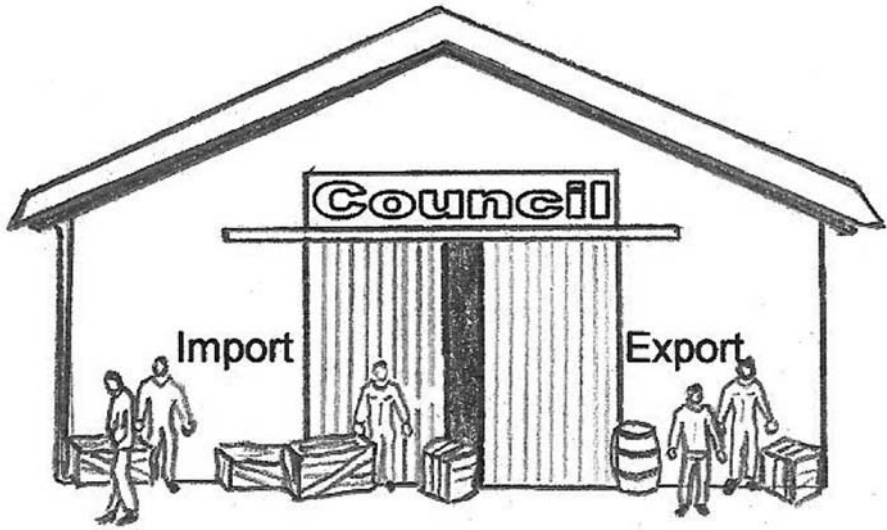
Illustration 2.1 The import and export of homeless people

The export industry also temporarily exports people to out-of-borough facilities. For example, in 2002, hostels for the over-25s, non-hospital-based drink dry-out clinics and drug rehabilitation programmes did not exist within the London Borough of Merton, thus people were either exported to neighbouring boroughs or elsewhere in the country. Alternatively, in Reigate, the lack of move-on accommodation there caused hostels to silt-up[15] (Ravenhill 2000a). Little provision for people over the age of 25 and none for those over 35 resulted in people being redirected to other facilities several miles away and in unfamiliar areas, away from people's existing social networks:

> 'When I went to social services and reported myself as homeless, they told me they couldn't pick me up. I was told that the nearest places for me to go to would be Guildford, Croydon or Leatherhead. But I had no money for the train fare so that was not a great deal of help.' (Pam, female, aged 16; hostel)

There are many more examples of the export industry. Suffice it to say, it is part of the homeless industry and it does result in people being housed, receiving treatment

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15 People couldn't move out of the hostel. This gradually prevented the flow of people being helped and prevented other homeless people from moving in.

or gaining access to the most appropriate facilities. However, simultaneously, despite the best efforts of the Supporting People Programme, it inadvertently also causes people to be displaced, move away from social networks and become vulnerable to isolation, loneliness and further rooflessness.

Control of Knowledge

Over time, some misconceptions about rooflessness have become entrenched in the literature and expert thinking about homelessness. In part, this has come about through the discourse that has developed. A good example of this is 'causes' versus 'triggers'. For authors such as Fitzpatrick et al. (2000) there is little or no distinction between the two terms. However, there has been a discernible shift in thinking resulting from changing the term used from causes to triggers. This changed the whole focus of the homeless industry. Until 1999 the literature discussed causes of homelessness. A list of causes developed from a range of studies that claimed to have found one cause (or more) of homelessness. Once identified, most causes were accepted regardless of the strength of the evidence and were not subjected to further testing. Yet when the causes of rooflessness were looked at more closely, Randall and Brown (1999a) found most of them did not directly cause rooflessness. Instead, there were triggers that could potentially lead people vulnerable to homelessness into rooflessness. Moreover, it was multiple complex triggers that resulted in potential rooflessness. This recognition paved the way for examining the accumulation of triggers over a period of time and the realization that rooflessness was a process and rarely a sudden event (DTLR 2001b; Ravenhill 2000b). This change in thinking stimulated an increased emphasis on the importance of prevention of rooflessness (DTLR 2001b; 2002).

At present, homelessness appears to be synergical in nature. The synergy appears, in part, to be the product of the way homelessness as an issue has been treated and researched in the past. The identification of one misconception and the gaps in knowledge that have since been filled suggests that there may be others. An examination of the literature within the homeless industry shows how these misconceptions and gaps in knowledge may have evolved.

Most research tends to be evaluative, measuring and exploring the extent of what is already known about homelessness, in terms of causes, policy and practice (e.g. Baker 2001a; Pleace 1998; Llewellin and Murdoch 1996; Randall and Brown 1995, 1994b; Anderson et al. 1993; Audit Commission 1989; Saunders 1986; Drake et al. 1981). Just from the dates of the preceding references, it is obvious that this has been going on for a long time. Effectively, the research only tends to find the causes that it looks for or stumbles across as it evaluates a project. For example, when evaluating the long-term impact of the rough sleepers resettlement programme, Alexander and Ruggieri (1998) found the lack of tenant support after rehousing meant tenancies often failed and resulted in rooflessness. That finding went into the pool of knowledge on homelessness and is regarded as a trigger of homelessness (Fitzpatrick et al. 2000).

Research into different areas of social policy or social problems inadvertently identified factors that left people vulnerable to homelessness. For example Hobcraft

(1998), in his research into the intergenerational transmission of social exclusion, produced data that identified people from social class 3a and 3b as the most vulnerable to homelessness.

Thus it was suggested, without further explanation, that middle-class attitudes and values may contribute in some way to homelessness, especially youth homelessness. Other researchers can now build into their work a look at family backgrounds and social class. Further research could investigate exactly how middle-class attitudes and values affect homelessness. Hobcraft's (1998) work, using secondary data analysis, is a classic example of the way new ideas get absorbed into thinking on homelessness, without people ever having to speak to homeless people directly. Then, when the homeless are contacted, questionnaires and survey-style interviews are conducted covering a range or predetermined topics. When Anderson et al. (1993) and Randall and Brown (e.g. 1993, 1996) conducted their research, the questionnaires were based on existing knowledge. Thus their findings produced nothing new on the causes of homelessness, though the numbers of people that were affected by those causes was surprising. This is not peculiar to Britain; in Europe, concepts and causal factors are recycled from previous reports or borrowed from other countries in an attempt to make sense of their findings (e.g. Dandolova 2005; Doorn 2003; Tosics et al. 2003; Muñoz et al. 2003a).

The effects of funding on research findings cannot be ignored. The bulk of the literature is based on small, often localized studies into specific aspects of homelessness (i.e. Alexander and Ruggieri 1998; Pleace 1998; Baker 1997; Llewellin and Murdoch 1996). There is little attempt to develop a more 'macro' picture of the problem. When attempts are made, authors simply draw on existing research and base their comments and arguments on that evidence (Fitzpatrick et al. 2000; Burrows et al. 1997; Coates 1990; Watson and Austerbury 1986). Thus there is a tendency to generalize inappropriately from small-scale, localized studies.[16] This reinforces what is already known, and places that knowledge into a broader theoretical framework. The production of these small, specialist, specific studies is stimulated by the need to raise public awareness about specific issues in order to raise funds, to highlight organizations and underfunded aspects of homelessness to the Government or to generate central funding (Fitzpatrick et al. 2000). This can be a good thing; it raises public awareness, attracts media attention, and feeds directly into government and voluntary organizations' policies.

Often there is a spate of research on the same theme. Once an issue is raised, other organizations want to investigate it from their perspective or highlight a particular 'good practice' model they have for dealing with that problem. For example, research into the links between homelessness and health (Keyes and Kennedy 1992) highlighted, among other things, death on the streets. The extent of this was investigated and further research examined the links between homelessness, health and mortality (Grenier 1996; North et al. 1996). This research was built on and used as part of Baker's (1997) research into the links between homelessness and suicide. Again, the information was built on and used to inform UNLEASH's (1998) research and step-by-step guide to the best way to deal with the death of a homeless person.

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16 Not necessarily by these authors.

This means that over the course of just over 100 years of constant research into homelessness, there has been no fundamental questioning of the way in which the problem is perceived. Assumptions have been absorbed into the collective consciousness of the homeless industry (academics and providers alike), blinkering people to the possibility of alternative causes and solutions to homelessness.

Government-led programmes such as the Rough Sleepers Initiative focused the homeless industry's attention on numbers and throughput of individuals through schemes. Qualitative outcomes that were difficult to measure and quantify were sidelined as statistics that could be easily compared across organizations became preferable. Attention focused on individual schemes and their achievements, rather than on the interdependence of organizations on each other to provide holistic support for homeless people. This had a direct impact on the way funding was meted out, creating in-fighting and jealousy that ultimately affected the quality of help and resettlement assistance available for roofless people.

Some organizations became frustrated at the importance placed on crisis management, statistics and individual organizations' successes. They observed the lack of tools developed for evaluating their success with resolving long-term complex problems that were time-consuming but changed lives (Alexander 1998). Sefton et al. (2002) worked on this area and on developing the use of economic evaluation on the cost-effectiveness of homelessness prevention. Furthermore, the plethora of statistical, survey-style research led to infighting between traditional research organizations and individual charities. Charities began to realize that they could design, research and analyse their own data, at a lower cost. Thus, unchecked, there is potential for the dumbing down of information as deeper theorising and broader comparisons were omitted from research reports.

From 1998 onwards the homeless industry became aware that one very important voice seemed to be missing from most of the literature: that of homeless people. In an attempt to address this, a number of publications began to use direct quotes from homeless people to highlight specific themes or topics. However, the themes and topics discussed were still those based on existing knowledge of homelessness (Jones 1999; Ruggieri 1998). The lack of analysis within these publications meant that little was gained and much potential value was diluted or lost. Homeless people were relegated from expert to freak attraction. Frustration within the homeless industry and amongst such people as MPs prompted the enigmatic question: Why is it that of those people living in certain circumstances, some become homeless whilst others do not? The Rough Sleepers Unit made some attempt to address this, by identifying some factors that protect against homelessness (DTLR 2001b). However, the findings are limited by the heavy reliance on the existing research and bodies of knowledge. The report relies on the stereotypes of homeless people that, over time, were created and established by the homeless industry as an easy means for understanding the people they represent.

Use of Stereotypes

A significant role for the homeless industry is the management of the general public's and Government's perception of homelessness and homeless people. Evidence suggests that some charities, for example, carefully control contents of reports and photographs used to portray homelessness in a way that is in line with their ethos. They depend on these perceptions for funds and status. The industry has the power to mould and manipulate public sympathy and understanding of homeless issues. They are involved in a huge marketing campaign, thus the way the industry portrays homeless people is of significance. Documentary analysis[17] was undertaken to examine the annual reports, promotional and fundraising literature used between 1997 and 1998 from organizations in the homeless industry, focusing on the case-study scenarios used. This gave an idea of the stereotypical homeless person being advertised. There were a number of broad stereotypes used that did not reflect the facts outlined in existing literature:

The 'Respectable' Homeless Person

The documents were designed to present the charities' work in the best light and attract funders. This meant that scenarios often glossed over the more negative characteristics of homeless people and highlighted those that were deemed to be more 'respectable'. For example, alcoholism or drug addiction, though perceived as negative characteristics, were focused on as problems that were aggravated or caused by being roofless, rather than triggering rooflessness. Thus they became more respectable. Similarly, the effects of childhood, family, education and employment were emphasized to create an image of educated, employable people, victims of circumstances who needed a helping hand to sort things out. For example:

The 'respectable' homeless woman
'Respectable' homeless women cannot be alcoholics, chronic crack addicts, prostitutes or child abusers, despite these characteristics being evident among the roofless (Ravenhill 2000a, 2000b). Thus their vulnerability and blamelessness was emphasized rather than the negative aspects of their lifestyles. They were seen as lacking self-confidence and self-esteem, as being afraid, coming from unsettled family homes, having been abused and running away from something terrible. For older women, depression featured strongly as both a cause of and an exacerbation of their experience of rooflessness. Thus, women were presented as victims of circumstances outside their control, people who should evoke sympathy, not judgement. Yet they had strength of character to overcome their situation: survivors unwilling to remain roofless or in unstable accommodation. Despite everything, their rooflessness was simply an accommodation problem, centred around finding or accessing accommodation. Women were either victims or martyrs, but not to blame. This sanitization of homeless women by charities detracts attention away

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17 Table A.1 in Appendix.

from the proverbial 'bag lady' on the street, women diverted into prostitution and the problems of persistent substance abuse.

The 'respectable' homeless man

Respectable homeless men are not drink or drug addicts, nor violent towards their partner or family, though reality suggests differently (Ravenhill 2000a, 2000b). The scenarios portray homeless men as people used to being in paid employment before a relationship breakdown. Men were presented as suffering greatly as a consequence of being roofless and who then developed problems that were caused or aggravated by their rooflessness. These problems subsequently made it difficult to move into accommodation or maintain a tenancy. The scenarios placed great emphasis on the length of the homeless episode and how long they slept rough. There was no mention of excessive drinking or violence as a cause of some homelessness. Men were portrayed as victims of circumstances, not orchestrators of their own lives. By focusing on qualifications, previous employment and future aspirations (wanting further education or employment training), they were portrayed as educated, happy to work and keen to take an active role back in housed society: 'respectable' characteristics. Negative characteristics were shown as apparent lapses in good behaviour or problems caused by their rooflessness. Thus homeless men were portrayed as wanting help, being relatively easy to help and worth helping.

This focus on respectable homelessness detracts attention away from the difficult-to-handle and difficult-to-help clients that frequent many of the organizations within the homeless industry. By focusing on the easiest clients, they distract the general public's attention away from the raw reality that rooflessness does not begin on the streets, but in society and families long before rooflessness occurs. These 'respectable' profiles do not match the findings of literature from elsewhere within the homeless industry (academic or government research).

The Victim–Martyr Role[18]

The victim–martyr role is one through which people gain sympathy, protection or assistance. It implies passivity, of life happening to a person, they are innocent of wrongdoing or mistakes. People are not responsible for or able to control what has/is happening to them. The martyr role implies that the person is a survivor, resilient, long-suffering, has a noble cause, has suffered greatly but has fought hard to overcome. The victim–martyr role is a very useful, perhaps manipulative tool. The homeless industry uses it to evoke a sympathetic response and as a very powerful fundraising tool.

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18 See American literature on victimology, e.g. Landau and Freeman-Lang (1990); Mawby and Walklate (1994).

Product of their Upbringing

Where biographical details are mentioned in the scenarios, there is great emphasis placed on childhood, home-life and family influences, especially for young people. People are portrayed as products of their upbringing, innocent victims of circumstances unable to affect what is happening to them. There is little mention of negative background factors, like truancy and school exclusion, early involvement with drink, drugs or crime, violent behaviour and an allergic reaction to all forms of authority. The focus centred on the breakdown of child–parent relationships, with parents (possible funders) often portrayed as virtuous and unlikely to throw their children out (the biggest trigger of youth homelessness – Fitzpatrick 2000; Randall and Brown 1999a). Such well-established triggers were understated or diluted. For example:

> Family conflict, a known significant trigger of youth homelessness (Smith et al. 1998; Randall and Brown 1999a), was underplayed. Organisations preferred to use the term relationship breakdown. The difference in term used is important, different terms conjure up different pictures. 'Conflict' tends to suggest negative interaction, active participation, rows and arguments: whereas relationship breakdown hints at passivity, a less active role, especially on behalf of the 'victim'.

> Care leaver homelessness is also played down. Only 13 per cent of scenarios portrayed clients as care leavers. Existing research shows 32 per cent of rough sleepers had been in care. (Randall and Brown 1999a)

The emphasis on the consequences of homelessness is justifiable, in that the majority of charity work is in crisis intervention. However, the inadvertent by-product of that emphasis is to draw attention away from homeless people's pre-existing problems, especially those that were viewed as negative, to do with individual personality or behaviour. The stereotypes portrayed by this part of the homeless industry skew the media, Government and the general public's perceptions of rooflessness, diverting attention away from an exploration of fundamental issues, such as why, despite intensive intervention programmes,[19] homelessness still persists.

The homeless industry must be applauded for its potential to alleviate and prevent both rooflessness and homelessness in general. It is an industry founded on, shaped by and perpetuated by the existence of rooflessness as a social problem. It has the power to mould and change public and government perceptions of roofless people. Paradoxically, whilst trying to resolve rooflessness, at times it inadvertently creates it. In trying to raise public awareness of the plight of roofless people, it dilutes and plays down the reality. Much thought needs to be given to determine the extent to which these paradoxes are inevitable, avoidable or manageable.

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19 Rough Sleepers Initiative; Safe in the City.

Chapter 3

Homelessness: Theoretical Perspectives

Over the years many theories about homelessness have developed that have both contributed to the understanding of homelessness and fuelled the homeless industry's push for more research. How one approaches this research, to some degree, depends on the theoretical framework used, and although a number of theories broadly apply, in practice no single theory seems appropriate; thus an amalgam of theories is advocated for a thorough understanding.

Power and Pathos (an Aspect of Functionalism)

The sight of people sitting on the streets of England can be, for some people, a very powerful experience, invoking a variety of sometimes conflicting reactions and emotions, including anger and pity. When discussing people's reactions to American homelessness, Coates (1990) suggests that there is an elusive power that homeless people appear to have to invoke some form of response. Very few people walk by without any reaction at all, whether that is outwardly expressed or not. Coates (1990) notes the Jungian viewpoint that the homeless are 'the shadow, the darker, harsher side of life and of humanity', a side with which we would rather not be confronted.

Homelessness in England has existed at least since the Middle Ages (Cope 1990). Yet people have never been comfortable with seeing people sitting and sleeping on the streets. Historically numerous ways of preventing homelessness have been tried, or at least ways of preventing people from sleeping rough. Coates (1990), however, suggests that for some unknown, perhaps perverse, reasons, we need a visible darker, harsher side of life to assist with the rest of society's ontological security. That is, security comes from the knowledge that there are people 'worse off' than ourselves.

Coates (1990) contrasts this Jungian viewpoint with that of Max Weber's interpretation, namely that homelessness is:

> an example of the western world's profound evil, stemming from its ignorance, from its insistence on not being shown tragedy, pain, illness, death. (Coates 1990)

The sight of homeless people, especially at Christmas, provokes a moral outcry that something should be done. The experience of tragedy, pain, illness and death is fine in the theatre or cinema. It is unacceptable, however, to leave expensive seats in the theatre, only to be confronted with the fact that it is not fantasy but real. Weber would argue that the Western world does not want to be shown real tragedy and pain, but peep at it from a safe distance. This is the darker side of humanity.

Photograph 3.1 Shop window
Source: Megan Wilkinson, 1996.

There is an enigmatic power invoked by homeless people. It not only invokes anger but apathy too (Coates 1990). Jahiel (1992) argues that even the visible sight of the destitution and suffering of homeless people on the streets has failed to evoke a public reaction strong enough to prevent it. In fact, the majority of the general public is apathetic and indifferent or even hostile to homeless people. This hostility is, according to Jencks (1994) and Weber's explanation, due to the anger provoked at being confronted with the harsh side of reality that people prefer to keep hidden. People are upset by seeing suffering blatantly displayed on the streets amongst the shop windows they browse. The homeless person gives Jencks' (1994) 'prosperous classes' an uncomfortable jolt with reality. This refusal to accept uncomfortable realities leads to the neutering of social problems (O'Neill 1972). Jahiel observes:

> This is not the first time that a societal phenomenon that will be looked at later with abhorrence is accepted by the contemporary population. (Jahiel 1992)

For example, slavery was accepted as commonplace throughout the eighteenth century. This is a part of the past that we would rather forget about and ignore. It is now a thing of shame. Similarly, in England throughout the nineteenth century, what we would regard as child abuse was common practice, an acceptable, everyday part of our culture. It is only now, in the twenty-first century, that such things are abhorred by contemporary culture.

Homelessness has attracted large sums of money to tackle rough sleeping (Rough Sleepers Initiative, 1990s; Rough Sleepers Unit, 1998–2002; Homeless Directorate, 2002–onwards). However, no policy has been created to prevent people from sleeping rough. Why is this? Why is homelessness regarded as such a part of the norm that we fail to react or be outraged?[1]

Functionalism

Functionalism is a theory more closely associated with sociology and anthropology than social policy. However, it is a framework that some commentators use for understanding homelessness (e.g. Jahiel 1992; Rossi 1989). Functionalists look at society in terms of social order and social systems, explaining why that order and those systems are maintained through the shared norms and values of its participants.[2]

Jahiel (1992) uses functionalism to define 'home'. He looks at the functions of 'home' and the 'hazards' faced by individuals when they do not have one (Table 3.1). Jahiel (1992) argues that by understanding what home offers an individual, we can better understand why it is important to prevent homelessness rather than cure it once it has happened.

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1   Hutson and Clapham (1999) attempt an explanation using constructionist theory.
2   See Parsons (1937; 1951) and Merton (1949) for fuller discussion.

Table 3.1 The function of a home

	Function		Hazard(s) when the function is lost
1	Protection from the elements	1	Dehydration, heat stroke, hypothermia, exposure, discomfort
2	Protection from crime	2	Increased risk of robbery, beating, rape or murder
3	A place to rest, sleep, recuperate from stress, wash, toilet, clean one's clothes	3	Stress, fatigue, lack of sleep, poor judgement, irritability, slow reactions, poor hygiene, dirty clothing, so-called 'homeless appearance', dependent oedema peripheral vascular disease
4	A place to keep one's possessions	4	Need to carry one's remaining possessions
5	A place to be alone; one's 'personal space'	5	Stress and tension, demoralisation, exposure to respiratory infections, etc
6	Control of entry; a place to be with friends	6	Intrusion of people who may be disruptive, exploitative, or abusive; lack of ordinary social life
7	One's own place; a place that reflects one's personality, taste and creativity; a place to prepare one's meals	7	Anonymity, demoralisation, increased exposure to alcohol and drugs
8	A place where one lives with and raises one's family; which provides role models for children; where children do homework	8	Interference with family life; emotional stress and demoralisation; poor role models and bad influences for children; poor progress of children in school; sometimes, separation of parents from children
9	An address; a place where one can be reached by mail or phone; a place near work or recreation	9	Interference with searching for a job or receiving benefits
10	A symbol of one's belonging to a community; facilitation of political action	10	Decreased ability to participate in mainstream politics; inability to vote
11	A place that confers social status	11	Low social status and consequent risk of lowered self-esteem or self-image
12	Economic value of the home; home as investment; home as a place to engage in gainful work	12	Low economic status; decreased ability to improve one's economic status

Source: Taken from: Jahiel (1992), *Homelessness: A Prevention-Oriented Approach*.

Jahiel notes that by defining home in this way, home has biological and psychological functions as well as legal, economic and social functions. Therefore a 'home' has a significant role to play in the stability of society and the socialization of society members (young and old). Without that stability, there is a whole range of 'hazards' that beset a person, which include those associated with health and hygiene, personal safety, and mental health (also Hiscock et al. 2001). Jahiel's (1992) definition of the notion of 'home', however, is predominantly concerned with home as a physical structure, rather than a 'lived experience' that is part of memories, ontological identity, emotions and mental well-being. Although, it is important to note that Jahiel (1992) sees that the lack of such a container can cause severe physical and mental harm.

The main problem with functionalism in terms of homelessness is that from the outset the homeless person is seen as deviant, dysfunctional, even abnormal. This shifts the emphasis from the causes of homelessness (e.g. housing policy or employment structure) to causes that are predominantly people's personal failings or pathologies. To interpret all causes of homelessness as the individual's fault or inability to cope is unhelpful and misleading. For example, Rossi (1989) examined homeless people's relationships with their families, and saw the individuals' choice to isolate themselves was a symptom of their dysfunction. There is no recognition of the fact that families where incest, violence or constant criticism takes place are actually the dysfunctional party. This suggests that the act of isolating themselves from such a family could mean the homeless person is functioning normally under the circumstances, rather than being dysfunctional. Functionalism as a theory, therefore, contributes to the debate, but on its own is severely limited as an explanation of what is actually happening.

Structuralism

Structuralism is based on the theory that society is made up of many structures that work together to order people's everyday lives. Social problems can be analysed in terms of how the structures that organize or regulate life do so. Thus a structural explanation of homelessness, rather than focusing on the individual and their relationship to society, focuses on the social structures of that society and the way they affect the individual. Thus structuralist accounts of homelessness would focus on housing, welfare, economic systems and the family, looking at the effect these systems have on individuals or the roles they play in causing and perpetuating homelessness (e.g. Meert et al. 2004; Clanché 2000).

Shelter[3] as a movement, for example, historically focused on housing as the only solution to homelessness; although they acknowledge that other things are important too, the vast majority of their research is still conducted in terms of housing need. Carlen (1994) used a structuralist approach when he examined the structures that affect youth homelessness. He discusses the governance and agency-maintenance of

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3   Homeless charity in the UK.

homelessness, by examining the way policy and practice within existing structures[4] actually keeps some young people homeless or in accommodation that makes them vulnerable to homelessness. European countries like France and Spain adopt a structuralist approach to defining homelessness (housing types and conditions) and this results in them producing a plethora of statistical analysis on homelessness in terms of structures (Muñoz et al. 2003; Marpsat 2003a).

Structuralist analysis can be useful in that it can facilitate national and international comparisons, pointing to structural patterns that can be replicated to alleviate homelessness or avoided if they exacerbate homelessness. For example, American and Hungarian homelessness can be compared. Tosics (2003), in his description of the collapse of socialism, notes a massive increase in youth and single person homelessness (also Győri 2004). This was triggered by the closure of workers' hostels (tied accommodation) when industry began to close in the late 1980s and 1990s. No alternative accommodation was provided. Homelessness, and in particular rooflessness, increased rapidly and the weak infrastructure, still in transition, was unable to cope. Similarly, in America in the 1950s and 1960s, the cheap skid row hostels were closed and no alternatives were created, rooflessness increased, especially among single males (Rossi 1989). The lesson being: the closure of structures, such as hostel systems and tied accommodation, will result in increased homelessness and rooflessness if suitable alternatives are not created alongside.

England in the 1980s and 1990s, with its closure of large mental health institutions and the end of keyworker tied accommodation (e.g. nurses' hostels/lodgings), is another example. The result, again, was increased rooflessness. Structuralists would argue that lessons can be learnt from Hungary, America and England, to predict sharp increases of homelessness in countries such as China, giving a window of opportunity for government intervention. As China's economy grows and industry is modernizing and adapting to the global market, traditional rural and/or outdated industry is closing (and, with it, tied accommodation and other social structures). Already in cities like Tianjin and Beijing, the number of visibly roofless people is rising. In the absence of any real alternatives, rural populations migrate to cities – in the same way as they did in India in the last century and in England in the century before that.

The main problem with structuralism is that by focusing on the structures (the macro) it overlooks the individuals' (the micro) ability to be independent of these structures. It doesn't account for the individuals' ability to act, react and interact with their environment, making conscious decisions, taking risks and determining outcomes. Although it should be recognized that structuralists would still argue that an understanding of structures is necessary if the individual's actions and reactions within a given structural framework are to be understood.

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4   Social services, housing departments, benefit system.

Deviancy

Although deviance theory stems from functionalism, it is also used within structuralism and interactionism. Functionalist deviance theory can be applied to both positive and negative actions; as a theory, it is more renowned for its association with negative actions and popularized by debates on crime and disorder or delinquency. Homelessness from a functionalist deviance perspective is seen both as a threat to society (breaking the social norms and values) and a natural function of a healthy society (Durkheim 1938). Words such as dysfunctional have entered the vocabulary of homeless people, probably via the court system or social service intervention. It is not uncommon, when asking people how they became homeless, for them to say, 'I'm from what you call one of those dysfunctioning families' (Frank, male, aged 53), and assume that this statement explains everything about their background.

Merton (1949) develops deviancy theory, arguing that the way society is structured (for example, class systems) forces deviance on individuals within that society. Thus norms and values are like rules in a game. Following those rules results in socialization and the perpetuation of a given society. However, pressure within society causes some people to abandon the rules of the game, creating a state of anomie. Thus, for Merton, homelessness (deviance) would be part of the nature of society rather than the individual's nature.

Structuralist deviance theory looks at individuals' or a subgroups' position within the social structure of society. Subcultures are seen to be the product of a group of individuals who form an alternative set of norms and values to that of mainstream society. In their extreme, subcultures take mainstream society's norms and values and turn them upside down (Cohen 1956). Thus deviance is perceived as a negative reaction to a society that excluded some members, with subcultures offering those people a sense of inclusion even though this may be viewed as deviance. Homeless culture, then, would be the product of marginalized people within society coming together in reaction against the mainstream to form an alternative parallel culture. This theory explains the homeless culture, but not why people become homeless.

Interactionist deviance theorists divert attention away from the individual and social structure, exploring instead the interaction between the deviant and those who define them as such. This theme is strongly featured throughout Foucault's (1977) *Discipline and Punish*. As an example, Becker (1974) explores deviance and delinquency through labelling theory. He surmises that it is society's reaction to a behaviour that causes it to be seen as deviant, not the actual behaviour. This theory neutralizes homelessness, seeing the way homelessness is defined and perceived as the object for discussion, rather than the causes and solutions.

The problem is that although deviance theorists perceive homelessness as deviant behaviour, the reasons why it is deviant vary enormously. No one theory of deviance completely explains the existence of homelessness and Cohen's subculture theory only partially explains homeless culture. The problem with deviance theory is that it straddles too many grand theories and so has become a metamorphic term that changes according to context and theory held.
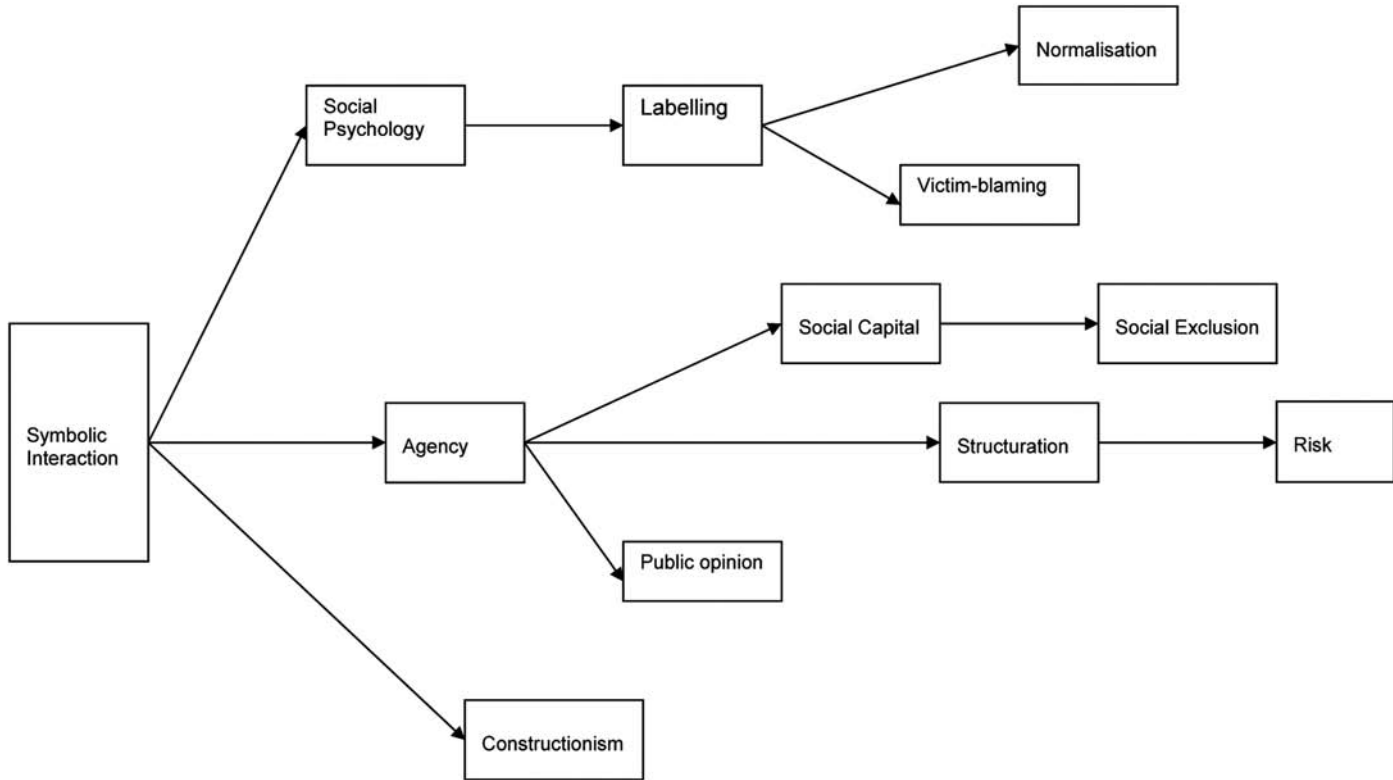
Diagram 3.1 The influence of symbolic interaction theory on current sociological theories

Symbolic Interaction

A popular theory in American sociology up until the 1960s and 1970s, symbolic interaction was popularized by GH Mead (1934) and Blumer (1969); Goffman (1959, 1968) was also classed predominantly as a symbolic interactionist. This theory places emphasis on social process rather than structures and functions. Individuals interpret themselves and their everyday environment in terms of their actions, reactions and interactions with everything around them. This is a self-oriented approach that places the individual at the centre of analysis and looks at the way they construct, deconstruct and reconstruct themselves, their worlds and their own reality. The notion of the individual acting and reacting, constructing and deconstructing both themselves and their worlds is useful when looking at the impact of homelessness on the individual and the choices that they make throughout the process of becoming, being and leaving homelessness. There are a number of theories that have developed directly from symbolic interactionism (see Diagram 3.1).

1. Social Psychology

Mead (1934), for example, believed that the 'self' emerges from a process of internalizing social interactions by learning to take on the role of 'the other' through role-play, thereby understanding different perspectives and gaining a better view of the way they present themselves to others. This process of internalizing the world around them and then externalizing that world through the way 'self' (the individual) presents itself, is important for Mead because it explains how the norms and values that functionalists speak about are absorbed into collective culture, and the way people construct their self-image and therefore their self-worth. This is also part of some child psychology theories (Winnicott 1964).

   Social psychology in Mead's sense would be an important part of research into homelessness. Rather than seeing homeless people as passive victims of social structures or their own individual pathologies or dysfunctions, homeless people and those vulnerable to homelessness would be perceived as active agents who directed their own lives. As a theory, therefore, it comes into its own when looking at homeless culture and the way rough sleepers are absorbed into that culture and perceive themselves in relation to others, both in that culture and among the housed population.

2. Labelling Theory

Labelling theory is a way of analysing and explaining the processes involved in the assignment of roles and labels to people in society. These labels can be both positive and negative, and are applied to acts, individuals or groups. This approach has been influential in the sociological studies of deviance, the regulation of mental illness, the effects of gender labels and the effects of labelling in the classroom (Goffman 1959, 1961; Rosenthal and Jacobson 1992). However, the focus tends to be on the effects of negative labels on the individual's self-image or self-perception.

Goffman (1974) uses Mead's (1934) notion of an individual acting, reacting and interacting with themselves and others in a given environment. He describes it as actors on a stage, acting out parts or roles. Each actor (individual) has a role to play. Roles are partly taught by others and partly learned by the individual through that process of action, reaction and interaction. Furthermore, any one person can have a number of roles that they play, either simultaneously or when the situation arises. For example, a person may play the roles of researcher, wife, daughter, sister, student, pupil, stranger, friend. All these roles affect relationships with others, the way people see themselves in certain situations and the way they behave. More importantly, they are part of the image a person may have of themselves.

Goffman developed this theory as part of his research into asylums and their impact on mental health patients (Goffman 1961). He saw that people entering mental institutions were firstly stripped of their identity, given a new identity of 'mentally ill' or 'patient' and from that label they learned or developed behaviour patterns that were associated with that label. Behaviour developed partly through the individual's understanding of what a patient is and should do, and partly from other people's expectations of how a person with such a label should behave. Goffman identified the power of labels to change people's self-image and behaviour and their power to change the way individuals interact. This is important for understanding immersion into the homeless culture. Often homeless individuals (and groups) are categorized and defined through typologies, for example, homeless alcoholic, youth homeless, passive beggar (e.g. Hutson and Liddiard 1994; Rossi 1989; Krauthammer 1985). The causes of homelessness are similarly categorized under main headings that can obscure individual causes, for example, family conflict (hides incest, abuse, arguments), relationship breakdown (hides divorce, domestic violence) and lived in institutions (hides ex-servicemen, ex-prisoners, care leavers) (Randall and Brown 1993, 1996; Anderson et al. 1993).

The positive side of such labels is that people in the homeless industry know and understand what they mean; many categories indicate a set of needs that are important for hostel management and resettlement. However, as Goffman (1968) points out, many labels have negative consequences; they can have stigma attached to them. For some recovering from rooflessness and trying to re-enter housed society, the stigma of having been roofless is a source of shame. They do not want people in their new surroundings to know that they have been homeless. The fear of people finding out makes it difficult to take part in everyday conversations. Similarly, the labels people attach to homeless people affects the way we view them, treat them and even give money. One homeless man, for example, when asked if at any time he thought that he would become homeless, replied:

> 'I never thought I'd be homeless. I'd seen people who were homeless and thought they were lazy layabouts that should just get a job. Now I am homeless. I know it's not as simple as that, people aren't like that.' (Roy, male, aged 38; hostel)

Labelling worked two ways in this example. Firstly, there was the label that he assigned to homeless people before he became homeless. This affected his attitude towards

people on the streets. Secondly, there was his view after *he* became homeless. That view suggests that he did not see himself fitting the label he originally ascribed.

Labelling theory becomes inadequate as an explanation of why people behave the way they do as it ignores the actors' ability to make moral choices about how they want to behave as a homeless person. In addition, this theory ignores individuals' psychological or pathological predispositions that affect the way they behave and react. A number of critiques of labelling theory have developed, including victim-blaming.

a. Victim-blaming[5] Though not a theory in its own right, this critique of labelling theory suggests that by concentrating on deviance, the victim is ignored. Neale (1997) looks at homelessness and 'victim-blaming', noting that there is a tendency to blame the victim for what has happened to them, i.e. either the victim has chosen to become homeless, or the victim's personal weaknesses or inadequacies have led them into homelessness. Neale fails to extend this argument further and look at the way the role of victim is used to gain advantage. From the current research it is evident that many homeless people learn how to 'play the victim'. That is, they learned how to behave and what they needed to say to get the most help, raise public sympathy, get social security benefits or deal with the police and the courts. This is not a new phenomenon. Rose (1988), when discussing the vagrant underworld in Britain from 1815 onwards, gives a colourful account of the different forms of beggar to be found in Britain at the time, and how these people relied on their ability to dress up and play the role of a victim (e.g. of the Napoleonic wars (wounded soldier), the errant husband or the wicked step-parent).

b. Normalization The term normalization, though commonly associated with the treatment of mentally handicapped people (O'Brien 1981) or Foucault's discussion on power and 'micro-powers' (Neale 1997; Foucault 1977), can be applied to homelessness. Although normalization is not a theory connected directly with symbolic interactionism, it is another way of explaining the affects of labelling theory. O'Brien (1981) discusses the way mentally handicapped adults (e.g. those with Down's Syndrome) were often dressed by their parents in similar clothes to their parents (including adult shoes and handbags) as a way of neutering their difference, and attempting to make them look more normal than the 'normal'. Thus they were assigned a label that did not nor could ever fit their appearance or behaviour and were asked to conform to an unnatural way of being. In contrast, Foucauldian thought views normalization as moulding people into 'normal', a process achieved by encouraging people to regulate and achieve their own conformity with the established rules. Thus pressure comes both externally and internally to make people comply with cultural norms and values. Normalization applies both to how people become part of the homeless culture and the struggle they have to feel a part of housed society when leaving homelessness. This tension between the label applied and the way the individual feels and functions within society is part of deviance theory.

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5   Not to be confused with victimology – Wardhaugh (2000); Landau and Freeman-Lang (1990).

Throughout this century there has been an increasing view that homeless people need 'treating' or 'reforming', as though they were suffering from some form of medical disease. This medicalization of homelessness has caused such authors as Krauthammer (1985) to diagnose 95 per cent of homeless people as mentally ill.[6] It also led directly to current resettlement programmes and the notion that homeless people can be retrained (given life skills) and treated for the condition of homelessness, through keyworker support, counselling or social work intervention. Thus people who experience abnormal things (e.g. incest, institutionalization, sleeping rough) appear to be expected to retrain, to be reprogrammed to look and behave like the rest of housed society.

One of the criticisms of normalization theory is that normal is a fluid metamorphic term that shifts as society changes, making it difficult to measure deviance from that norm. This makes it difficult to decide when normalization has taken place. Is it at the point where a homeless person is housed and is living a settled way of life? If so, this does not include those who continue to dress, look, act and deal with personal hygiene as if they are homeless. Alternatively, are people normalized when they adopt society's badges, uniforms, habits and vocabulary, so much so that they merge so completely into society that there is no apparent trace of them having been homeless? But then, which of the many badges, uniforms, etc. do they choose to adopt: businessman, long-term unemployed, voluntary worker, student, parent, spouse?

It is easy to make the mistake of assuming that normalization requires individuals to be normalized into mainstream society. However, the inverse of O'Brien's (1981) theory is also true: people can be normalized into street culture. This is both a passive and interactive process. Some actively choose to learn and adopt street culture rules, speech and behaviour patterns; others passively mix with other homeless people and are socialized into a new norm. Fitting in on the street, as demonstrated in Chapter 7, involves a whole series of changes that transform the individual. What makes normalization different from socialization is the element of power and coercion – pressure externally applied to make people conform. Once homeless, institutions react differently to an individual (e.g. banks, shops, benefit offices, housing departments); they set different rules and adopt a different way of talking and dealing with homeless clients. Similarly members of the general public react differently, anticipating a different form of behaviour and set of attitudes. Often any attempt by the homeless person to act 'normal' and be dealt with in the same manner as their housed peers is rejected and treated as deviant and in need of correction.

3. Constructionist Theory

Constructionist theory has its roots in Blumer's (1969) branch of symbolic interactionism and was developed by Spector and Kitsuse (1973). Constructionism is used to study social problems and the use of power to resolve them. For constructionists, social problems are caused by specific groups within society having the power to identify and define a particular phenomenon or issue as a social problem

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6   Also Cockersell (2006); Rossi (1989).

that needs tackling. Those in power choose and define how that problem should be tackled. Thus for Hutson and Clapham (1999), the concept of homelessness in England did not exist as a social problem until the Government began to intervene to control, govern and ease homelessness at the end of the nineteenth century and predominantly during the twentieth century. This then created the term homelessness and gave it the status of social problem. Similarly, some European countries have traditionally fought against defining homelessness (i.e. Spain (Muñoz et al. 2003a) and Italy (Tossi and Torri 2005)) and therefore homelessness as a social problem did not exist. Membership of the European Union and FEANTSA's drive to find a common homelessness policy turned the issue into a social problem for these countries – a problem they have now to define, quantify and develop solutions for.

The way a social problem is defined leads to the way policy is constructed and the way policy is constructed leads to organizations (public or private) being created to deal with that problem (Jacobs et al. 1999). The problem with this is that the definition of a social problem is not a stable concept. Other people or groups with power can attempt to redefine or modify the definition used and therefore change the nature and function of the organizations created to deal with the problem. Furthermore, at times in an attempt to grapple with the complex problem of defining homelessness, there is international as well as national pressure, as some countries look internationally for inspiration and possible solutions.[7]

Jacobs et al. (1999) use constructionist theory to explain changes in legislation, government policy and voluntary sector responses. This includes an examination of the media's role in changing public and government attitudes towards the homeless. Attitudes to homelessness oscillated between victim-blaming and structural explanations over the latter half of the twentieth century and thereby evoked either 'blame and judgement' or 'sympathy and understanding' (Jacobs et al. 1999).[8]

This theory comes into its own when looking at the development of homeless policy in countries such as Denmark (Stax 2003), Spain (Muñoz et al. 2003a), Italy (Tossi 2003) and France (Marpsat 2005, 2003a).[9] Constructionist theory is also useful when looking at the homeless industry and the way knowledge, intervention and practical solutions are implemented, evolved and changed. It also facilitates understanding of the role of the media and public attitudes in policy development, the financing of projects and research. However, looking at the way social policy acts, reacts and interacts with organizational and public expectations shifts the focus back towards structuralism. As a theory of homelessness, it is severely limited as it tends to ignore the individual completely by lumping them together into labelled groups which have been classified and defined and around which policy and organizations have been created.

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7   For example, Hungary looked to Canada (Tosics et al. 2003); Spain looked to FEANTSA and the European observatory (Muñoz et al. 2003a).

8   For a fuller explanation of constructionism and homelessness, see Hutson and Clapham 1999.

9   These recent discussions demonstrate the way a social issue becomes a real social problem and dilemma for governments and social scientists to grapple with (www.cuhp.org).

4. Public Opinion Theory

German in origin, Tönnies theory (in Hardt and Splichal 2000)[10] expands Goffman's notion of looking for symbolism everywhere. It is ethnographic, phenomenological in origin. Tönnies looks for meaning in diverse collective behaviour, activities such as: audience behaviour (applauding and hissing); rituals (ringing bells, raising flags); and art (grafitti, posters, theatre). He argues that these cannot be viewed without understanding the mood of the people creating the action and interaction (actors, painters, architects, musicians). Together they impact on taste and opinions and are affected by core common sets of values. Public opinion cannot exist without reflection, discussion and interaction between people and their environment and the populous understanding Goffman's rules of the game.

This is a difficult theory to define as its conclusion is always going to be emergent, fluid, prone to change and dichotomies. In this theory, individuals grapple with contentious contemporary issues that lack resolution, but their opinions and views can be swayed or manipulated by those controlling wider, interconnected knowledge.

5. Agency

Agency theory is a central part of symbolic interactionism, ethnomethodology and phenomenology. The focus is on the individual's (or actors) ability to operate independently of the social structures of society, to achieve a given social outcome. For example, the working class child, living in a run-down council estate and from a broken home, achieves a first class honours degree and becomes a successful businessperson. In this example, against all the odds they achieved a higher standard of education and a better standard of life. They operated independently of the social structures of society that are blamed for keeping such a person low-educated and at best doing low-paid menial jobs all their lives. Thus individuals' decisions and their choice of the way to use structures (e.g. housing markets, employment) or work within those structures, shows that they have the power to make choices independent of the macro structures within society. In relation to homelessness, people like Prince Charles's old school friend, made a series of life choices within the framework of British social structures. However, this meant that despite his public school education and excellent start in life, he became homeless (e.g. Moyes 1997).

Agency theory can lead to the analysis of the social process of becoming roofless or homeless. However, the main criticism of this theory is that you cannot really separate the individual's actions and choices from the effects of structures. Giddens (1984) argues that you cannot look at society as simple polarizations of structure or agency, instead you need to look at the way structure and agency interact together. Giddens calls this structuration.

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10 Also Hardt (1998; 2001).

Social Capital

Social capital theory has a number of definitions, but belongs with discussions on agency. It is a precursor to structure–agency theories. Bourdieu (1986) focuses on the combinations of individuals' actual and potential resources (biography and skills, e.g. education, knowledge, life experience, time, labour, social networks) and how these can be used within a network of relationships (often institutionally based). The concept depends on common social norms, levels of trust and reciprocity between agents (networks of relationships) using social capital (Putnam 2000). Social capital can be both a resource for individuals and a mechanism for community cohesion. Social capital is a mechanism by which individuals can place themselves in society and negotiate through society to achieve.[11]

For Firdion (2005), social capital marks a move away from the simple binary oppositions of agency (individualistic) and structural approaches to complex social problems. By looking at social capital, Firdion (2005) argues that indicators of risk can be identified (thus this can be viewed as a precursor to risk society theory). Five categories of capital were identified: physical or mental health, social, educational, economic, and symbolic capital (Marpsat and Firdion 2000). These, plus occupational capital, can be used to examine the positive and negative impacts of homelessness on individuals (Table 3.2).

Although the social capital of roofless people can be perceived to be severely limited (Firdion 2005), mainstream social capital is not needed for survival on the streets. The capital needed for survival within street culture involves the inverse hierarchies discussed in Chapter 7. Where homeless people use problems and difficulties like badges of honour and what is seen to be negative social capital within housed society is positive social capital within the homeless community.

This theory, whilst focusing on the individual, looks at the way they negotiate through structures. However, it ignores the impact of structures on the individual's ability to form social networks and to use social capital. The theory becomes useful when looking at the resources used by homeless people to avoid homelessness (Chapters 6 and 8) or survive on the streets (Chapter 7).

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11 See also social strategies in risk society (Bornat 1999).

Table 3.2 Social capital applied to homelessness

Social capital	Description	Applied to homelessness: Negative impact on captial	Positive capital
Physical or mental health	Ill-health deprives individuals of resources (capital)	Unable to work, sleep deprivation, impaired decision-making, alienation from social networks in mainstream society, loss of economic capital. Increased risk of rooflessness.	Entitlement to benefits. Access to housing due to statutory homelessness. Social networks built in home-less community.
Social capital	Networks of social relations – associated with social skills	Decline in strength of positive social networks (friends, family, work colleagues). Increased negative social net-works (for example other roof-less or substance abusers).	Social networks used to delay rooflessness (for example sleep-ing on friends' floors). Inverse hierarchies (Chapter 7).
Educational	Ability to read and write, qualifications	People with learning problems, who left school early or with English as a second language, are dis-advantaged (for example in benefit system, housing app-lications, hostel rules).	Easier access to benefit system. Can assist others with access to benefits/housing. Perceived to be more deserving and respectable homeless.
Occupational	Accumulated work experience	Non-existent for those becoming roofless before age 16. Becomes more obsolete over time.	Makes rehabilitation easier. Increased employability (for ex-ample in daycentres or hostels, voluntary or paid). Some skills marketable on the streets.
Economic	Paid employment, benefits, inheritance, savings, etc	Younger they become homeless, the less accumulated capital available to delay or buffer rooflessness.	Can buffer or delay rooflessness. Increases symbolic and social capital. Begging, black market economy in street culture.
Symbolic	Self-worth, ontological security	Erosion can lead to self-destruction (for examle sub-stance abuse, self-harm). Low self-worth inhibits the use of social networks and the rehabilitation process.	Homeless culture values the inverse of mainstream society. Self-worth and confidence can be rebuilt by, for example, hostel staff.

Social Exclusion

Social exclusion, a European welfare or social policy theory rather than a sociological theory, was developed in France to explain and analyse poverty (e.g. Lenoir 1989), homelessness being the epitome of poverty and social exclusion. This is an important theory as it looks at society, and the impact of the interaction between structures and individuals and the ruptures in that interactive relationship that cause some people to become dislocated from society. It tends to be predominantly a retrospective theory, starting with the extreme end of exclusion and then looking at the processes involved that led to that exclusion. As a theory it sits most comfortably between a number of sociological theories, thus social exclusion can be used to interpret society in a number of different ways.

French theorists argue that poverty is multidimensional and part of a cumulative process of social exclusion rather than a static state (e.g. Paugam 1996; Rodgers et al. 1995); this led to research being dominated by continuums. Social exclusion became associated with social disintegration due to economic restructuring, rather than mere poverty (i.e. Rodgers et al. 1995). Thus the process of social exclusion is viewed as the marginalization and alienation of individuals from the structures within society and society itself. This perspective is open to two dangers: firstly, viewing homeless people as orchestrators of their own destiny and to blame for their situation. Alternatively, it can easily ignore individuals' autonomy and ability to direct their own lives, by becoming preoccupied with structures within society.

The retrospective nature of this theory is useful for identifying those at risk, but not for explaining why some of those at risk (e.g. of rooflessness) become roofless and others do not. Thus social exclusion is often mixed with other theoretical stances, in an attempt to extend its explanatory power.

1. Constructionist Social Exclusion

Constructionists build on social capital theory, adding an examination of the processes involved in the erosion of social capital. For example, the Italian theorists Tossi and Torri (2005) see homelessness as a social construct, constructed to explain one aspect of extreme poverty, a dual notion with a housing dimension and a social dimension. The two dimensions never converge but are viewed alongside each other. This is seen as the best way to comprehend the multidimensional nature of homelessness, why there is movement in and out of homelessness or up and down the scale of social exclusion. However, this view of social exclusion leads to the tendency to standardize and generalize, denying homelessness its heterogeneous nature (Soulet 1999).

This perspective leads to research methods that incorporate continuum definitions, homeless careers or pathways (e.g. EUROCITIES 2006; Rosengard 2002; Anderson and Tulloch 2000). The tendency to standardize and generalize brings a sense of order and predictability to the complex, multidimensional nature of homelessness, thereby creating understandable flow lines along the process. However, its weakness is that it tends to ignore the ebb and flow as people move forward and backwards

along the process of homelessness. It also ignores the impact of counterbalances co-existing alongside exclusionary factors, which can make the process appear static or even reverse it.

2. Structurationist Social Exclusion

British theorists (Hills et al. 2002; Burchardt et al. 1999; Room 1995) argue that social exclusion, rather than simply a poverty issue, is about individuals' ability to participate in society, the lack of social integration and lack of power within society. This shifts the emphasis towards structuration theory (see below), and the reflexive reaction and interaction within society of people and structures and the impact of these interactions. Thus, poverty becomes far more than a financial status. It is about quality of life. Social exclusion becomes relative to the society in which an individual lives and their ability to participate in that society in a way that is meaningful to them.

A structurationist perspective incorporates the possibility of looking at power in a Foucauldian sense (e.g. Foucault 1977).[12] Socially excluded people are not without power, but their power is seemingly dwarfed by the macro political and economic structures within society. They still have the power of choice, or at least an illusion of choice set within Foucault's panopticon-like structures within society. This suggests the possibility that, over time, individuals within society can begin to self-regulate their social exclusion and play an active part in preventing or accelerating their own exclusion. This is implied, but not explicitly stated, within existing literature (e.g. Barry's (2002) discussion of social solidarity, equity and justice, with individuals having choices to participate or abstain (also Le Grand 2003)). Exclusion becomes not just the prerogative of the poor, but the rich can also be excluded (either by choice or default), for example, gated communities, better-off individuals withdrawing from community activities in run-down estates (e.g. Richardson and Le Grand 2002).

3. Risk Society Social Exclusion

As social exclusion examines the processes that lead to individuals or groups of people being excluded from society, it is also in a position to look at risk and predictor factors of exclusion. In terms of homelessness, there is a strong argument to suggest that if people cannot understand when they are at risk of homelessness, are unable to access information that could prevent homelessness, this is exclusion. Restricted access to knowledge prevents people from being able to anticipate and 'insure against' homelessness and rooflessness.

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12 Foucault is not a structurationist, but his arguments about power explain this aspect of structuration.

Structuration

Structuration focuses on the individual's role within a larger structure, highlighting the duality of and interaction between structure and agency. Neither social structures nor individual independent actors can operate without the other existing (Giddens 1984). This is because whereas structures can make social action possible, social action or interaction actually creates those structures (Neale 1997). For Giddens, rather than society controlling individuals, it merely places limits or boundaries on the choices available to people. Thus even groups that are known to have limited choices (e.g. the socially excluded or homeless) still have the power and ability to resist; they do not have to behave in fixed patterns and ways. Thus structuration highlights a gap in homeless research. By inadvertently focusing on fixed patterns and fixed trajectories into homelessness, for example, there is no research into what happens to people who nearly became homeless but managed to avoid it. Structurationists would argue that researchers need to look at both those who did become homeless and those who avoided homelessness to get a balanced view of how agency (individual actions) and structure have worked together to produce the outcome (homeless or not homeless). Thus homelessness cannot be reduced to arguments that the homeless are entirely responsible for their own problems or victims of circumstances beyond their control, nor can it be reduced to either a housing problem or a welfare problem caused by either structural or individual factors. Thus for structurationists, simple binary oppositions are insufficient when researching the complex nature of society and human actions, reactions and interactions. Built onto the theory of structuration is the notion of risk and risk society (Beck 1992), a theory that looks at the interplay between structures and individual actions.

Risk Society

Beck (1992) proposes the theory that risk is multifaceted and impacts all levels of society from state to individual, each being inextricably linked and interdependent on each other. Here there is a sharp shift back towards individualism, with the individual responsible for anticipating and negotiating risks and therefore to blame if they fail to do so. To be able to participate fully and survive in a risk society, individuals need to develop a new set of life skills. They need to be able to anticipate and endure dangers, and 'deal with them biographically and politically' (Beck 1992). Individuals need to be aware of both politics and market forces on a global, national and local level. They need to be able to recognize, anticipate and cater for their own needs through work and self-provision of welfare protection (i.e. insurance). All this needs to be done despite the fact that risks are unstable, unpredictable commodities, and the once relied on welfare institutions have been destabilized by the nation state, withdrawing or restricting the safety net of welfare provision (Beck 1992; Croft 2001).

The shift towards individualism and personal provision of welfare protection has increased the reliance on the individual's capacity to understand the risk and take countering risks in order to survive. Those people least able to understand, anticipate

and/or prepare for the risks are those most vulnerable to debt, cycles of deprivation, social exclusion and homelessness. The cause and effect of many welfare problems (including homelessness) then becomes blurred as it is continually viewed in terms of individual action, biography and the wider market forces and influences from the nation state and international arena. Croft (2001) proposes that risk should be viewed as a process over time, to account for its reciprocal nature. She identifies three stages, all of which are important when thinking in terms of preventing homelessness.

1. Contingency: A 'pool' of latent risks that have the potential to have an impact, but remain uncertain. For example, many triggers of rooflessness are latent; they may never be activated but they remain risks that could result in rooflessness. These risks may be recognizable as possible future events and thus planned strategies can be formed to act as insurance to prevent them being activated (e.g. family mediation, debt counselling, savings).

2. Crystallization: An event causes the crystallization of potential risk into something substantive; this event may be on an individual or collective basis, chosen or imposed. For example, recession causes an individual's redundancy and a shortage of alternative employment opportunities. This diminishes their savings and the home is repossessed, they and/or their family become homeless. Individuals rarely act in isolation, so crystallization may have a domino effect (e.g. the stress of debt and repossession causes the partner to leave, taking the children). On a collective basis, crystallization may be caused by much broader events, for example, the impact of benefit level changes (Social Security Acts 1987 and 1989) to young people meant that a whole group of people vulnerable to homelessness became homeless.

3. Consequences: May be short term or long term, gain or loss, but must be viewed diachronically (over time). One consequence may be the implementation of strategic responses from individuals, groups, outside agencies (charities) or at state level. If several risk events arise simultaneously the effect is 'palimpsest', i.e. they negate each other's impact; this therefore may make the situation better or worse and may affect the strategies put in place. When applied to homelessness, this is important when considering prevention. Strategies can be put in place to counteract the known risks or triggers of homelessness, but events may subsequently take place that were not anticipated and thus dilute or negate the impact of such policies. Policies are often interdependent on the existence of other supporting policies and all are vulnerable to structural factors, for example housing availability, employment levels, welfare protection.

In addition to the diachronic process of risk at a structural level is the individual's reaction to their changing circumstances. There are very real dangers; the individual's capacity to assess and plan for risk can be undermined by knee-jerk reactions such as shock, disbelief or a lack of knowledge (Croft 2001). This can have a negative impact and may result in homelessness, for example:

'I never thought I would become homeless. I always managed to find work and accommodation together, I rented from the place I worked.' (Chris, male, aged 30; housed five months)

'Looking back, I never put my name down on the council waiting list, I don't know why, I think I probably didn't know about the list, or just thought it would be a lot of form filling and hassle. I don't know what I thought would happen, I think I thought something would just come out of the air really.' (Mark, male, aged 28; housed four years)

This incapacity to act, to pre-empt and plan for any and every eventuality, is a risk in itself. It may also contribute to other risk events, which, when combined with the original one, make a far more damaging impact. For example:

'My father died. I found him one morning on the floor. Contacted the doctor and ambulance but the hospital pronounced him dead on arrival. Soon after my mother died. The shock. The tenancy for the flat was in my mother's name. The landlord, when he found out, raised the rent; he trebled it. I couldn't afford to keep living there. I tried to fight the case, but I'd just lost my parents and couldn't sort everything out. I moved straight onto the streets.' (Frank, male, aged 53; bed and breakfast accommodation, long-term homeless)

Conclusion

In conclusion, no single theory adequately encapsulates the whole of the problem of homelessness. Different theories offer great insight into specific facets. For example, symbolic interactionism explains a lot about the homeless culture and the impact of homelessness on individuals' self-perceptions. Constructionism explains the evolution of social policies and public perceptions of the homeless. It provides a basis from which to examine the homeless industry. While structuration and risk society theory offer some insight into the importance of prevention, process and time and the reasons why some people, but not others, become homeless. This book uses a combination of existing social theories to examine the phenomenon of homelessness to try and gain a holistic viewpoint of the social problem, the individuals' problems and the impact of society's structures and market forces on both of these. The dominant theory used is structuration.

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Chapter 4

Homelessness: British Policy Overview

Homelessness, like poverty, has always existed in Britain.[1] All the major categories of people found on British streets today (e.g. alcoholics, single people, the mentally ill) have been present at least since medieval times (Cope 1990). The only real changes that have occurred during that time coincided with the elimination of leprosy in Britain around the fourteenth century, the diminution of rural migrants in the nineteenth century, the removal of orphans from the streets during the Victorian era and finally the end of the need for widows, the elderly, the very poor and families to live on the streets when the welfare state was introduced.

Welfare State

The welfare state is widely accepted as having been introduced between 1945 and 1948 through a series of statutes designed to provide a basic standard of living, education and healthcare in a climate of full employment (Glennerster 1995; Thane 1982). This legislation focused responsibility for the less well off in society firmly on central government via a system of taxation, insurance and wealth redistribution. In this way, it was intended that central government would put in place a 'safety net' of protection for all (Glennerster 1995). The Poor Law, predominantly run locally, provided for the very poor. However, this provision varied enormously in the type and the amount of relief and help that was offered. The system was deliberately designed to be punitive and demeaning, therefore receiving help or assistance was stigmatized. The welfare state aimed to remove the stigma of being poor and in need of relief, making provision for all on a needs basis, rather than the means basis used under the Poor Law.[2]

However, despite major changes within society and the ideology of its members, homelessness continued to exist. Surprisingly, whilst removing some groups of people from the street, other categories (e.g. single (especially) men, ex-prisoners, ex-servicemen, people from institutions, e.g. the mentally ill) were not affected by the introduction of the welfare state. Good intentions seemed to have gone awry. Many of the provisions that had fallen into disrepute under the Poor Law were removed once the welfare state was introduced (e.g. workhouses). However, it appears that in some cases the new social policy, no matter how well intentioned, effectively 'threw the baby out with the bath water'. The policy of standardizing and nationalizing many of the key providers (e.g. hospitals, secondary schools) meant that voluntary

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1   Slack (1990); Thompson (1990); Rose (1988); Crowther (1981); Archard (1979).
2   See Glennerster (1995) for a full discussion of the origins of the welfare state.

agencies and charities were sidelined almost to extinction in some services. Thus, instead of the welfare state working alongside other organizations, it either took them over, closed them down or marginalized them (e.g. Glennerster 1995). This effectively weakened that safety net of provisions and left major groups of people, who were traditionally vulnerable to homelessness, exposed and, in some cases, even more vulnerable.

A serious consideration of homelessness needs to look at the impact of the welfare state. This should include an examination of the development of the prevailing housing policy, employment and economic structures, benefits, marginalization, homeless legislation and homeless policy.

Housing Policy

The welfare state hit housing policy particularly hard and on several fronts. However, the full impact of the changes was not felt until the 1960s. The following briefly shows the evolution of housing policy.

Post-war, there was a shortage of housing for the poor. The introduction of local authority housing was seen as the best solution to this. It could be regulated and minimum standards set. Housing association and private-rented sector provisions were allowed to shrink considerably, making the local authority the main source of affordable accommodation. This was not a problem while full employment and major house-building programmes continued (see Power 1987, 1993).

From 1955 onwards slum clearance began in earnest. New towns were built. New council estates were built not only in city and town centres but on the outskirts too. The intention was to move the poor away from factory-polluted air, overcrowding and poor housing conditions to areas with clean air, good housing, open spaces and gardens (e.g. Burnett 1986). While this was a good Utopian idea at the time, the long-term effect was to move the poor away from the main sources of employment and, in some areas, good public transport links. Eventually this contributed to neighbourhoods and whole areas suffering from mass unemployment. The slum clearances often meant that extended families were separated. This eroded or destroyed the nuclear family's informal support, advice and babysitting provided by the extended family (e.g. Bott 1957; Young and Willmott 1957). Long term, this contributed to the isolation of family units, difficulties for women and lone parents in gaining employment and breakdown of the informal social work/counselling-type functions that extended families offered.

The nice, good-quality, low-cost accommodation provided by local authority meant that factory owners like William Lever (Port Sunlight), the Cadburys (Birmingham) and the Rowntrees (York) no longer saw the need to build their good-quality factory villages (e.g. Power 1993; Wagner 1987). The Government gradually became the only provider of cheap, affordable accommodation. The drive towards owner-occupation, perceived as the best or preferred form of tenure, contributed to the current legacy of shortages in private-rented accommodation. House prices, falling standards in accommodation and government interventions (e.g. owner-occupier exemption from capital gains taxes introduced in 1963 and 1965 (Power 1993))

fuelled a shift in ideology. The number of people wanting to rent fell, private-rented sector landlords found it more profitable to sell their properties. The reduction of this sector alone had a major impact on the availability of affordable accommodation for those falling outside statutory provisions for the homeless (especially single men).

With the introduction of the welfare state, the casual wards and spikes were closed (e.g. Crowther 1981). They traditionally provided cheap beds for the night in exchange for labour (similar to hostels created by William Booth in the 1880s (Booth 1970)). Simultaneously there began a gradual decline and eventually the death of digs and the landlady. Digs and landlady provision had developed during the nineteenth century as a source of accommodation for young men and people in short-term employment. It was felt that full employment reduced the need for migrant workers and therefore people could either buy or be housed by the local authority. No suitable alternatives were created. Thus when unemployment began to rise, single people, young people and seasonal or migrant workers found it difficult to find accommodation.

During the 1950s and 1960s immigration was actively encouraged to deal with shortages in the workforce. Ineligibility for council housing, backlogs in slum clearances and private landlords wanting to sell run-down, hard-to-let properties meant that migrant families pooled resources to buy properties. This renewed overcrowding problems and directly contributed to the current high concentrations of ethnic minorities within inner cities and neighbourhood domination by specific minority groups (e.g. Brick Lane, London).

Both local authority and private sector building historically concentrated on creating family accommodation. This policy, whilst making the best use of available land and increasing profitability (for construction companies), resulted in a shortage of one-person units. This policy contributes to the problems experienced by single and young people trying to avoid homelessness and those wanting to move on from hostels and resettlement programmes. Consequently it places ever-greater pressure on existing stock and the ability of the housing market in general to meet demand. It is this mismatch of provision that led to voluntary organizations campaigning for more housing, despite the fact that from the 1990s onwards there has been a surplus of housing in England and Wales.

The ideology of a dual housing system (owner-occupation versus social housing) meant that there was no longer a perceived need for working men or women's hostels. Many gradually closed down or became hostels for the homeless. Stigmatized as such, they were avoided by working people in need of temporary cheap accommodation. For example, until the early 1990s the YMCA remained one of the few organizations that provided working people's hostel accommodation. With the advent of the lucrative Rough Sleepers Initiative many of their hostels changed to Foyer-style accommodation.[3] The niche market for this accommodation became the homeless and care-leavers. This guaranteed full hostels, but ended easy access to cheap accommodation for workers.

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3   Accommodation tied to in-house life skills and employment-readiness courses.

Changes in the employment structure had an impact on housing. Many types of employers[4] provided accommodation with the job (e.g. apprenticeships and in-service placements). Now, most of these employers either do not exist or have reduced or ended the provision of accommodation with work as a general policy. This affects young single people the most, as no real alternatives have been developed.[5]

In the 1980s, the 'right to buy' reduced council stock by 25 per cent. The push for increased owner-occupation reduced the private-rented sector by 30 per cent (Wilkinson 1995a). This effectively limited the local authorities' ability to provide for the homeless by reducing available stock and use of alternatives. Simultaneously, sink estates developed over time, with strong concentrations of marginalized people housed under the housing or homelessness legislation. Vulnerable roofless people found it difficult to cope when housed in these estates, leading to further episodes of rooflessness. From 1989 onwards the emphasis on a free-market solution to housing problems increased. There was greater reliance on less secure forms of accommodation plus legal changes that involved the reduction of tenants' rights (Hutson and Clapham 1999). The assumption was that independent landlords, such as housing associations, would grow and become the main providers of low-cost housing.

With increased pressure on social housing, the voluntary sector and later the Government through the Rough Sleepers Initiative (RSI) tried to increase access to private-rented sector accommodation. Throughout the 1990s, a variety of rent deposit, rent in advance, accommodation registers and access schemes were developed to help homeless people gain access to accommodation. Whilst many were successful, they only helped those people with few or no other problems.

Government funding to housing associations – designed to stimulate the expansion of low-cost housing – actually limited access. Access to housing association (HA) and low-rent accommodation was predominantly via the local authority housing waiting list and homeless legislation. This effectively ended housing associations' independence and most direct access provision for those in housing need, impacting the single and young. In the 1990s, the sliding scale funding to HAs tapered and rents began to rise. Simultaneously, local authorities were encouraged to sell or transfer the management of their properties to registered social landlords (RSLs) or tenant management organizations (TMOs). All this effectively increased rents, restricted access and limited the powers of the local authority to house those to whom they had a legal duty to assist.

The two-year rule was introduced in the 1996 Housing Act. Local authorities only had a duty to temporarily house homeless households for up to two years. During this time applicants could wait for more permanent accommodation or find their own in the private sector. This resulted in an increased use of temporary private-rented sector and bed and breakfast (B&B) accommodation, which was often substandard. Containing families and single-person households in often cramped and substandard conditions did little to resolve homelessness. The lack of support,

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4   National Coal Board, National Railways, National Health Service nurses' accommodation and large department stores like John Lewis.

5   See Győri (2004) for similar impact in Hungary.

advice or resettlement help prolonged and exacerbated the problem. The fact that many were temporarily housed in one district and rehoused in another began to affect people's ability to 'settle' and form social networks. This left them vulnerable to repeat episodes of homelessness. Homeless households experienced the system as punitive:

> 'They say I have to be patient because I'm desperate. I'm now in a bed and breakfast at the moment. For 6 months.' (Halina, female, aged 32; B&B six months)

> 'Everyone says that they give you the worst accommodation first, then you go back and complain and they find you something better.'(Ashwani, male, aged 23; hostel two years)

Throughout the 1990s, the increased influx of refugees and asylum-seekers and delays in processing their applications led to pressure on accommodation, especially in Kent and the South-East. Asylum-seekers could apply for accommodation under the homeless legislation and receive housing and other benefits, forcing the increased use of B&B or substandard private-rented accommodation by local authorities. In 1999, the Immigration and Asylum Act attempted to reduce asylum-seeker applications. The Act stopped access to housing through the homeless persons' legislation and ended housing benefit entitlement. The Government set up NASS (National Asylum Support Services) to take over arranging emergency accommodation. They aimed to disperse applicants into longer-term temporary accommodation throughout the UK. However, NASS began to accommodate those being processed in B&B or private-rented accommodation. This effectively reduced the number of low-rent properties available for local authorities to use. There was evidence that B&B hostels in London and the South-East closed and evicted homeless local authority tenants, reopening almost immediately as NASS hostels. Landlords were paid more for accommodating asylum-seekers than homeless people. Statistics for homeless applicants and asylum-seeker applicants were counted separately. Asylum-seeker statistics were difficult to obtain, making it difficult to determine the number of properties used for asylum-seekers in any one local area. This meant that local authorities and NASS competed to place tenants in the same properties. Furthermore, competition for properties in London and the South-East (especially coastal regions in Kent), forced the rents higher and even further out of the reach of single people, the young and those leaving institutions (e.g. prison, armed forces). Once asylum was granted, applicants had the same rights as other British citizens. A significant percentage of those granted citizenship applied for accommodation through the housing waiting list or homeless legislation (Ravenhill 2000b).

From the mid-1990s onwards, with house prices soaring and less negative equity, pressure began to increase on housing supply. Gentrification of inner-city areas increased dramatically. Second-home ownership began to rise in coastal and rural beauty spots, forcing prices higher for locals and tying up much needed accommodation. As London and the South-East increasingly became the main business area in England, migration continued to increase. The increased pace of globalization, migration of white workers (e.g. American, Australasian, South African) and invited immigration (teachers, nurses), plus asylum-seekers, increased

pressure on housing in the region. Prices soared and so did rooflessness, hidden homelessness, family homelessness and the numbers of people homeless at home.

Hot-spots of homelessness were apparent in areas with pressure on low-cost rental housing. Diagram 4.1 shows the way homelessness and pressure on housing coincides with the existence of universities (or high student populations), airports, prisons (leavers), high percentages of seasonal workers, tourist areas and areas with high numbers of asylum-seekers (Matthewman and Read 2002). This, coupled with the existence of good homeless projects that effectively draw people in from areas with little or no provision, creates hot-spots with a high percentage of homeless people compared with the general population.

Furthermore, affluent workers moved into an ever-widening commuter belt, creating a ricochet-down effect of house price and rent rises that affected those on the lowest income and on the margins of society. Better-quality rental properties were priced to attract commuters and exclude those on low incomes or benefits (including the homeless). Delays in housing benefit payments deterred potential landlords who required regular payment in advance, rather than up to three months in arrears.

By the end of the 1990s, house prices began to soar again. Mortgage interest rates remained at an all-time low. There were calls to slow the boom by raising interest rates. However, with the economy teetering on the brink of a slump, the Bank of England was reluctant to increase them. Simultaneously, world events caused a dramatic drop in stock market values, making property once again a safer place to invest. Buy-to-let mortgages became fashionable, causing more people to own a second property (see Craine and Mason 2006). However, the increase in rental properties available coupled with low interest rates and therefore more tenants wanting to become owner-occupiers meant that rents began to fall, thereby threatening some people's investments. Properties in disrepair, normally on the market at a reduced rate, began to fetch ever higher prices. Unscrupulous landlords with properties in disrepair or not up to market standards (especially big houses, old hotels or ex-children's/OAPs' homes) leased them via the local authority to people from the housing waiting list. This practice guaranteed an income when the property was unoccupied and removed the need to keep the décor and furnishings up to high standards. It also meant that local authorities, desperate for accommodation to enable them to exercise their duty to find housing (especially in London), were forced to pay high rents for substandard and overcrowded accommodation. Discussions with local statutory and voluntary sector organizations in the London Borough of Camden showed that this practice was common. Top rates of housing benefit were paid to owners of damp, dirty, poorly maintained properties that offered nothing other than a single room and dirty shared bathroom and kitchen facilities. Furthermore, high market rents were charged by some hostels that offered nothing other than accommodation to homeless people (no resettlement help, no help filling in forms, etc.). This practice appeared widespread and local authorities had few alternatives.

PRESSURE

University	Hospitals	Airports	Prisons	Homeless Projects

Pressures on housing →

Students		Staff		Leavers

Tourists	
Hostels/ Bed and Breakfast	Tourist sites/ attractions

Seasonal workers	

Cheap affordable housing	Large old housing

Available housing →

Private rented sector	Housing association/ other RSL accommodation	Hostels	Temporary accommodation	Bed and Breakfast accommodation

Demand for housing →

Low-income households	People on housing waiting list	Precariously housed	Young People	Asylum seekers

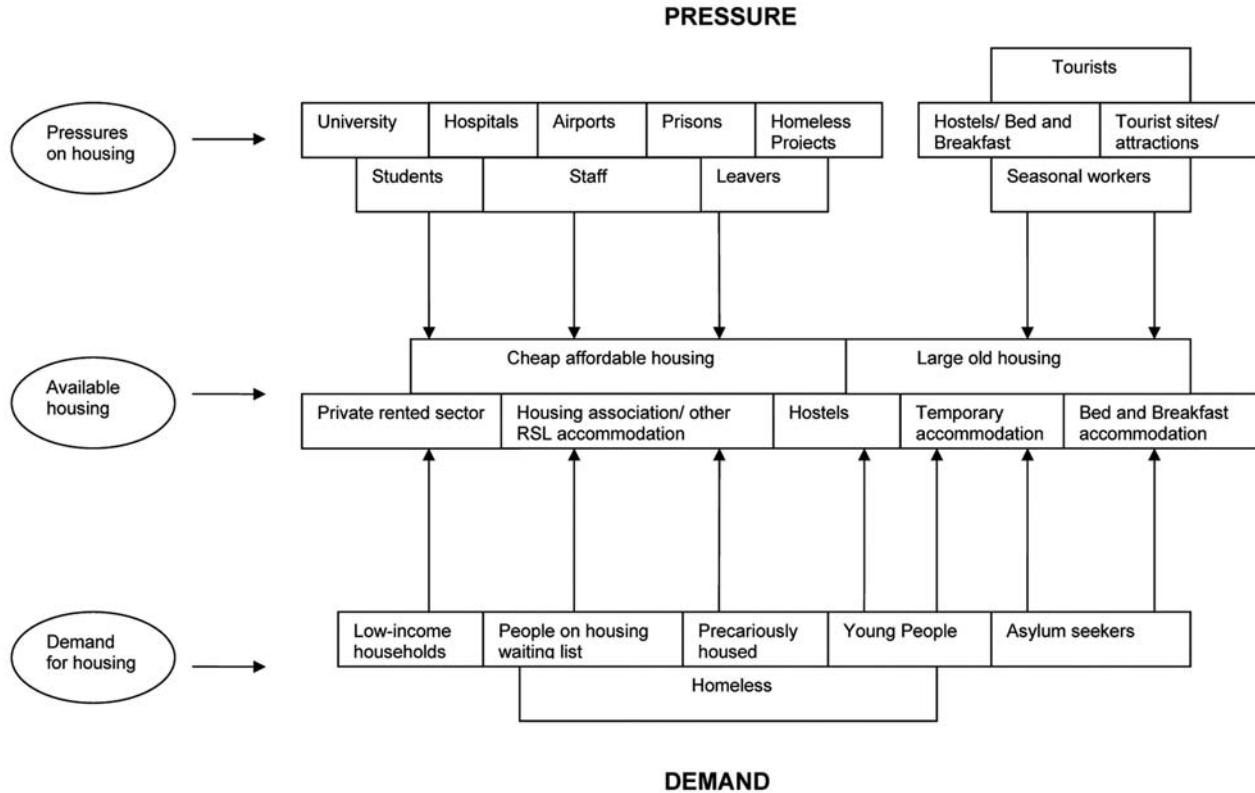| Homeless		

DEMAND

Diagram 4.1 Building bricks of pressure and demand on affordable housing in hotspot areas

Local authorities also temporarily housed people from the homeless waiting lists in private sector housing (especially families). This often meant short-hold tenancies ended before people were housed in more stable housing, resulting in homeless people being moved several times before receiving a secure tenancy. This created extra stress and anxiety for vulnerable people and kept them precariously housed and vulnerable to homelessness (and rooflessness) for a considerable time.

By 2000, rising house prices and gentrification of many inner cities and large towns meant that low-paid workers were pushed out. Recognizing a crisis and the serious threat to basic infrastructures that were dependent on low-paid workers (nurses, police, fireman, teachers), the Government shifted housing policy towards tackling this problem via the Starter Home Initiative (DETR 2000) and Key Worker Living Programme (Battye et al. 2006). This policy included the building of new affordable housing and cash towards house purchases for eligible candidates. No stipulation was placed on affordability, so prices remained high. Demand soon outstripped supply for cash towards house purchases. Simultaneously, to resolve London's crisis in nursing and education, it was decided to invite the immigration of qualified foreign teachers and nurses to the area. Pressure on low-cost housing increased.

With the high cost of accommodation and rents in London, a new form of hidden homelessness was identified – white-collar nomads (Clark 2002). Young people on high salaries (£27,000+ p.a.) could not afford to buy or rent near work. Ineligible for social housing or hostels, they were forced to stay with relatives and friends, often 'sofa surfing' or house-sitting for considerable periods of time. Although this group were unlikely to become homeless, this is a stressful lifestyle and unsustainable for long periods.

Housing policy shifted towards neighbourhood renewal and sustainable communities (SEU 2001b; DEFRA 2006). Consistently, research had shown that problems in poor areas were about access to good education, health and other services plus safe environments to live in (Tunstall and Coulter 2006; Lupton 2003; Glennerster et al. 1999). Poor areas were more likely to generate overcrowding and hidden homelessness, which may result in future rooflessness. It was recognized that such problems were caused by a combination of previous housing policies and sharp deindustrialization (Power and Houghton 2007), followed by the exportation of low-skilled, low-paid jobs to developing countries. This left whole areas ghettoized, cut off from mainstream society, and prone to becoming hotbeds for crime and disorder. The Government set up its National Strategy for Neighbourhood Renewal (SEU 2001b) in an attempt to turn around run-down areas. Although this has begun, sustainability is difficult to determine (Tunstall and Coulter 2006).

Although housing policy had temporarily reduced homelessness by the 1960s, it never really tackled it. The knock-on effect of interconnected policies over time has been a legacy of shortages of suitable accommodation in the right areas, soaring house prices, exorbitant rents in some areas and inner-city problems. Housing policy does not act in isolation. It is closely entwined with wider economic structural changes that can negate the expected benefits from policies.

European Housing Policy[6]

A common housing policy would be difficult without stable monetary union. Thus, there is no common European policy. It is also not practical or possible to merge all the existing different national housing policies and benefits or subsidy systems. In Britain, national economic factors inhibit common housing policy, including the high proportion of variable rate mortgages, variable rates of debt, equity withdrawal[7] and its opposite, negative equity, and the general volatility of the British economy. In 2002, the Lisbon Strategy attempted to build a European social model with an active welfare state to combat social exclusion;[8] this included access to housing and shelter. However, four years on the Kok Report[9] noted the lack of political will resulting in poor delivery of the strategy.

Since the mid-1990s, the role of nation states within Europe has changed markedly in terms of housing and homeless policy (e.g. Doherty et al. 2004). The rate and degree of change varies nationally and is dependent on traditional national institutions and welfare regimes. The overall trend of restructuring has been towards market control with deregulation, privatization, public/private partnerships and individualism (Doherty et al. 2004). Across Europe traditional social housing provision (which alleviated problems of housing affordability and protected against homelessness) has been curtailed in a climate of increasing commodification of housing, reductions in state expenditure and restrictions in provision and governmental support for social housing. This has been compounded by increased commercialization of organizations such as housing associations and housing companies. The economic climate and market-oriented approach forces such organizations to adopt financial risk-avoidance strategies, which effectively restrict access and increase the potential for eviction and homelessness.[10]

Economic Structure

Throughout the 1980s there was a boom in the economy and house prices accelerated rapidly. Many people, brought up on the ideology that the only sure investment is in property, bought houses requiring mortgage repayments that stretched them to the limit. In the 1990s the economy stalled, house prices plummeted and interest rates rose. This caused a brand new phenomenon, 'negative equity', where the value of a property was less than the amount the owner paid for it. The combined effect forced many households to struggle to keep up mortgage repayments. Homes were repossessed. The resulting stress triggered some family breakdowns, which in turn contributed to male homelessness.

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6   For fuller discussions see Doling (2006); Doherty et al. (2004); Edgar et al. (2002); Lisbon strategy http://www.europarl.europa.eu/summits/lis1_en.htm.

7   Taking positive equity from owned homes.

8   This involved coherent strategic direction and effective monitoring of progress.

9   http://www.euractiv.com/en/agenda2004/lisbon-agenda/article-117510.

10   See Doherty et al. (2004); www.feantsa.org.

A spokesperson from the Camden Law Centre noted that, ten years on, these people were only just beginning to rejoin the housing market and recover financially. However, the banks and debt agencies that repossessed their homes and sold them at substantial losses were now coming back to demand repayment of the shortfall, thus throwing their lives into turmoil and uncertainty again and threatening their ability to sustain their new mortgage repayments.

The housing market recovered by the end of the 1990s and was beginning to soar again. Changes in the pension system, stimulation of the rental sector and media-stimulated renovation for profit (TV property programmes) increased the number of people who bought to let. By 2006, more new homes were being sold to individuals with buy-to-let mortgages (40 per cent) than to owner-occupiers (30 per cent) in areas like London (Craine and Mason 2006). Huge city bonuses, migration of high-salaried staff and corporations buying properties to house temporary foreign business consultants forced prices at the top end of the housing market higher. It also increased the number of people buying second homes to rent in popular, expensive areas.

Simultaneously, changes in education policy meant that parents increasingly moved into 'good' school catchment areas, causing house prices to rise in those areas. Economic migrants settling in England bought into the property market, selling up and returning to their country of origin after a number of years. Existing tax laws and monetary policy meant that profit from housing was easily exported when people left, encouraging foreign nationals to invest in property in England whilst working here. All of this caused the house prices to continue to rise, despite a series of interest rate rises in 2006. High prices began to force more first-time buyers out of the market, threatening the sustainability of price rises and forcing more people to rent.

The Bank of England was responsible for controlling inflation through its monetary policy.[11] This included influencing house prices. There was a fine balance between keeping interest rates low enough to prevent the economy from stalling and encouraging growth, whilst preventing the housing market from overheating by curbing excessive house price rises. By 2006 interest rates began to rise again.

The cost of transport (public transport and petrol prices) increased. More people began living nearer to work in cities, forcing inner-city house prices higher, especially in London. Meanwhile, there was an exodus (especially families) from cities, fuelled by an increase in home-working and people selling city homes (especially in London) to buy larger properties and land in cheaper parts of the country. Second homes became more fashionable; one for the family or weekends and a smaller place in the city.

There was also a shift in ideology as first-time buyers and newly divorced people were no longer satisfied with one-bedroom houses or flats, preferring instead to buy two- or three-bedroom places. This added further pressure, removing cheap housing from the rental market. Simultaneously house prices throughout England and Wales

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11 A new policy brought in in 1997.

rose dramatically. From 2004–05 repossessions began to rise. Financial pressures again left people vulnerable to negative equity, family breakdown and the possibility of homelessness.

Employment Structure

Since the inception of the welfare state there have been major changes in the employment structure. Between 1979 and 1990 employment fell dramatically for men of all ages; this is an ongoing trend (Campbell 1999). Massive unemployment put a strain on the welfare state as more and more people depended on the benefit system. Areas of mass unemployment gradually developed from the 1970s onwards, mainly concentrated in inner cities and council estates. This was not merely a British problem. America identified work-poor areas (areas with no employment opportunities and high unemployment) with similar problems (Wilson 1997). Employers had either moved out of these areas or were never there in the first place, causing virtually ghettoized communities of people dependent on welfare benefits. In Britain, Power and Tunstall (1995) identified joblessness as a chronic problem in polarized and marginalized council estates. Male unemployment, especially among young men, was a central cause of riots and violent disturbances in urban areas. Male unemployment was also linked to family and relationship breakdown (Kiernan and Mueller 1998), which in turn is associated with male homelessness.

The disappearance of work mattered, because work is not merely a source of income but a key source of status. An individual or a whole community can lose self-respect and, with it, 'the capacity to plan, to organise time and to get things done' (Mulgan 1998). However, the problem was not simply the disappearance of work, but a change in the economic structure (Kleinman 1998). The mismatch between the skills required by the labour market and increased demand for specialist skills meant that the labour force now needed to be educated to NVQ level 3 or higher. The demand for workers attracted commuters from all over the South-East plus foreign workers, but failed to draw on the pool of unemployed people in, for example, inner London areas (Kleinman 1998). This exacerbated unemployment on council estates. This increase in unemployment and change in the employment structure highlights the way some of the 'underpins' of the welfare state came adrift (Illustration 4.1). Unemployment, to a large extent, was an unforeseen problem as the intention was to achieve full employment.
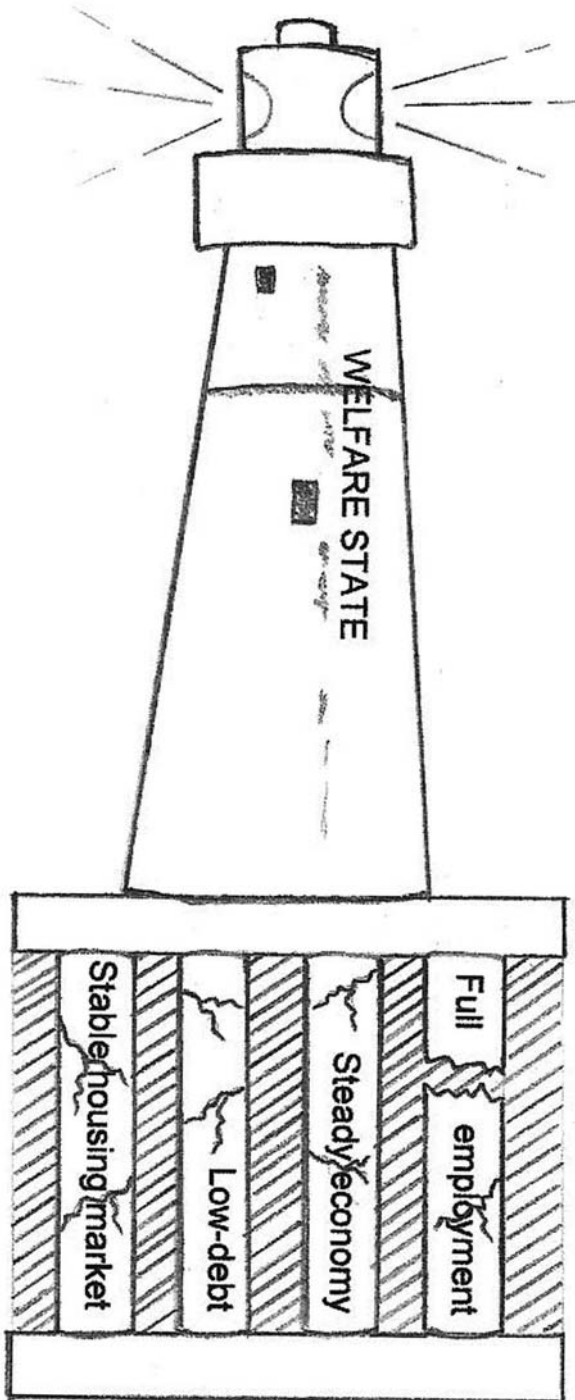
Illustration 4.1 The underpins of the welfare state

There are other employment structure factors to be considered. In themselves these may not be direct causes of homelessness. However, employment remains an integral part of the way people avoid homelessness and a strategy for exiting homelessness as well as a source of self-identity and self-worth. These factors must be considered as part of the wider debate about how the welfare state has affected homelessness.

For example, the massive reduction in low-skilled manual work over the last few decades was epitomized by the virtual closure of the mining and steel industries, the closure of many docks, and the sharp decline in the manufacturing, farming and fishing industries. This reduced employment opportunities for those people with few or no qualifications and young people just starting in the labour market. Between 1951 and 1981 this caused massive regional changes in the employment structure; 45 per cent of inner-city jobs disappeared (Mulgan 1998). The decline continued as the economy changed from one based on manufacturing and production to one based on the service sector and jobs that required specialist knowledge. The service sector is traditionally a strong female employer. Throughout the 1980s and early 1990s part-time employment increased dramatically, again traditionally female employment. Thus, there was an increase in the number of women in the labour market, while male employment and employment opportunities continued to decrease. This increase in part-time work rewarded two-income households but created problems for men, young people, single people and lone parents. Concurrently, there was a shift from reasonably long-term job security to insecure/unstable employment and shorter fixed-term contracts. This left many people vulnerable to periods of unemployment. Coupled with negative equity and a plummeting housing market in the early 1990s, this increased the vulnerability of single males to homelessness.

The welfare state was conceived when the dominant form of household was two parents, one breadwinner and the breadwinner was male. The increased cost of living meant that many households now needed two wage-earners to survive. However, in the past 50 years the family structure has changed considerably, with lone-parent households becoming far more common. Unemployed females head the majority. New lone-parent households in owner-occupied or private-rented sector accommodation became vulnerable to homelessness, especially when the head of household was unemployed.

Furthermore, post-war full employment created more job opportunities for teenagers. This changed people's attitudes and expectations of young people. From the 1960s onwards, when the emerging youth culture began to develop, the number of young people wanting to leave home, find partners and start families early increased. The number of households or potential households increased. By the 1980s and 1990s, British ideology had changed. Parents no longer expected their children to remain with them until their early twenties. Young people felt they had a right to their own accommodation. These changes in household formation added extra pressure to the housing market. It also contributed to increases in homelessness and rooflessness. The shift in youth culture and parental attitudes and expectations combined with the increasing number of one-parent families coincided with parents progressively beginning to throw out or ask their children to leave the family home because they were no longer willing or able to accommodate them. With the introduction of the Social Security Acts of 1987 and 1989, young people with no home, insecure or low-

paid employment and no or reduced benefits faced access problems to all forms of housing. Homelessness among this group increased.

There was a lag in expectations; some parents assumed that the welfare state would still accommodate their young people, and therefore made them homeless. These young people often ended up in hostels that were unsuitable for their age group or on the streets. It took at least a decade before parents began to realize this.

The changes in the employment, family structure and teen culture created huge problems for single people (especially men) and young people. Traditionally they were classed as the non-deserving poor. In theory they were fit and able to gain employment and work themselves out of poverty. There were no concessions made in the various pieces of legislation that affected homeless people to compensate for the massive changes in the employment and family structure.

Dependency Culture

The welfare state was designed to provide for everyone and to create a safety net for the deserving poor[12] and those who became temporarily unemployed or ill and could not work. Benefits were meted out on the basis that you paid into the system through taxes and National Insurance contributions, so that when you needed support the benefits system would ensure that you were looked after. However, by the time a couple of generations had passed and unemployment began to rise, increasing numbers of people became dependent on the State. By the 1980s a 'culture of dependency' was identified. This always remained a highly contentious issue, but the perception seems to have developed through the US debate on the underclass (Wilson 1987; Jencks and Peterson 1990; Smith 1992). Loosely defined, 'dependency culture' refers to the permanently unemployed who start families having never worked. They are dependent on the State for housing and other benefit payments. Children living on some estates had parent(s) and, in some cases, grandparents who had never worked or were unemployed for most of their working lives:

> 'Something of the estate life is built into them, they have no desire or inclination to change their lifestyles and do better. It's a trap. Many young people are brought up to believe that the Wednesday dole cheque is like their wages. Instead of collecting their wages they collect their social. The kids expect the system, the government, to sort everything out for them. If they have a housing problem then the social should take care of it. If they have any other problems then the social should take care of them. They are kind of institutionalized into receiving benefits. Even though they don't live in an institution and have never lived in an institution, they are still institutionalized into a way of life.' (Roy, male, aged 38; hostel)

People become children of the welfare state, growing up expecting that the State will provide; this is a form of institutionalization. It suggests that intergenerational poverty or dependency on the State exists, with some people growing up without a role model that goes out to work (Hobcraft 1998; Brown and Madge 1982). It was

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12 The elderly, disabled, widowed or orphaned.

no longer within the remit of their culture to work for a living. Research into income trajectories showed that few people in the poorest tenth of the population escape poverty over time (Atkinson and Hills 1998; Jarvis and Jenkins 1997). Many of those living in local authority or housing association accommodation are amongst the poorest fifth of society. The 'poverty trap' was identified. People were trapped, unable to take employment when they wanted it, because they could not find work with wages high enough to compensate for the loss of benefits.

The Social Security Acts of 1987 and 1989 attempted to address young people's dependence on the State for income and accommodation outside the parental home. The Acts abolished benefits to 16–17-year-olds and introduced reduced benefits (including housing benefit) to 18–25-year-olds, the intention being to force young people to stay in the parental home and education for longer and to take part in youth training schemes. The legislation was passed despite charities like Centrepoint predicting a rise in youth homelessness. However, families were no longer prepared to accommodate their teenagers, with all their trials and tribulations, until they were in their twenties (Coles 1995; Finch and Mason 1993).

With the introduction of the Children Act 1989 and the NHS and Community Care Act 1990, attention turned to homelessness amongst care-leavers. Care-leavers were dependent on the State because the State acted as their legal guardian. Provisions under these two acts did not fit comfortably together and left care-leavers vulnerable to homelessness. The State was accused of being a bad parent, for not taking responsibility for ensuring their dependants had the means and ability to become independent, and for not making plans for their future accommodation needs (Coles 1995; Broad 1994). Care-leavers were increasingly placed directly into facilities for the homeless (18 per cent of Foyer projects' clients were care-leavers (Maginn et al. 2000)). Although this prevented more care-leavers from becoming roofless, it also resulted in care-leavers being classified and stigmatized as homeless. This caused even greater pressure on an already short supply of beds for homeless people. Dependency shifted from the State to the voluntary sector.

At the end of the 1990s, there was growing discontent with the legislation and social services' response to care-leavers. Concurrently, there was a series of public scandals over children's experiences in care. The Government commissioned a number of initiatives and research projects, the aim being to overhaul social services in general and tackle the problem of care-leaver outcomes.[13] The Children (Leaving Care) (England) Act 2000 and the *Care Leaving Strategies* handbook (DTLR 2002) set out to ensure that in future care-leavers had comprehensive personal pathway plans that mapped out a clear route to independence. These plans included adequate financial support, access to accommodation, employment, training and further education.

Responsibility shifted back to the Government, but dependency was shared between Government and the voluntary sector, this time with the aim of ensuring future care-leavers had the means and ability to become independent. However, in

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13 Including 'Quality Protects Initiative' (www.doh.gov.uk/qualityprotects), 'Leaving Care: A Time for Change' (DTLR 2000b), 'Working Together to Safeguard Children' (DOH 1999a), 'Me, Survive, Out There?' (DOH 1999b).

an attempt to save money and avoid the burden of responsibility, older young people are finding it increasingly difficult to be picked up by or kept within the care system (Smith and Ravenhill 2007). Many become homeless or roofless as a result.

In an attempt to further dismantle the dependency culture, the Government shifted the focus of welfare benefits away from unemployment and onto work-related benefits (i.e. benefits received through the wage packet, effectively penalizing the jobless homeless). In 1998 the New Deal was launched. The aim was to create a get-up-and-go society of people in work, transforming the passive social security system into an active welfare state that helped people into jobs (DWP 2001). A series of programmes were set up aimed at young people aged 18–24, the 25-plus, 50-plus, lone parents and disabled people. The offer of training and work experience together attempted to redress the balance between the skills people had and those required by the labour market.[14]

The New Deal was not equipped with the ability to tackle homelessness alongside unemployment. The Rough Sleepers Unit recognized the need for 'meaningful occupation' and employment for the homeless. However, they disregarded the New Deal in favour of voluntary-sector-led employment schemes (e.g. DTLR 2001a), making homeless people dependent on the voluntary sector and inadvertently creating a voluntary sector monopoly of homeless issues. The New Deal helped short- and intermediate-term rough sleepers on Job Seeker's Allowance (JSA), but only when it was part of a broader resettlement programme that catered for housing needs too (Employment Service 2000). The New Deal had little impact on the entrenched roofless and those under 18. There was little evidence of any real impact on homelessness and the movement of people from dependency to work-related benefits.

Although 'dependency culture' is a term coined to refer to individuals dependent on the State, another more draining dependant should not be overlooked and ignored. In an attempt to stimulate voluntary sector provision through initiatives offering tapering funding to voluntary sector organizations, the Government inadvertently caused many organizations to become dependent on direct and indirect government funding for their survival (e.g. charities, housing associations). Organizations metamorphosized with every new funding initiative to ensure their survival; this often meant a bewildering (for clients) shift in objectives and clientele.

Social Exclusion

With increased links with Europe, a new concept entered the British welfare policy scene in the late 1990s: social exclusion. Groups of people are perceived as excluded from full participation in society, through a mixture of structural, welfare, area-based and personal factors (e.g. addictive behaviour). Social exclusion is not merely a welfare problem; however, the welfare state is inextricably linked with social exclusion through, for example, educational achievement, standards of health, access to employment, housing and finance. Social exclusion is rarely about any one factor

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14 For further information see DWP (2001); O'Donnell (2001); Millar (2000).

operating in isolation; most factors are interlinked and therefore mutually reinforcing (SEU 2001c). Area-based social exclusion was linked to access to community life, and the life chances of groups of individuals.[15] Roofless people were seen as some of the most socially excluded in society, homelessness being one symptom of social exclusion. Roofless people often had multiple problems that together resulted in their exclusion.

Social exclusion diverted attention away from the notion of dependency culture and the stereotypes of lazy, idle people that were reminiscent of the Poor Law. Instead, attention was focused on structures, area-based dynamics and their impact on individuals and their ability to operate within those parameters and move in and out of social exclusion. The welfare state, though originally designed to make society more equal and to prevent people from being excluded from society, inadvertently created social exclusion for a number of its recipients. Policies had effectively marginalized people through housing, housing areas, standards of education and ability to achieve and maintain good health.

The Government's shift in thinking, away from centrally funded welfare towards a mixture of public-private provision had been gathering pace throughout the 1990s. By the beginning of this century, the Government saw its role in tackling social exclusion as predominantly stimulating the private and voluntary sectors to increase and diversify their provision. It was envisaged that access to welfare provisions would no longer be a form of social exclusion. Attempts were made to ensure that the welfare state, through public and private provision, was actually a source of social inclusion, enabling people to fully participate in society, through Connexions[16] and the Supporting People Programmes.[17] However, it takes time for new regimes to embed, gain trust and respect and for social measures to become visible. Success or failure can rarely be measured within one legislative period (e.g. EUROCITIES 2006).

Homelessness Policy

It was assumed, when the welfare state began, that homelessness would become a thing of the past. Full employment, municipal housing, a basic income safety net, access to adequate healthcare and education would act to prevent homelessness. The

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15 Lupton 2003; Mumford and Power 2003; SEU 2001b, 1998b.

16 A multi-agency approach aimed at 13–19-year-olds and administered primarily through the education system. Despite intentions to ensure advisers understood and could assist homeless young people, Connexions' quality of service varied regionally and this is largely dependent on how and where they are able to work (Smith and Ravenhill 2007).

17 An initiative through which vulnerable people (e.g. the elderly, homeless, ex-offenders) are offered housing-related services. These are designed to add to existing services, enabling them to live in the community and sustain their tenancy. The level of support varies according to need (ODPM 2004a). However, as budgets began to be cut and squeezed, Local Authorities were left with harsh choices concerning who could be provide for. This meant preventative and intervention services were often cut in favour of reactive services that dealt with those in extreme need.

majority of homeless people would become self-financing and the few that remained uncatered for could be sent to the rehabilitation centres that were set up under the National Assistance Act 1948 to teach unemployed people the 'work ethic'. However, homelessness did not end.

By the 1960s a series of events instigated a growing need for new legislation specifically dealing with homelessness. They included: the *Cathy Come Home* film (1966); launch of Shelter's campaign (1966); squatter movement (1960s and 1970s); Dennis Nilson murders (1970s) and the *Johnny Go Home* film (1975). As a result of media-driven public outcry against homelessness, legislation was rushed through Parliament in the form of the Housing (Homeless Person) Act 1977. This was the first piece of legislation specifically dealing with homelessness. However, unlike in education and health, no one single piece of legislation dealt with the whole of the problem of homelessness. Instead, provision and entitlements were scattered through a number of statutes. Thirty years on, the situation is still the same.

Under the 1977 Act, the welfare state became statutorily responsible for providing accommodation for those people defined as 'statutorily' homeless (families, those vulnerable by age, physical disability or mental health/handicap). This created a safety net of provision; by giving priority access to council housing it ensured that the elderly and families no longer needed to be homeless, and that families were no longer split and children taken into care because of homelessness. Thus the welfare state successfully managed to remove several groups of people from homelessness. Excluded from these provisions were single people, who were not seen as vulnerable or in priority need. It was still assumed that this group could work their way out of poverty (and homelessness), or that they should remain in the parental home until they could support themselves. This was despite changes in family structures, the recession at that time and changes in the economic structure, which affected the availability of jobs for all. The thinking stemmed from two historical viewpoints: that those capable of working but refusing to do so did not deserve help; and it was people's personal failings and inadequacies that caused homelessness, therefore it was their personal responsibility to change.

The 1977 legislation, over time, set up a new set of problems around fast-track systems into housing and priority need categories. Five main problems emerged (Table 4.1):

Table 4.1 Problems emerging from the legislation – Part 1

	Problem	Explanation
1	Fast track into housing	People (including families) in precarious forms of housing or poor housing conditions found it easier to declare themselves homeless rather than wait for years on local authority waiting lists before being rehoused. This artificially inflated the statutory homeless figures. Homelessness became a means for getting a fast track into council housing.
2	Intentionality	To combat the fast track, and suppress demand, a set of hurdles were created through which local authorities had to take applicants before they could be accepted as homeless. Local authorities had to investigate and establish that people were 'homeless' and in 'priority need' (including vulnerable), plus their 'intentionality' and 'local connection' before a legal duty to accommodate/assist could be established. These hoops and hurdles eventually collapsed, creating a legal nightmare for local authorities and the Government.
3	Penalised for following rules	An unfair system was created. People abiding by the rules and staying in often unsuitable accommodation, appeared to be penalised. They were denied access to or had to wait years for local authority accommodation, despite having equal need for housing.
4	Invention of problems	To stand a chance of getting housed, some people had to have problems or gain problems that ensured that they fitted into the vulnerability and priority need categories.* Young people and single adults had to lie to get housed, adopting labels (for example mentally ill) and learning to act in ways that proved they deserved housing because of vulnerability. Normally, people would avoid such labels. Furthermore, the stigma of being labelled with a 'problem' meant that other people, in priority need, did not come forward.
5	Unrecorded homelessness	People assumed that because they were single adults, they had no entitlement to help or accommodation; they knew that the legislation existed but did not fully understand it. Therefore they never applied under the homeless legislation for housing, nor did they register on council waiting lists before they became roofless or while they lived in hostel accommodation. They were not recorded in official statistics. Unable to gain access to affordable housing, they were stuck in hostels or cycles of episodic homelessness.

Note: * These had to be acceptable problems, for example mental illness, rather than unacceptable ones such as substance abuse (Carlen 1994).

Although amendments to the legislation were incorporated into the Housing Act 1985, part III, little was done to resolve these problems at this stage. In fact, a further problem was added when the Government began to close the large mental hospitals (Table 4.2):

Table 4.2 Problems emerging from the legislation – Part 2

	Problem	Explanation
6	Ex-patients not catered for	Hospitals closed without setting in place adequate provisions for community care. This meant that some long-term patients found, on discharge, they could not cope with the transition. They became vulnerable to rooflessness. The reduction in the number of hospitals put pressure on existing bed spaces. This made it more difficult for people who became mentally ill to find a safe place to stay while they recovered. Once roofless, these people were not easy to help within the traditional hostel system. Very little had changed for this group.

The Children Act 1989, in relation to homelessness, created a framework for providing a good-quality service to care-leavers in an attempt to stop them from becoming homeless. Homeless young people under the age of 21 were to be recognized as vulnerable and in need of help with finding accommodation. By the end of the 1990s, the Government recognized that the legislation was not having sufficient impact on care-leavers' future homelessness; the Children (Leaving Care) (England) Act 2000 was introduced.

The NHS and Community Care Act 1990 had little impact for the homeless. It placed a duty to assess and identify care needs and to plan for and purchase services that met those needs. This only affected homeless people who were mentally ill, care-leavers (to some extent) and women at risk of domestic violence. However, the complex procedures involved in applying, filling out paperwork and attending interviews meant that many vulnerable homeless people gave up on their application or defaulted (by not attending the interview) long before the investigation into their case was completed. This added two more problems to the list (Table 4.3):

Table 4.3 Problems emerging from the legislation – Part 3

	Problem	Explanation
7	An export industry developed	As discussed in Chapter 2, local authorities, whilst exercising their duty to house the vulnerable, used out-of-borough facilities. In some respects this was good. A minority needed to be housed away from the area and people they knew, giving them a chance to make a fresh start. However, it meant that local authorities could save money by reducing the number of people requiring long-term help/housing in their area.

Table 4.3 continued

	Problem	Explanation
8	Agency maintenance of homelessness developed	Vetting procedures set up under this legislation developed into cream-skimming 'good', 'deserving' people, rewarding them with 'nice' accommodation in nice areas (Carlen 1994). Other, less easy-to-help people, had to run the gauntlet of poor-quality hostels and temporary accommodation. Others were actively discouraged from applying for accommodation and/or presenting themselves as homeless (Carlen 1994). Additionally, exclusion categories (for example male-only hostels) and referral procedures adopted by social workers, housing officers and hostel staff prevented groups of homeless people from gaining access to accommodation (Cowan 1997).

In 1991 the *Big Issue* street paper was launched. Designed to be bought and sold by the homeless at a profit, it introduced the possibility of self-help: a 'hand up, not a handout'. The aim was to give roofless people independence and a way to work their own way out of rooflessness, by earning enough money for rent deposits. In 1995 the *Big Issue* developed support services to help vendors access housing, training, education and a listening ear. For a time, attention was diverted away from entrenched views of lazy, undeserving roofless people.

Major discrepancies and inconsistencies in the way legislation was implemented were discovered (Niner 1989; Evans and Duncan 1988). Pressure on the legislation mounted. Charities began to employ solicitors to ensure that local authorities carried out their statutory duties towards homeless clients (e.g. Kingston Churches Action against Homelessness). Increasingly the law courts were used to make legal rulings to establish, define and mould the legislation (Hutson and Clapham 1999). Pressure on available housing grew and increasingly local authorities had to turn to the private-rented sector. In 1995 a ruling was made that enabled local authorities to discharge their duties by providing temporary accommodation (Jacobs et al. 1999). The legislation was left battered and bruised and under severe strain.

The Housing Act 1996 was introduced. The Government attempted to redress the problem of fast-track access into local authority (and by this time housing association) accommodation by establishing a single route for the allocation of social housing: the waiting list. Homeless households were now offered temporary accommodation for up to two years and the option to apply to go on the housing waiting list. Or they were directed to other affordable private-rented sector accommodation known to be in the area. Local authorities also had a duty to provide advice and assistance to the non-statutorily homeless (including single adults). Whilst tackling, in part, the problem of queue-jumping, the legislation created three further problems to add to the now growing list (Table 4.4).

There was another problem. While the legislation created some form of weak but preventative safety net, it did not tackle the problem of the thousands of people already sleeping rough in England each night. Many had been on the streets for a considerable length of time. In 1990 the Rough Sleepers Initiative (RSI) began.

This was a programme designed to make it unnecessary for people to sleep rough. The Government, through the RSI, tried to stimulate and increase voluntary sector services and provision. It offered funding to organizations already dealing with rough sleepers. The project was so successful that it was extended twice, with a separate Homeless Mentally Ill Initiative and an outside London section for the rest of England. Each phase was evaluated, gaps and best practice were identified and new solutions devised. More money was targeted to stimulate ever-better provision. The hostel, daycare and resettlement systems were transformed. The homeless industry began in earnest.

Table 4.4 Problems emerging from the legislation – Part 4

	Problem	Explanation
9	Temporary, short-term help	Help became temporary and short term, keeping in precarious housing and continually vulnerable to roof/homelessness. Temporary accommodation meant that households were exposed to frequently changing address and their children to frequent changes of school. Living conditions were often poor and cramped, especially when B&B hotels were used. Local authorities only had a duty to direct non-statutory homeless people to hostels or private-rented sector accommodation. This resulted in people being given, often outdated, long lists of hostels and housing associations. Those that had not closed or moved were usually full or unable to help because they did not take direct-access clients.
10	Proof of vulnerability of priority need	The Act failed to offer any real support to homeless single adults, people with drug/alcohol problems and people with borderline mental health problems or borderline learning disabilities. Adequate provision was not made either through housing allocations or supervised housing. There was no statutory duty to act unless such people could prove they were vulnerable and in priority need. Consequently this group continued to slip through the safety net and become roofless.
11	Exclusion of young people leaving home	The Act tried to unify local authority policies and prevent young people leaving home early and gaining accommodation via the homeless legislation. It stipulated that young people (including care leavers) could no longer be regarded as vulnerable and in priority need by virtue of age alone. They had to have other circumstances, that when combined with their age, made them vulnerable (for example in danger of sexual/financial exploitation).

More charities sprang up. Cream-skimming the easiest-to-assist clients was rife. Competition for funding both for projects and research began. Little or no regulation of the industry meant that the quality of accommodation and resettlement help received was a lottery, especially in London. Funds became targeted at research and monitoring systems that attempted to regulate the homeless industry and control

bed spaces (Rough Sleepers Clearing House). This university-style clearing house was set up to monitor available beds and the outcomes of resettling homeless people in mainstream society. It found that aftercare of the homeless was failing (Dane 1998). People were pushed through the system and into housing without adequate support, preparation or long-term help with tenancy sustainment. It became apparent that single-person homelessness could not be simply an accommodation problem. Despite this, the number of people sleeping rough in England and Wales fell to a third of the pre-1990 level.

The RSI's latter phase actually began to undermine its own good intentions. The funding mechanism had created lead charities with a proven record of good practice. These gained the lion's share of funding and meted it out to the organizations they worked with. This created cronyism and jealousy within the homeless industry, as only charities willing to co-operate with the lead organizations had access to RSI funding. This led to three further problems (Table 4.5):

Table 4.5 Problems emerging from the legislation – Part 5

	Problem	Explanation
12	Limited access to hostel beds	Designated beds became the norm: beds in hostels were often reserved for RSI clients, specific charities, local authority statutory duty clients, women or the under-25s. This meant that despite extra provision, access was severely restricted and most 'direct access' hostels were no longer open to people walking in off the streets. Moreover, there were times when reserved beds were left empty, while people wanting a bed for the night continued to sleep rough. As provision increased, access actually decreased. The most affected were males over the age of 25 and those with difficult-to-handle problems or behaviour.
13	Client hogging	Client hogging began: funding was often metered on a client number or bed occupancy basis. In-fighting over funding and clients was rife between organisations with similar geographical areas. Homeless people missed out as some hostels failed to transfer clients to hostels better suited to their needs. This prevented the development of a cohesive, unified, client-centred response to homelessness.
14	Hard-core remnant	A hard-core remnant developed: consisting of long-term, difficult-to-handle roofless people trapped on the streets, such as people with mental health or behavioural problems (those prone to self-harming, violent behaviour or substance abuse).

Concurrently, during this period, intensive research by the Government, academics and voluntary organizations was conducted into all aspects of single homelessness. These included the causes, methods for encouraging people to leave the streets and

resettle, the resettlement process, the 'revolving door' syndrome,[18] the 'silting up' effect[19] and how to help the hard-core remnant of long-term homeless people that seemed to be unaffected by the initiative.

By the end of RSI's third phase it was recognized that a harder line needed to be taken with entrenched and complex multi-need rough sleepers to move them off the streets. The tide of new homeless was slowing. So attention and resources needed to be diverted away from provision and crisis management into prevention and more specialist complex help. Simply providing accommodation without support was no longer an adequate solution. Accommodation providers, including housing associations, needed to provide resettlement programmes and tenancy support (DTLR 2001a, 2001b; Ravenhill 2000b). Policy in the 1990s had shown that by defining a need and setting aside government funding for that need, hitherto rigid voluntary sector organizations could be persuaded to adapt their provision to cater for real client needs as opposed to just containing clients. More funding was advocated.

Although undoubtedly the RSI had been successful, it failed to both remove the need for people to sleep rough and end the continual tide of new homeless people. That was despite increased provision, better-targeted services, more available accommodation and consistent research. Throughout history there has always been a core of people who prefer to live on the streets. Folklore tended to set the number of such people somewhere between most or all rough sleepers. However, research now showed that only 5 per cent of rough sleepers would choose to stay on the streets if offered suitable accommodation (Randall and Brown 1996). This small minority could not account for the number of people still on the streets. There had to be another explanation.

In December 1997, the Government set up the Social Exclusion Unit (SEU). The SEU elected to target rough sleeping as one of its first priorities. It argued that the homeless people were 'at the sharp end of social exclusion' (SEU 1998b). They acknowledged that legislation was fragmented and responsibility for helping the homeless was split between various central and local government departments and other agencies. There lacked a coherent 'joined up', integrated policy. The RSU (Rough Sleepers Unit) was formed. It aimed to and succeeded in cutting rough sleeping by two-thirds by 2002. The Rough Sleepers Unit set out to create a centralized, co-ordinated and united policy with all relevant government departments working together and alongside the voluntary sector. The aim was to link beds with the 'right sort of help', especially for the hard-core, difficult-to-help homeless. The RSU advocated a continuum of care, with a clear route from the streets to a settled lifestyle. Street outreach work was overhauled to provide a more co-ordinated approach and to limit the activities of, for example, soup-runs, which were seen to be reinforcing street lifestyles. Services catering for substance abusers and those with mental health problems were to be increased. Attention also focused

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18 People trapped in difficult-to-break cycles. Moving either from street to hostel and back or from hostel to housed and back onto the streets/hostels.

19 Hostels and specialist accommodation filled with residents who could not move onto specialized services or accommodation. This clogged the hostel system, preventing other people moving off the streets.

on prevention, particularly care-leavers and those from the armed forces or prison. Most of these aims were met in London, but elsewhere in England services remained unco-ordinated and patchy. The clarity of the route from street to a settled lifestyle was often dependent on the roofless person stumbling across the right help or charity. Local authority departments even in London, often placed people in accommodation with no support. Whilst some projects were excellent, some charities remained in the pre-1990 ethos of crisis management only.

Preoccupation with examining the street lifestyles of the hard-core remnant meant that begging was reintroduced into the political arena and was clamped down on (RSU 2001; Danczuk 2000; Dean 1999). A TV campaign asked the general public to 'change a life': give to a charity, not a beggar. It was felt that begging sustained a roofless lifestyle. However, neither the Government nor the RSU acknowledged the hundreds, possibly thousands, of street-users[20] who begged. Attention focused on the need to create 'meaningful occupation' for rough sleepers, by offering them a place to go during the daytime – the aim being to end the boredom of street living and equip roofless people with the motivation and skills needed to re-enter housed society in a sustainable way.[21]

Research itself came under scrutiny. Despite the plethora of research into homelessness over the previous decade, there was no easily accessible or reliable picture (Randall 1998). Research findings were scattered throughout many formal and informal agencies, each with limited budgets and their own hidden agendas. This fragmentation and the lack of any standard measure against which statutory and voluntary organizations could measure their achievements made it difficult for organizations to evaluate how well or badly they were doing. In 2000, the main research was pulled together in an accessible format and thus highlighted gaps in knowledge and paved the way for further research (Klinker and Fitzpatrick 2000; Fitzpatrick et al. 2000).

By the end of the twentieth century homeless policy, though not legislation, had been transformed. The focus had shifted from concentrating on crisis management and containment of roofless people. There was now a prevention-oriented approach combined with stronger emphasis on resettlement and long-term sustainable reintegration back into housed society. However, the divide continued within the voluntary sector between hybrid, well-organized, well-funded charities at the cutting edge of research and provision, with strong programmes and comparatively good success rates, and the often smaller charities or local-authority-dominated organizations that continued to cater for the most basic of client needs. Provision and exit routes from homelessness were still a lottery. Huge holes in the safety net of provision became evident (Illustration 4.2).

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20 See Chapter 2.
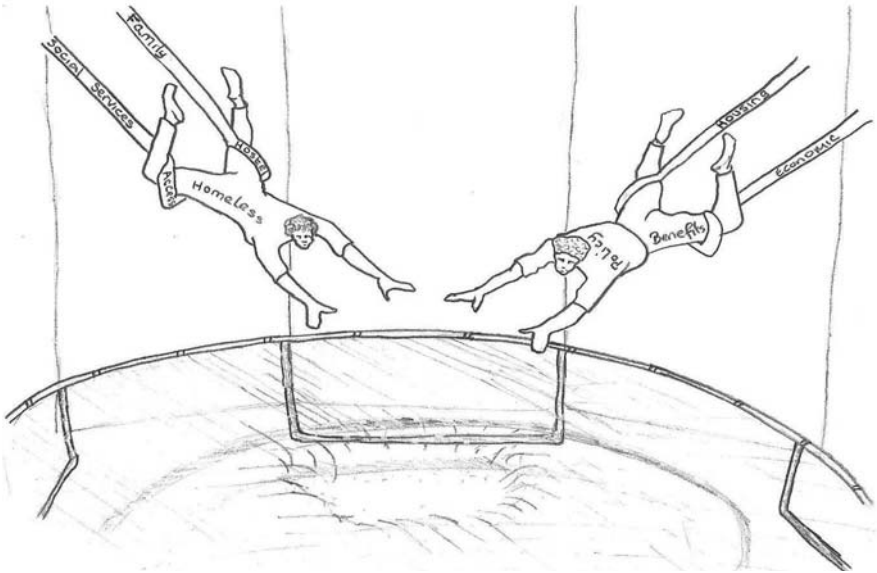21 See Homelessness Training Unit (2000).

Illustration 4.2 Holes in the safety net of provision

The prevention-oriented focus changed the way homelessness was analysed. Attention moved from the causes of homelessness to factors that predisposed people to being vulnerable to or triggered their homelessness. Causes became an obsolete term that could not explain the complexity of and interaction between people's personal circumstances, their biographies and wider structural factors. Commentators discussed homelessness in terms of homeless careers (Fitzpatrick 2000; Hutson and Liddiard 1994), routes into homelessness (Ravenhill 2001, 2000b), people at risk of homelessness (Ravenhill 2003; DTLR 2001a, 2001b) and the process of becoming homeless (DTLR 2001a; Ravenhill 2001, 2000b; Randall and Brown 1999a, 1999b). Risk factors were identified,[22] and subsequently trigger, welfare and protecting factors (Ravenhill 2003; DTLR 2001b). Trigger and welfare factors were seen to increase the risk of homelessness, whilst protecting factors lessened that risk. To all intents and purposes welfare factors (mental ill-health, substance abuse, learning difficulties) were the same as triggers; they simply indicated that homelessness could have been prevented or delayed had effective welfare been available. It was recognized that people with trigger and welfare factors, but no protective factors needed to be identified at an early stage to prevent their homelessness (DTLR 2001a).

There was a tug of war between triggers and counterbalancing protecting factors. Diagram 4.2 attempts to show this. The onion-like rings represent the main influencing factors on individuals' lives. These can be both positive and negative. Each ring could also be subdivided into segments (like an orange); each segment would represent either a trigger or protecting factor. Each ring is interrelated with the

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    22 Ravenhill (2003); Randall and Brown (1999a); Bruegal and Smith (1999).

other rings. Each influencing factor (e.g. family background) is related to structural, community and individual factors. Some issues are repeated in more than one ring, for example substance abuse may feature in family background, childhood factors and adult triggers with the substances being taken by the parents, child or adult. In the centre are the fixed characteristics that an individual cannot change, such as their gender, age, their social class of origin and mental capacity (e.g. learning difficulties).
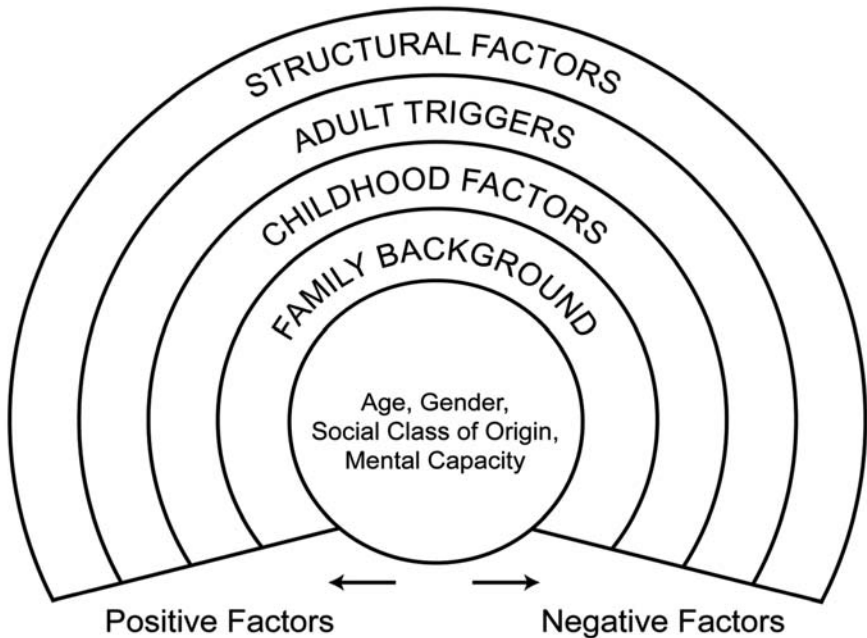
Diagram 4.2 Model of positive and negative influences on homelessness

With the identification of risk, trigger and welfare factors and the counterbalancing protective factors, homeless policy entered a new era. There was recognition that intervention designed to prevent homelessness was far more than structures, housing, employment or issues of poverty. It was also about tackling situations before they became a huge problem, such as identifying young people at risk of homelessness before the age of 14, teaching in schools on leaving home, housing and what to do in a crisis like homelessness, family mediation and tackling runaways.[23] Action-based research took place through the Safe in the City programme, 1998–2004, to test whether young people at risk of homelessness could be diverted away from homelessness (Dickens and Woodfield 2004; Safe in the City 2002). Despite growing

23 See Rees and Lee (2005); Ravenhill (2003, 2000b); SEU (2001a); Bruegal and Smith (1999).

evidence of family life contributing to social exclusion and homelessness, there was still no recognition that family policy, as with homeless policy, needed to change.

By the end of 2001 the RSU had reached its targeted two-thirds reduction in rough sleepers. Prevention was being researched and pilot projects existed and were being evaluated. The Rough Sleepers Unit (RSU) became the Homeless Directorate and attention shifted to the overuse of B&B accommodation as temporary housing for both single people and, in particular, families. However, there were four further problems that could now be added to the list (Table 4.6).

By 2001 there was growing dissatisfaction with the homeless legislation. The two-year rule was widely accepted as counterproductive both for local authorities and homeless people. So too was the inaccessibility of accommodation for the under-25s, especially those aged under 18. This caused hostels to silt-up and undermined the Government's intentions. Concurrently, integrated co-ordinated responses were not being automatically stimulated within many local authorities, especially in rural areas. Consequently people continued to migrate to towns and cities from areas with little or no facilities for the homeless. The 2002 Homelessness Act was introduced. This changed the way local authorities viewed homelessness. For the first time they had a duty to research, form and publish a homelessness strategy. The strategy was also to be taken into account by housing and social services departments (via the Supporting People programme). Local authorities now had to look at prevention, provision of accommodation and provision of support for homeless people. Furthermore, the two-year rule was also lifted, ensuring that local authorities had a duty to house the statutory homeless until suitable permanent accommodation could be found. Local authorities, for the first time, had a duty to find people fleeing from domestic violence, in priority need. Furthermore, where a threat of violence existed, they were not to be sent back to their local authority of origin. The vast majority of roofless single people were still not catered for.

It was found that the homeless strategies in most areas failed to include single homeless people, rough sleepers, ex-services personnel, black and ethnic minority groups, former asylum-seekers and Gypsies/travellers (ODPM 2004b). Most local authorities did include young people, female victims of domestic violence and substance abusers. Again, homeless policy fails the roofless and many of the precariously housed known to be vulnerable to rooflessness.

Table 4.6 Problems emerging from the legislation – Part 6

Problem	Explanation
15 Rough sleepers displaced, not removed	Visible rooflessness had been reduced in city centres, especially London. Attempts to reduce these numbers were not as successful as government figures showed (Branigan 2001). Areas were targeted for intensive outreach work and police move-on policies. This pushed some rough sleepers into other, more secluded locations. For example, 1999–2000 saw drives to reduce the number of rough sleepers in the Strand, Covent Garden and Leicester Square (London). The result was an increased number of roofless people in and around, for example, the London School of Economics' buildings, where numbers increased from an average of one to an average of eight per night at its peak. There was a hard-line policy to remove sleeping sites by fencing or gating off doorways and delivery points. Simultaneously, they sent outreach workers to encourage rough sleepers to 'come in from the cold' and enter the hostel and resettlement schemes (DTLR 2001a). However, significant numbers of people continued sleeping rough in increasingly secluded places or moved away from city centres into the suburbs. Undetected, they were not accounted for in government statistics. Thus, although undeniably the numbers of rough sleepers were going down, rooflessness was being pushed further out of city centres and into less visible locations.
16 Little done for older rough sleepers	As the drive to move people off the streets moved one roofless group either into hostels or out of the area, another group took their place. Over time, those left on the streets appeared to get older, moving from the 20s–30s age range to the 40s–50s.
17 Little done for street users	No real distinction was made between rough sleepers, the homeless and street users. This meant that although night-time figures reduced (for example those on the streets after 12am) there was only a minor impact on the number of homeless and roofless people seen by the general public during the day and evenings.
18 Restricted access	By tying up hostel beds and housing association accommodation for designated RSU clients, access was severely restricted. This irony was demonstrated during observations at the recording of a television episode of The Carlton Debate (2000). Leading homeless activists (Louise Casey, Head of the RSU; Shaks Ghosh, Director of Crisis; Victor Adebowale, Chief Executive of Centrepoint) declared that there were hostel places available that night and therefore no need for people to sleep rough. However, the roofless participants on the programme were not offered beds for the night. After cocktail sausages and wine in the hospitality suite they left to sleep rough. Beds were available for rough sleepers that had been contacted by contact and assessment teams (CAT; outreach workers). CAT teams were not working in the studio and there were no direct access beds available. This carefully orchestrated debate gave the illusion that people were sleeping rough out of personal choice, rather than necessity.

European Homelessness Policy[24]

The Homelessness Observatory, set up by FEANTSA in 1991, made homelessness a priority within the European Union. Through systematic research and discussions between member countries, European homelessness policy was shaped. Social inclusion and social protection policies were adopted. National strategies and national action plans to combat homelessness became obligatory, forcing nation states to look seriously at homelessness and to formulate action plans to alleviate and reduce homelessness within their nation. Thus much of British homelessness policy since the 1990s was shaped in response to European legislation. For some countries this effectively forced them to acknowledge the existence of homelessness and to look for the first time at state rather than voluntary sector intervention. The main problem has been to find a common workable definition.[25]

Across Europe, policy had shifted from crisis intervention to a structural approach more concerned with prevention and housing quality than rough sleepers. This, in part, is a natural progression from crisis management to preventing the tide of new rough sleepers or episodic roofless. FEANTSA is now calling for homelessness to be linked with housing exclusion, the development of classifications and measuring procedures and the development of a database of services.

The EUKN (European Urban Knowledge Network) are pushing for the development of an 'integrated chain' approach to tackling homelessness in each European city, implemented through changes in national policies and strategies. Every individual homeless person (including the roofless), would receive an integrated action plan that ensured they received support, assistance and guidance throughout the process of inclusion back into mainstream housing and stabilization within housing. The exact components of that 'integrated chain' would be flexible to account for national and regional variations in welfare policy and approach to homelessness.

FEANTSA hopes to eradicate homelessness in Europe by 2010. It remains to be seen if they can harness the support of national governments, get them to implement policies that will achieve this aim within their own countries, stem the tide of new homeless people by getting policies that intervene to prevent homelessness and encourage governments and voluntary sector organizations to provide enough resources to tackle entrenched rooflessness. This now needs to be achieved within two years across Europe, despite a number of national governments that do not take statutory responsibility for homelessness. The European policy tends to be predominantly top–down structural solutions that do not allow for the individuals' interaction with policy and the nation state – an anomaly that has thwarted Britain's best efforts so far to eradicate rough sleeping.

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24 Edgar and Meert (2005) provide a comprehensive look at European homelessness.
25 See Chapter 2.

Conclusion

In spite of over 50 years of UK government policies and numerous pieces of legislation, homelessness persists. There is still no single piece of legislation that deals with homelessness. No statutory duty to accommodate roofless single people. Assistance and access to appropriate services remains patchy at best. Opinions on the root causes of homelessness have oscillated between personal failings and structure. Finally, although family is seen as a significant factor in homelessness, as well as other societal problems, there has been no significant change in family policy. Rooflessness remains a synergy.

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Chapter 5

Research Framework

Ethnographic research is discussed in depth in existing literature and therefore is not discussed at great length here. To look afresh at single-person homelessness (especially long-term rooflessness), a structuration theoretical perspective is pursued using grounded theory (Glaser and Straus 1967). This way all becomes data and therefore relevant information, regardless of the source, including theories used, policy and practice, national and international law, observations, interviews, documents and media coverage (Glaser 1998). The main objective is to find out what is happening from as many perspectives and viewpoints as possible. Then lay these side by side and systematically analyse them, drawing out dominant themes. This synopsis offers increased accuracy (through repetition) and facilitates objectivity. This in turn is intended to free the researcher to write an abstractive account of their research (Glaser 1998).

A combination of methods within the grounded theory paradigm were used, with a heavy emphasis placed on ethnography[1] – the aim being to get a thorough insight into rooflessness from different perspectives. To ensure a comprehensive coverage of perspectives and accuracy in the findings, more than one location was used; respectable county towns, coastal areas and suburbs were contrasted with central London. Research was conducted in Bedford, Exeter, Merton, Reigate and various inner London boroughs. This generated a view of rural, coastal, inner city and suburban rooflessness and an idea of their co-dependency and interaction was generated (Table A.1 and A.6 – Appendix). With the life-story interviews, a large enough sample was sought, from which broad inferences could be brought. Equal numbers of males and females were interviewed across a wide age range (Tables A.2 and A.4 – Appendix). Similarly, it was important to capture people's experiences at various stages through the homeless process to ensure recently recalled data was available (Table A.5 – Appendix). It was not possible to gain a sufficiently racially diverse group,[2] nor was it possible to gain a diverse group based on sexual orientation,[3] so neither is formally discussed. To balance the information available from roofless people, interviews with people who had never been roofless but had experienced several triggers of rooflessness were also conducted.

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1   Including observation, participant observation, life-story interviews, in-depth unstructured and semi-structured interviews and documentary analysis.

2   Appendix, Table A.3. See ODPM (2005); Netto et al. (2004) for more information on homeless ethnic minorities.

3   See O'Connor and Malloy (2001) for insights into aspects of gay and lesbian homelessness.

The main criticism of grounded theory is the question of accuracy. Grounded theory and especially ethnography raises concerns about researcher bias, data bias, subjectivity and misinterpretation of the data. In an attempt to avoid such criticisms researchers have tried to be more reflexive, observing the researcher, their impact and reactions as part of the data.[4] Postmodernists tried to include the researcher's voice within their text in an attempt to make them more valid. For example, Day (2002) experiments with using the Goffman-style different aspects of self (researcher, author, narrator, daughter, sister) and Alsop (2002) uses different self-identities (teacher, mentor, ethnographer, writer and German immigrant to the United States). However, this detracts from the purpose of grounded theory and is a distracting product of qualitative data analysis's pre-occupation with accuracy (Glaser 2002). The researcher's thoughts and opinions are just another variable and should be coded along with all the other information. Personal bias and interpretations are ironed out and made objective when they are viewed alongside all the other information. Systematic analysis inevitably distances the researcher from the data as perspectives become abstracted, conceptualized and then patterns highlighted.

Charmaz (2000) introduces constructionist grounded theory as an alternative research method, the main aim being to record multiple social realities accurately. She argues that the mutual creation of knowledge between the observer and observee is vital if we are to understand the subjects' meanings. To gain this kind of knowledge requires the development of a relationship between the researcher and researched, so that questions can be asked, issues discussed and clarified and a mutual understanding can be reached concerning the information given. She argues that grounded theorists separate the experience from the experiencer and therefore the meaning from the story. This therefore limits and reduces an understanding of their experiences. For Glaser, Charmaz is overly preoccupied with data accuracy and in danger of not being able to conceptualize anything, producing instead a purely descriptive account that loses the relevance of doing the research.

Charmaz's (2000) need for accuracy centres around the type of end-product produced. She sees many grounded theory (and by default ethnographic) texts as stories composed by the researcher, suggesting that theorists construct their image of a reality, but not *the* reality. This is similar to Tyler's (1986) argument that every aspect of ethnographic research is subjective. The text produced from ethnographic observation is conceived through the researcher internalizing (taking into the imagination) sets of events, patterns of interaction and the language used within the scene. But these events, patterns and interactions are taken out of context, because the whole scene along with atmospheres, smells and feelings cannot be transcribed, nor can what happened before the researcher arrived or what continued to happen after they left. Thus the data is reduced to a mere fragment of the whole. When the researcher records the scene in a text (written, video or photographic) they produce a 'fantasy' about the 'reality' that they have seen: 'a fantasy reality of a reality fantasy' (Tyler 1986, 134). Once written, an ethnography becomes a reality in the sense that the text is an object that can be read and studied. Tyler suggests that this text is a 'reality fantasy'; that is, it has become a reality because it exists in text format, but

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4   See Hodgson (2000); Clifford and Marcus (1986); Hammersley and Atkinson (1983).

it is still a fantasy because it only represents a fragment, a snapshot of the truth, conceived in the researcher's mind.

There exists a polyphony of voices that if listened to can be heard. There are not only different voices, but individuals may hold different multiple perspectives on the same theme or their perspective may vary (Glaser 2002). Thus, individuals can hold diametrically opposed views concurrently and without questioning their opposition. Thus it is not necessary to try to understand people's beliefs, but to accept their views as data, code it and conceptualize accordingly (Glaser 2002). The act of coding, laying numerous accounts from a variety of sources side by side and comparative analysis allows dichotomies to exist without contention. For example, within the homeless culture deep friendships can coexist alongside extremely violent relationships and members of the homeless culture accept this as normal.[5]

There is a natural struggle between the desire to produce Charmaz's detail, to portray accurately roofless people's stories, and the need to reach Glaser's level of abstraction. This is a fine balance. The text from each story becomes almost sacrosanct in the researcher's mind. However, a meaningful portrayal of rooflessness, incorporating the polyphony of voices and views, requires a concise yet accurate text, that avoids stereotyping and diluting the homeless culture and people's lived experiences. Furthermore, ethnographic researchers inevitably become attached to some of the people they research. It is inevitable that some stories and characters stick in the memory more than others. However, by systematically recording each observation, conversation, interview and the researcher's thoughts, feelings and reactions, all is available for analysis in the future. Similarly, by incorporating in the text quotes from the interviews and observation diary and including life route-maps for individuals, some of the detail is used to support the abstracted theories.

Ethnography (and grounded theory) is not merely the study of people, but a process of learning from them through interaction and exchange of ideas and information (Hodgson 2000). People are naturally purposive; they interact with and interpret the world around them, reacting to it and amending their actions according to their perception of that world and the way they are perceived within it. Thus a necessary part of ethnography is the study of people within their social context. Behaviour and the way individuals interact with their setting is as much a part of the study as conversations and questions asked and answered. Thus people's response to the researcher being present and the researcher's response within the scene is a valuable part of the study and at times an object for study. Chapters 6–8 are not an objective analysis of rooflessness or homeless culture. They are an abstracted account that attempts to define some of the dominant features and describe the process into, through and out of rooflessness. By understanding that process, the trigger factors and people's interaction with life events, an explanation of why rooflessness persists and how the homeless culture continues to exist is outlined.

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5   See Chapter 7.

Methods Chosen

The main research was conducted over a period of four and a half years between October 1997 and July 2001 (Ravenhill 2003) (Table A.1 – Appendix). This is supplemented by subsequent research over two and a half years between May 2004 and November 2006 (Smith and Ravenhill 2007). A combination of several different qualitative research methods is used (see Table 5.1).

Table 5.1 Research methods chosen

Research method	With …	No.
Life-story interviews	Roofless, homeless, housed ex-roofless people	48
Depth interviews	Roof/homeless people Key people working within the homeless industry People who had never been roofless despite having experienced several triggers of rooflessness	21 33 14
Telephone interviews	Key people working within the homeless industry	24
Informal interviews and long conversations	Roofless, homeless, housed ex-roofless people	77
Observation	Covert observation on the streets, predominantly in central London, Bedford, Exeter and Wimbledon	Approx. 764 hours
Participant observation	Predominantly as a volunteer worker at Merton Anchorage Trust Smaller scale. As researcher at hostels, daycentres in London, Exeter, Reigate and Bedford	Approx. 225 hours
Documentary analysis	Life-story scenarios of homeless people used in promotional literature (for example annual reports, fundraising materials) from a variety of voluntary sector organisations working within the homeless industry	99 scenarios generated for analysis*

Note: * 152 organisations contacted, 90 replied, 75 organisations used biographical scenarios, 99 scenarios generated for analysis.

These methods were chosen to ensure a variety of data from different contexts. They also created a means for cross-checking the information gathered. The information gained from the life-story interviews could be checked and interpreted in the light of the ethnographic observation and participant observations. The interpretation of the observations was cross-checked through informal conversations and depth interviews. By using grounded theory analysis, all the information could be laid out and systematically coded and analysed.

Justification of Methods Chosen

The move away from the comprehensive surveys that neutered and diluted the true meaning of homelessness allowed it to be viewed in a new way. Homelessness was examined as a social and structural phenomenon alongside the everyday reality of being homeless. Structuration theory facilitated a rupture with the conventional methods for viewing homelessness, providing a new understanding of the way roofless people viewed the world and interpreted it and themselves (Berger 1972; Berger and Luckmann 1967). This reality involved choices, decisions and actions that needed to be made in an ever-changing political and social world (Beck 1992). This potentially produced ontological insecurity (Giddens 1991), insecurity that could become so severe that it affected the individuals' ability to function within the society in which they lived (Croft 2001).

Those with the most knowledge about rooflessness and the homeless culture are those who have lived that lifestyle. Roofless people are knowledgeable experts within their field. By treating roofless people as actively constructing their own identities and social worlds, information about their conduct and the conduct of others within their world (individually and collectively) becomes available. Using a combination of life-story interviewing and observation facilitated an examination of how individuals interacted within the social structures of conventional society and the homeless culture, plus their motivations and reasoning for making choices or decisions. The aim was to gain some understanding of the complex and interconnected nature of the homeless process.

1. Life-Story Interviews

The life-story interview is a qualitative research method that uses face-to-face depth interviews to gain biographical retrospective and current information. It is usually recorded and analysed in a chronological format. It is not a commonly used method within social policy or sociological research, for a variety of reasons, including questions regarding the accuracy of the information gained. However, the accuracy of people's recollections has been shown to be reliable even after a substantial number of years have elapsed (Parry et al. 1999). Chamberlayne et al. (2000) argue that biographical interviews are a rich source of information from a historical, present-day, social policy and individual (agency) viewpoint.

Biographical-style research is useful when attempting to relate the personal to the social and structural and generates insights both into social processes and the individual's understanding and reaction to those processes (Giddens 1984). It shows how these intersect and are mutually dependent. Life stories are useful for understanding the choices that people make in the light of the constraints and assumptions placed on their lives (Chamberlayne et al. 2000; Erben 1993). They can also show how early known emotional patterns are subconsciously repeated in adult life (Evans 1993). There are enormous problems with checking the validity of the information, and problems inherent with analysing a massive amount of material. However, if social scientists are to research any kind of happenings accurately, they

need to take into account the life histories of those individuals involved (Thomas and Znaniecki in Faraday and Plummer 1979).

The life-story method is also part of case study research; it is used to evaluate causes alongside the effects of time (Robson 1993). In case-study research it is useful tool for pattern-matching – looking for patterns that emerge and comparing them with those already in existence in the literature as a means of proving or disproving a theory. It is a means for exploring the 'truth', by finding out what people actually did and what actually happened instead of what experts think they did or think happened to them. By discussing how they felt at the time, the interviewee can give 'personal meaning and value' to particular events or activities that may otherwise have been missed (May 1993).

The main criticism of life-story interviews and interviews in general is that people may lie or tell the interviewer part-truths. Similarly, by omitting details this may change the slant of the information gained (Gardner 2001). The interviewee may present a Goffman-style actor's front-stage presentation of themselves. That is, the interviewer sees the 'self' that the interviewee wishes to be seen in public. This may be a sanitized good self, a victim-martyr self or a fictitious, imaginary self. The interviewer rarely gets to see the backstage self with all its contradictions, unpleasantness and deepest insecurities (Gardner 2001). Participant observations were used to get, in part, behind those presented personas, offering a more accurate picture of what the roofless process really meant for individuals. This enabled dominant themes and topics that emerged from numerous accounts and sources of information to be examined. The replication of information given in life stories and other interviews suggested that this information was more likely to be accurate.

There were examples of interviewees alluding to events or processes without actually overtly stating them. Where these were spotted during the interview, there was probing for more information. However, for some, events were alluded to which they either found embarrassing, derogatory or simply too painful to recount:

> 'Certain things happened to me as a child that made me start drinking. I started drinking at 13.' (Aileen, female, aged 39; hostel, homeless approximately 23 years)

> 'I don't really want to go into details about my life and my family and all that. I can't, I can't talk about it, I never have and I never will. Let's just say I wouldn't wish it on anyone.' (Tim, male, aged 42; housed two years; research diary)

This demonstrates that accounts can only ever be partial truths (Clifford and Marcus 1986). Life stories will always be biased and partial as memories are often repressed or merged with others (Parry et al. 1999). People remember things that are of significance to them; many things are forgotten (Gardner 2001). The fact that events are merged or omitted does not necessarily mean that their experiences and interpretation of their life is any the less accurate.

People rarely recount events in true chronological order; they frequently skip from one era to another and back as they recall details on a thematic basis or as one memory triggers another. In an attempt to chronicle their life stories, the interviewees from the outset were asked to give some indication of the date, their age or some national event so as to give some idea of time-scale (Hubbard 2000; Humphrey

1993; Brown 1990). This was later ordered into chronological order using life route-maps (in Chapter 6). These also served to give an idea of process over time.

Information gained from life-story interviews is influenced by the parameters set out at the beginning of the interview (Gardner 2001). Namely, interviewees knew that the interview was a life story, thereby indicating the amount of information required and the time-scale of events. Interviewees were asked to talk about how they became homeless, thus limiting their life to a specific context. The life stories and route-maps represent individuals' interpretations of their lives. The restructuring of information during analysis into rough chronological order meant that the life stories were merely the researcher's (re-)presentation of their representation of their lives based on the theme of how they became homeless. However, this does not mean their accounts are invalid or less expert in any way. The life stories indicated events that people felt were pertinent to their route into, through and out of rooflessness. They are examples of (re)lived experiences through which they explained how they became roofless and the retrospective significance and meaning of events/actions either by them or affecting them. Moreover, contained in their explanations and interpretations of events and processes is vital information about how they perceive their situation and what is happening to them. These perceptions are an important part of understanding why existing services succeed or fail. The combination of biography and theory makes both elements stronger, especially when theory emerges from the lived experiences of groups of individuals.

The act of interviewing is an important part of the research. As one encouraging charity worker phrased it during the piloting phase, 'if you're new to this they will smell it a mile off' (Bromwin, research diary). The art of interviewing, therefore, involved adopting a Goffman-style actor's role and learning and transmitting the rules of a game called interview that two actors were about to play. By playing the part of a confident competent researcher that had clearly been researching for years(!), the illusion was created of someone in control of the interview. This meant that the interviewee could relax in the safe knowledge that someone was in charge and play the role of information-giver. The game continued. The researcher then needs to communicate enough interest and understanding in what is being said to elicit detailed information, but not so much understanding that the interviewee assumes that a common set of meanings exist between the two. The aim is to stimulate dialogue without impeding it. This was a lengthy game as interviews lasted at least an hour.

2. Interviews

Although life-story interviews are depth interviews,[6] a number of other depth interviews were carried out that did not contain full biographical detail. Some people having consented to life-story interviews found it too painful or intrusive to talk about all aspects of their life. Some substance misusers were capable of in-depth interview but not of giving their life story. Depth interviewing uses open questions

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6   Much of the justification for the use of depth interviews can be found in the above discussion on life-story interviews.

designed to guide and focus discussion rather than control and direct answers. Both semi-structured and unstructured interviews were used with professionals in the field (e.g. charity directors, project managers, local authority heads of department) and the type of information required. This facilitates freedom within the interview to probe some issues more deeply or follow up lines of enquiry that emerged from the interview and to clarify or seek elaboration on some answers (e.g. May 1993).

Enabling interviewees to talk freely, to pursue topics or lines of thinking as they think of them challenges the ideas of the researcher whilst simultaneously allowing the interviewee to answer questions using their own language and their own frame of reference (May 1993). Interviewees can draw on the ideas, mental pictures, analogies and meanings with which they are familiar, instead of feeling forced to use the set jargon of officialdom. More importantly, this method means that the interviewee is less likely to tell you what they think you want to hear. This means that a better understanding of the interviewee's point of view can be gained.

3. Observation and Participant Observation

The justification for using observation has already been discussed under grounded theory. The act of conducting observations is an important part of the research. The street observations were covert. This meant that the researcher had to disappear within the scene, able to see and observe without being seen. Although this was voyeuristic in style it was a useful way of gathering information about street life without influencing it by researcher presence.

Photograph 5.1 Covert observation
Source: Megan Wilkinson, 1996.

Disappearing within the scene required staging another Goffman-style role. This included dressing appropriately for the scene and assuming a character (e.g. tourist, worker on a tea/lunch break, passenger waiting for a bus/train). By not drawing attention to themselves it is possible to move close enough to clearly hear conversations and watch actions and interactions without drawing attention or alerting people to the fact that they are being watched. The gaze becomes an important part of observation. If the aim of the observation is not to be noticed, it is essential not to make eye contact or look directly at the people being observed. Furthermore, the researcher cannot make notes at the scene. Thus all observations need to be remembered and transcribed later. For critics of this form of grounded theory this style is too fuzzy and they prefer direct contact with people, allowing questioning, participant observation.

Participant observation facilitates the observation of actions, behaviour and language used by people in their natural setting. The researcher participates in the everyday life of people for a period of time. During this time they watch what is happening, listen to what is said, observe reactions and interactions, ask questions and generally collect whatever data is available that might shed light on the issue being researched. Taking the role of new volunteer enabled the role of observer to be used. The main criticism of this method is that it is highly subjective and rarely inductive as it is based on impressions of what is happening, not rigorous analysis (Hammersley and Atkinson 1983). This subjectivity, argued Clifford and Marcus (1986), is not weakness but strength.

Participant observation was a vital part of this research. A lot of information was gained from just spending time with homeless people, learning how they think and feel, how they interpret their world, what matters, what makes them laugh and what hurts. It was important therefore to ensure that the roofless were not devalued to the level of statistics or just another interview. Thus quotes from the observation diary and interviews have been used to help keep a human face on the research.

4. *Documentary Analysis*

Documents form an inevitable part of grounded theory (e.g. Glaser 1998). They include press or government reports, texts, photographs, statistics and biographies. They can be the research object or part of a triangulation of research methods; they can be an indication of the way people, events and cultural meanings are constructed (May 1993). Documents can be a representation or reflection of reality or even a means for constructing social reality. Thus the way homeless people are portrayed by the homeless industry[7] becomes an important part of homeless research. Such portrayals direct public, government and funders' perceptions (and homeless people's self-perceptions) of homelessness. They are in part responsible for shaping the homeless industry and therefore to a certain extent homeless culture.

Documentary analysis was used to examine the life-story scenarios of homeless people used by the homeless industry, existing stereotypes and the construction of homelessness as an issue. In the early stages of the research the results of the

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7   Chapter 2.

documentary analysis acted as a cross-reference/comparison for the information gained from the life-story interviews. A basic frequency analysis was conducted, to determine the most commonly mentioned subjects and facets of homeless people's lives. From these dominant issues, the broad stereotypes used by the homeless industry emerged.[8] The agencies used in the documentary analysis were drawn from across the spectrum of the homeless industry to give the research a more comprehensive and balanced insight. These were selected from homeless directories and organizations featuring in existing literature at that time. The results of this analysis were discussed in Chapter 2.

Practical Issues

Data Sources and Gatekeepers

Life-story and depth interviewing homeless people is not without its dangers to personal safety, especially when these are conducted in interviewees' homes, cafés or parks.[9] This being so, gatekeeper agencies were used to select the majority of interviewees. The gatekeepers were asked to apply common-sense judgements when brokering contacts with potential interviewees and arranging a suitable place for the interview (a safe place for both researcher and interviewee). This meant that when interviewing away from daycentres and hostels, interviewees were vetted by the organization for suitability and safety. This inevitably affected the data gained, as those selected were often more stable and articulate. The participant observations helped to counter this skew and included people with more chaotic behaviour and some under the influence of alcohol/drugs. Thus the life-story interview data was weighed and balanced against less stable, less articulate viewpoints.

Gatekeeper organizations were initially drawn from those responding for the documentary analysis and organizations contacting the researcher for professional advice/work. Snowball interviewing broadened the remit of the research as clients and organizations brokered further interviews with other people or organizations. This facilitated interviews with the roofless, those in hostels or temporary accommodation and those recently housed. No organization seemed to keep in contact with the rehoused for more than a year, unless they continued to use daycentre facilities. Thus those who had been roofless but had resettled into society were far more difficult to find. Location took considerable time. All these interviewees were found from independent sources, including conferences/seminars on homelessness and friends of acquaintances. Snowball interviewing was not possible with this group, as most severed all contacts with their homeless past as part of their reintegration into mainstream society.

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8   Chapter 2.
9   Nordstrom and Robben (1995) and Lee and Stanko (2003) demonstrate just how dangerous fieldwork can be.

Personal Safety in the Field[10]

It is a researcher's duty to ensure that they are as safe as possible in the field when researching.[11] In this research, as a safety precaution, when interviewing people in their own home, local parks or cafés, an arrangement was made with someone, before the interview, to act as base. They were given, in writing, the date, time, address and location of the interview and the name of the organization and contact person who arranged the interview, and the intended duration of the interview. They were given written instructions to call the police if the researcher did not contact base within a specified time period. This information was repeated on the day before entering the interviewee's address or location. If the interview went over time, base was contacted to inform them that the researcher was safe and would contact within a specified time. After the interview, base was contacted to inform them that the interview had finished, the researcher had left the premises or area and was in a safe place.

There were also issues of personal safety to consider when interviews were conducted with roofless and homeless people on the premises of organizations, especially those conducted in a separate office away from public view. There were times during the fieldwork when there was danger or fear of danger. At these times, it was necessary to deal with personal safety as a priority but to remain observant as to what was happening within the scene:

> A drunken man began to shout at four women sitting round a table drinking tea. None of the women spoke; they just looked at him. He got very angry and started to lean over the table. He seemed to be talking to the young woman opposite him. She stared at him but didn't speak. A mixture of booze and a thick Scottish accent meant that I could not understand what he was saying. He began to bang his fists on the table, lunging forwards making sure they landed in front of the young woman. She leant backwards staring at him, but didn't speak. She seemed frozen. The other women started telling him to calm down. He began to throw chairs across the room. A female member of staff asked him to leave. He continued to shout and bang the table. An older (late-50s) male staff member stood nearby. He continued shouting. His eyes never left the young woman. Another female staff member intervened and began to block his view of the woman and slowly they managed to get him to leave. During this time I remembered there was an office and a kitchen door on either side of a recess. I reversed into the recess only to find both doors were shut with staff and clients locked inside. I relocated myself behind a nearby pillar to block the path if a chair was thrown my way. (observation diary)

> During an interview: Jill had just finished telling me about her extremely violent partner. A man came over to our table, stood between Jill and me with a hand on the back of both chairs. Jane was sitting on my other side. This was the man banned from the daycentre last visit. He talked to Jill, asking her what she was doing and how long she would be. He asked for money and 'fags'. He stretched across her threateningly and she flinched away.

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10 See Lee 1995 and Linkogle and Lee-Treweek 2000, for further discussion.

11 For example, Rossi 1989 ensured safety by using pairs of interviewers accompanied by off-duty policemen to conduct interviews between midnight and 6am in Chicago.

He was intimidating and Jill was clearly terrified of him. It seemed a long time for staff to persuade him to move away from the table and leave. (observation diary)

During my interview with Tessa, she suddenly stood up. I made a quick mental note of where the door was and manoeuvred myself in case I needed to run. She turned her back to me and pulled down her trousers to reveal her bare buttocks so that I could see her operation scar. (observation diary)

When I arrived at Stephen's home there was another man there who said he wanted to be interviewed too. This was not anticipated. During the interview I was pre-occupied slightly with the need to feel safe. I made sure that I had a clear exit route to the door and my mobile phone was to hand and switched on. Both interviews were conducted without incident. (observation diary)

Researcher Effect

The theoretical side of researcher effect has been already discussed. The type of information given was influenced in two ways. It was felt that in both instances researcher effect could not be avoided, nor would it have served any useful purpose to try and avoid it. Firstly, pregnancy throughout the participant observation at Merton Anchorage Trust could not be hidden. This had a number of impacts. People initiated conversations more frequently than in other observations, initially to discuss the pregnancy. Both men and women wanted to talk about their own children, birth experiences and, in some cases, memories from childhood. Much of this data would probably have been unobtainable. Secondly, a decision was made early on in the research that some knowledge could be passed onto interviewees (and roofless and homeless people at the observations) without prejudicing the findings. For example, people struggling to save for quarterly bills were asked if they were on card meters. Some had not known that these existed and wanted to know more.

Use of Photographs

Photographs are used throughout the book as a means of demonstrating pictorially the different aspects of homelessness (Wilkinson 1996; Burgin 1982). This ethnographic use of photography was employed in part to convey something of the fieldwork that words cannot easily convey (Wilkinson 1996; Ball and Smith 1992; Sontag 1977). The use of any photographs in research always raises contentious ethical issues surrounding invasion, intrusion, voyeurism, stealing, even apathy and rejection (Wilkinson 1996; Sontag 1977; Becker 1975). To minimize ethical problems, care was taken to photograph people in such a way that their faces and identity was obscured. Care was taken when using the photographs so as not to be demeaning or derogatory.

Ethical Considerations[12]

Ethics are at issue at all stages of any research from design and implementation through to analysis and presentation. Thus following the code of ethics ensures that both the researched and the researcher are safeguarded.

1. Sensitive Issues[13]

People's biographical information often contained details that were personal and private. Some of the issues raised caused powerful feelings of distress and pain when individuals recalled events (e.g. rape, incest, violence, abandonment). One interviewee broke down in tears as he remembered the kindness of an employer who helped him move out of rooflessness and stay out. Thus for some, the interview was cathartic:

> 'I'm really glad I came today because I needed to talk about it. I needed to get it out in the open.' (Melanie, female, aged 16; hostel)

It is important that interviewees' feelings are respected and that the interviewee is not left at the end of the interview feeling exposed and violated. Each interview ended with a request for non-intrusive biographical information (age, marital status) and a wind-down session to minimize the 'research effect'.

2. Confidentiality

Each interviewee was assured of confidentiality before the interview began and reminded at the end that what had been said was in confidence. It was made clear that to preserve their anonymity their name would not be used in the research, nor would any names or places they mentioned. Pseudonyms were created to obscure their identity.

3. Portrayal of Homelessness

The findings of the research were presented in a number of seminars where ex-roofless people were present. The ex-roofless people who saw the research were pleased with the way it represented them. They were especially keen for people to understand that rooflessness was not simply a lifestyle option, that in many cases they had fought hard to avoid becoming roofless and fought hard to gain a position in mainstream society.

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12 Firdion et al. (2004) discusses ethics in detail.
13 See Lee (1993) for further discussion.

Method of Analysis

The method of analysis used followed a basic grounded theory analysis model (Kelle 1997; Straus and Corbin 1990; Glaser and Straus 1967). Qualitative data analysis is necessarily time-consuming and labour-intensive. It involves the systematic coding of the texts before analysis can begin and is the prerequisite for systematic comparison between texts. The codes are initially used to identify specific segments of text on a thematic or topological basis. The texts are examined line by line for content and meaning and coded accordingly. This involves considerable time reading, re-reading, interpreting and later comparing similar texts. The comparison of texts within each theme or topic generates a second layer of codes that form the construction of basic concepts, types and categories (see Table 5.2). These become the basic building blocks of theories (Kelle 1997). Often there are several layers of codes that cause abstraction from the data and gradually build theories (Glaser 2002). In this research the codes were organized initially in hierarchical networks. Where computer-assisted qualitative analysis software[14] was used, codes were also grouped into families based on themes. Both devices acted as filtering mechanisms that facilitated simple code and retrieval of relevant texts for comparison. This built into the analysis an element of rigour and accuracy. As the coding progressed, comments on the data and hypothesis were also recorded and linked to the data. The actual coding procedure followed the six stages in Table 5.2.

Stages 1–3 involved predetermined common-sense knowledge codes applied to the text (axial coding). Stages 4–6 involved generating codes directly from the content of the text (open coding). It was these stages that allowed new insights to emerge. The aim of the thesis was not to become too theoretical and so abstracted from the data that the day-to-day grim reality was lost in a conceptual discussion. One of the main findings of this research is that homelessness is complex and its triggers and solutions are many and varied; it would have been counterproductive to continue analysis and coding and to condense and theorize the issues into patterns and stereotypes. This would have rendered the data meaningless in this context. The systematic use of layers of codes cross-checking the texts meant that the findings can be considered to be robust.

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14 Atlas/ti version 0.4.

Table 5.2 Coding system

Coding stage		Examples of codes	Description and use
Stage 1	Specific variables (attached to whole documents)	Age, gender, nationality, current housing status	Systematically comparing, for example, men with women or age groups
Stage 2	Thematic coding	Route in, slept rough	Broad categories that break the information into segments; act as filters, for example all coded information relating to routes in can be analysed
Stage 3	Coding paradigm/ heuristic concepts (applied to text)	Social class, kinship networks, institutionalization	Using existing theoretical concepts to create a skeleton for further analysis
Stage 4	Code categories or indexing	Education: qualifications, Hostel: conditions, crass comments by officials	Open codes (derived from common-sense knowledge) and in vivo codes (used by interviewees). These included subdivision of the initial coding paradigm
	First order constructions	Jungle drums (information passed on the street), homeless people's theories: advice to others	Theories of the members of the culture studied. Usually common-sense knowledge known to its members. Coded using both open and in vivo codes
Stage 5	Typology building (the first stage of theory building)	Positive social networks, negative social networks	Codes were divided into, for example, negative v. positive attitudes or experiences
Stage 6	Concept formation (emerging theories)	Inverse hierarchies, fright and flight, victim–martyr, copy cats	Labelling patterns of behaviour, stereotypes or processes

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Chapter 6

Routes into Homelessness

Most people are never likely to become roofless or homeless. However, a significant minority of people are vulnerable to homelessness, some of whom remain so for a very long time, yet never actually become roofless. Others are not only vulnerable, but do become roofless. This chapter explores the complex nature of homelessness by looking at the factors that trigger rooflessness and protect against it. Current literature is beginning to discuss the notion of counterbalancing or protecting factors that can delay or prevent rooflessness (e.g. Smith and Ravenhill 2007; Connexions Service National Unit 2001; DTLR 2001b). However, the literature doesn't consider how to artificially stimulate counterbalances and protecting factors when they don't exist in an individual's life.

Photograph 6.1 Homeless in Trafalgar Square
Source: Megan Wilkinson, 1996.

Most of the literature on homelessness is concerned with people's immediate entry into rooflessness – focusing on the last few events or triggers experienced, viewing these as the main cause. Recent literature tries to move away from this oversimplified view of causes, discussing homelessness in terms of housing careers and employment histories.[1] This type of analysis marked a shift away from the traditional overemphasis on individual vulnerabilities and failings.[2] Tracking studies and capture recapture studies are still in their infancy in the UK, but attempt to follow homeless people (once homeless) through that process into resettlement (Green et al. 2001; Fisher et al. 1994).[3] Work has also begun on episodic rooflessness, e.g. May's (2000) structuralist analysis.[4]

Rosengard (2002), Anderson and Tulloch (2000) and Fitzpatrick (2000) explore the use of pathway analysis to understand people's routes into and through homelessness.[5] This Scottish contingent attempted to create a set of simple trajectories to explain the complex routes homeless people take into housing. If homelessness were simply a housing or employment issue, then May and the Scottish contingent succeed in offering an explanation of the structural aspects of homelessness and their impact on the individual. However, homelessness is far more complex than simple binary structural problems.

UK literature makes an attempt at understanding this complexity from roofless individuals' perspectives; however, it tends to focus on the more immediate concerns and skims over the past (e.g. Alexander and Ruggieri 1998; Jones 1999). A limited literature exists that itemizes some of the deeper causal factors (Bruchey 2001;[6] Randall and Brown 1999b; Havell 2001), but this is predominantly survey research.[7] There are limited European qualitative studies examining people's trajectories into homelessness (e.g. Doorn 2002; Chamberlayne et al. 2002). Despite the recognition that current responses to homelessness have proved inadequate in both tackling the existing problem and preventing it, there is no thorough consideration of the deeper underlying causes of rooflessness. Until the causes are understood, there is no way of understanding how to prevent or deal with it. The research aims to look at just how far back the causal trajectories can be traced and how the accumulation of triggers over considerable time predisposes some people to extreme vulnerability to rooflessness or considerable periods of episodic rooflessness.

To create a picture of the homeless process, route-maps were constructed to give an idea of the series of chronological events that interviewees identified or

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1   Rosengard (2002); Chamberlain (2001); May (2000); Anderson and Tulloch (2000); Pavialin et al. (1993).

2   For example Cockersell (2006); Muñoz et al. (2003b); May (2000).

3   For European longitudinal research see www.cuhp.org/copenhagen.cfm.

4   The impact of poverty on housing and employment, to account for episodic rooflessness.

5   See EUROCITIES (2006) for European and Timmer et al. (1994) for an American pathway analysis.

6   Deeper USA causal factors.

7   For survey style research in Europe see Marpsat (2003b); also www.cuhp.org/madrid_workshop.cfm for discussions on Denmark, France, Hungary, Italy, Spain and The Netherlands.

perceived as the causes of their homelessness and the decisions they made en route.[8] The approximate age of the individual at the side of the sequence of events gives an idea of the length of time the homeless process was evolving and an idea of when in history trigger events (or periods) were taking place. This in turn gives an indication of the prevailing social policies and available help at that time. The route-maps were piloted in Ravenhill (2000b) and a number of seminars held based on that research to gauge their clarity and readability. The commissioner of that research wrote:

> The route-maps of the 14 case studies will make compelling reading for those working in the social policy field. They indicate that more could have been done during childhood, adolescence and early adulthood to prevent the slide into homelessness that these individuals went through. (Ravenhill 2000b, 4)
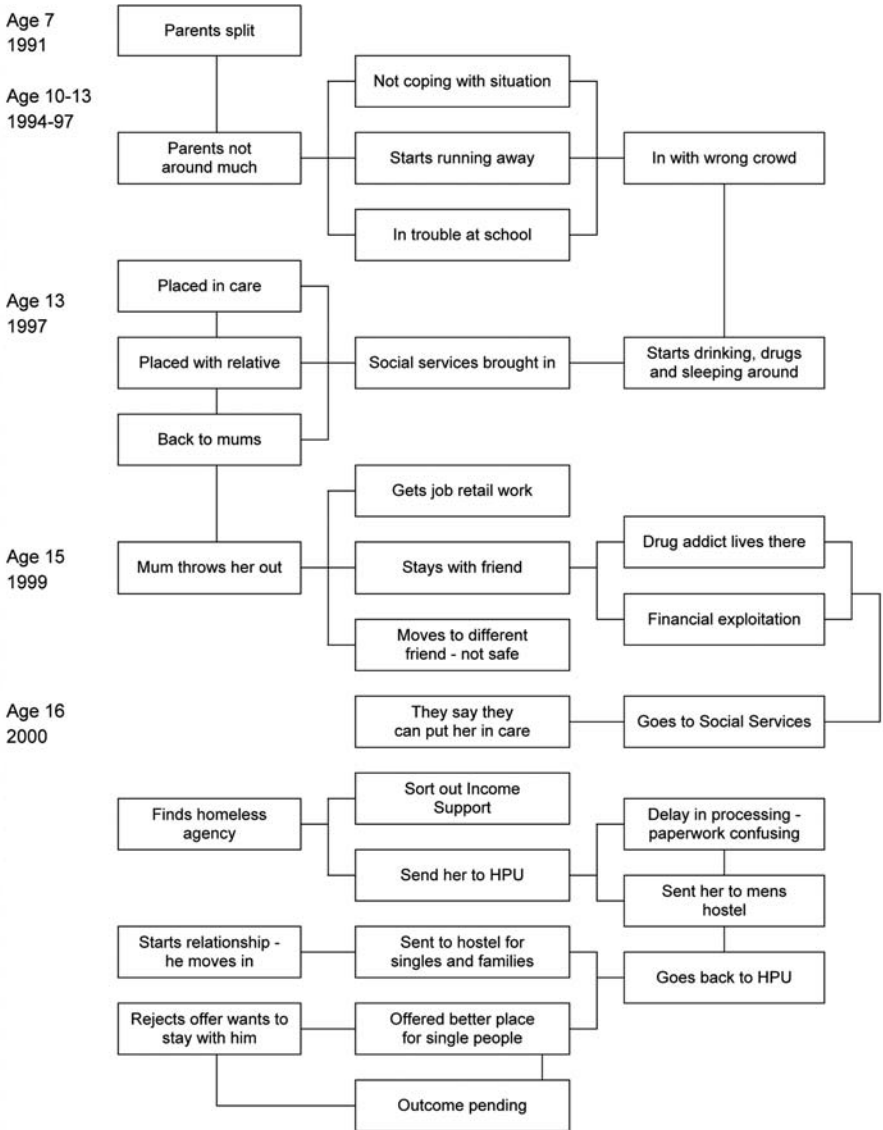
The route-maps are only intended as a brief summary of the individual's life. What cannot be represented is any emotional trauma, stress and anxiety that surrounded specific events. Instead, this has been demonstrated in the analysis through quotes from the actual interviews.

By including a sense of time it becomes evident that rooflessness is a process, rather than a single one-off event, and that this process begins considerably earlier than existing studies suggest. Once this is recognized and accepted, it facilitates the breakdown of that process into stages at which that process accelerates, the types of events or pressures that cause that acceleration and the different types of intervention or support that would be the most beneficial. The historical perspective also offers an indication of the success or failure of current and past social policies on family, homelessness and housing. It is important to recognize that current rooflessness must be considered as a product of the past. Only in that context can we interpret the failure of structural factors (e.g. hostel access, leaving institutions), the way homelessness has been perceived and constructed as a social problem (homeless policy) and the way the individual has responded within the framework of both structure and policy.

The route-maps demonstrate the complex interrelated circumstances that lead to homelessness. The importance of time and the age that a person first experienced homelessness becomes evident. For some people, their route is relatively simple (Melanie's route-map) while other routes are far more complex (Tessa's route-map). Generally, the complexity of the route is dependent on age, with younger people following a simpler route and older people (especially the long-term episodic roofless) having highly complex routes.

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8 Route-maps were subsequently successfully used in a small study by Baker (2001a) to explore 24 possible causes of homelessness.

Melanie's route-map: Age 16, born 1984

Age 7 1991	Parents split
Age 10-13 1994-97	Parents not around much → Not coping with situation / Starts running away / In trouble at school → In with wrong crowd
Age 13 1997	Placed in care → Placed with relative → Social services brought in → Starts drinking, drugs and sleeping around → Back to mums
Age 15 1999	Mum throws her out → Gets job retail work / Stays with friend / Moves to different friend - not safe → Drug addict lives there / Financial exploitation
Age 16 2000	They say they can put her in care → Goes to Social Services

Finds homeless agency → Sort out Income Support / Send her to HPU → Delay in processing - paperwork confusing → Sent her to mens hostel

Starts relationship - he moves in → Sent to hostel for singles and families → Goes back to HPU

Rejects offer wants to stay with him → Offered better place for single people → Outcome pending

Tessa's route-map: Age 36, born 1964

Age 5-10 1969-74	Parents both disabled	Witnesses domestic violence	Parents kept splitting up and getting back together
		Keeps going into voluntary care	Unhappy at home - not coping
Age 11 1975	Interfered with by family friend	Starts running away from home	Leaves school
Age 13 1977	Leaves home, sleeps rough	In with wrong crowd involved in crime	Sent to youth detention centre
Age 16 1980	Starts taking drugs / Enters prostitution	Sleeps rough	Leaves youth detention centre
Age 17-18 1981-82	Has baby	Social services find her a flat	Drug habit worsens
Age 21 1985	Sleeps rough drug use increases	Child taken into care	Rent arrears - evicted
Age 22 1986	Still prostitute, has baby	Social services find her temporary housing	Given permanent flat
Age 23/4 1987-88	Gave up on life evicted - arrears	Child abused - taken into care	Partner moves in - both on heroin
	Sleeps rough	Placed in rehab mother and baby unit	Baby taken into care
Age 27 1991	Still prostitute, has baby	Carries on using drugs	Social services house her
Age 28 1992		Moves in with pimp	Evicted for rent arrears
Age 32 1996	Stops prostitution, leaves pimp	Moves in with male acquaintance	He beats her she moves out and sleeps rough
Age 34 1998	Housed in temporary flat	Sent to HPU	Hospitalized - drug related illnesses
Age 36 2000	Offered permanent bedsit	Very unhappy with the offer	Outcome pending

Looking at Melanie and Tessa's route-maps, it is important to note that the first event perceived by the interviewees as contributing to their homelessness began before age 10. By age 10, both note they remember finding it difficult to cope with the situation and both start running away from home. It is worth noting that Melanie, though 16, is already within the hostel system, but exceptionally vulnerable because of the type of hostel she has been placed in. Tessa first became roofless in the late 1970s/early 1980s, before the Rough Sleepers Initiative began to seriously tackle homelessness. Early intervention may have prevented her from joining the drug, prostitution and homeless cultures.

Early intervention, had it existed, may have prevented long-term episodic rooflessness for most of those who first became roofless at or before age 16. It is possible to list clear predictor factors that show those young people at risk of homelessness (Table 6.1).[9]

Table 6.1 Predictor factors and reactions indicating those children and young people at risk of homelessness

Predictor factors	Predictor reactions
• Frequently moving house/ changing school • Time in care/leaving institutions • Child abuse • Weak social networks • Running away from home • Leaving home early at or before age 16 • Family conflict • Parents' relationship breakdown • Step-parent joins family (especially for older young people and boys) • Domestic violence in the home • Personal accounts of traumatic events • Long-term precarious housing • Being bullied • Truanting	• Sudden change in behaviour (angry/ violent or quiet/withdrawn) • Social isolation (no friends, inability to make friends or self-isolation) • Depression • Self-harming • Onset of mental illness • Increased substance abuse • Inability to cope (with life)

Little research has been done on predictor factors in England. In the USA, Koegal et al. (1995) and later Booth et al. (2002) have looked at risk factors using psychology and the diagnostic interview schedule. Based on this work, Bruegal and Smith (1999) were able to look at risk factors among young people in England. Table 6.1 shows that there are clear factors or events occurring during childhood that are common to homeless people. This suggests that these are predictors of those people most

9   Ravenhill and Smith (2005); see also Table 6.2 (Chapter 6) and Table 9.2 (Chapter 9).

likely to be at risk of homelessness. Furthermore, where people are not in a position to know what is happening in a child's life, it is evident that there are still clear indications that something is happening which is causing the child distress; these are usually obvious by the child's behaviour, or changes in behaviour (see Table 9.2, Chapter 9).

The importance lies not with the predictors of homelessness, but the accumulation of triggers over time. For those in this study, there was an average of nine years between triggers starting and homelessness finally occurring. Many of these triggers began in childhood. Childhood is mentioned in some of the literature looking at youth homelessness, establishing child abuse and time in care as strong triggers. However, there is no systematic look at childhood factors that predispose people to rooflessness in UK literature.[10] The research aims to show that it is important to look at the childhoods of roofless people and that the routes of homelessness for many begin there. It is no longer sufficient to simply conclude that roofless people had bad childhoods, as this glosses over the reality of the situation. It is not the actual events that are important; it is the impact of these events and other people's reactions (or lack of action) to these events that converts them into triggers of rooflessness.

For example, frequently changing home address during childhood appears insignificant as a trigger of homelessness, despite being a common feature of the life stories. However, it can cause a loss of stability, social networks and close links with kin (Illustration 6.1). Such frequent disruptions over a prolonged period of time can affect the child's ability to form relationships, and create the social networks that have been identified as important protecting factors that prevent rooflessness and homelessness (Connexions Service National Unit 2001; DTLR 2001b; Ravenhill 2003, 2000b).

Illustration 6.1 Consequences of frequently changing address

Such instability may cause deeper ontological problems, leaving the child feeling 'home'-less and insecure:

'I'd been in care from age 4 to 13. I've been in children's homes and from age 8–11 I was in six different foster homes. Most of the foster homes were temporary … that meant that

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10 See Koegal et al. (1995) and Booth et al. (2002) for American examples.

I had to keep changing schools, I was never in a school long enough to make good friends and get into a routine.' (Anita, female, aged 20; hostel)

In this example, there had been early intervention. The problem was its value. The intervention was designed to resolve one set of problems but inadvertently increased the young person's vulnerability to rooflessness. Thus early intervention, though of value, can be negated by the type or quality of the intervention or by the lack of follow-on support and assistance.[11]

The problem is compounded when frequently changing home address is associated with other factors, for example change of area or school, parents separating, time in care or parent in the forces. Moving house frequently is stressful for anyone, but when combined with these other factors, its impact is augmented. For example, children of armed forces personnel seemed over-represented in the interviews, frequently changing home address; the absent parent and institutional way of life appeared to have had a profound impact on their identity, confidence and the strength of their social networks and kinship ties as adults.

Interviews with people who were never homeless, but frequently changed home address during childhood, highlighted the potentially far-reaching impact this can have in adulthood. People experienced difficulty settling down, making long-term friendships and tended to continue to move frequently, preferring to live in more insecure forms of tenure. They preferred superficial friendships, allowing them to cut off ties more easily. A combination of insecure accommodation and weak social networks left them vulnerable to homelessness – a vulnerability that helps to explain why once roofless, some people experience episodic rooflessness for considerable periods of time (even 20-plus years). This is one of a number of indications that childhood experiences and events can have an impact across the life-course. It indicates that some seemingly insignificant factors can have important policy implications, for example, concerning the way accommodation is dealt with for both children in care and families in temporary accommodation. There are also implications concerning the role of the current employment market and globalization: both may subject individuals and families to high levels of geographic mobility. This can cause problems for both the adults and children. Already the combination of geographical mobility and the current housing market has created white-collar nomads (Clark 2002) and homeless low-paid workers (construction workers, hotel staff (Matthewman and Read 2002)).

The above example shows the complexity of the impact of seemingly small events. A minority of children, those most vulnerable to rooflessness, experience hugely traumatic events or periods of time. The term 'traumatic life events' is used to refer to events and experiences identified by roofless people themselves as traumatic or described in such a way as to indicate that they were traumatic. Many traumatic events are discussed individually in the literature, e.g. child abuse (e.g. Randall and Brown 1996). However, here the term is used to include events that are much rarer and not easily quantified (for example, bullying, alcoholic parent, death of a close relative, or parent's or sibling's serious illness). A consideration of these events is

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11 A kind of palimpsest.

important. The impact of trauma on the developing child affects the way they perceive themselves and their world (McIntee and Crompton 1997) – perceptions that are carried into adult life and affect their long-term ontological security.[12] It was apparent from the interviews that trauma affected coping mechanisms, self-esteem, the ability to form relationships and decision-making and it was these factors that transformed events into triggers for children who lacked the 'safe' positive environment known to counterbalance the impact of trauma (e.g. McIntee and Crompton 1997).

At times, events were so traumatic that roofless and homeless adults experienced flashbacks, terror and depression as a result (Ravenhill 2000b). These are all symptoms of 'post-traumatic stress disorder' (or PTSD). Twenty-three per cent of roofless people suffer post-traumatic stress disorder (Cockersell 2006). Interviewees described incidents where seemingly unrelated events triggered flashback memories of trauma that came without warning and left them fearful of their own memories. There were accounts of periods of severe flashbacks that triggered suicide attempts or self-harming. Alcohol or drugs were used to control the flashbacks:

> 'It is horrendous for me to cope with now, as a 14-year-old what chance did I have? I still have painful memories that flood back but that is getting better, it is slowing down now.' (Stephen, male, aged 40; housed four years)

Symptoms of PTSD are best treated with counselling. However, access to such counselling is often via the mental health system, which as we know from Goffman's work (1961; 1968) can label people and interfere further with self-perceptions. In addition, the usual three- to six-month waiting list for free counselling and lottery for quality deters people from seeking help. Likewise, the inability or difficulty in changing counsellor if personality clashes exist also deters people from seeking help. Drink, drugs, self-harming and suicide attempts are readily available coping mechanisms – strategies that are a common part of PTSD.

The most difficult, common and traumatic event to recover from is abuse. Here child abuse refers to sexual, physical and emotional abuse, with sexual abuse the most common among interviewees:

> 'My stepfather used to take my sister and me to my uncle's. My uncle and his friends would sexually abuse both of us. This went on for years until I was in my 20s. By then it was rape. My stepfather knew and still took us round to my uncle's or let my uncle into our house to look after us while he and mum went on holiday.' (Alex, male, aged 35; rough sleeper)

> 'My stepmother would climb into bed with me or invite me into hers to cuddle me if my father'd beaten me. When I woke up in the morning she had sex with me. This went on for years until I was 16. While she was having sex she would shout, 'Fuck me, Charlie, fuck me!' Her father was called Charlie and he used to sexually abuse her.' (Stephen, male, aged 40; housed four years)

> 'My father was a very violent man. He threw me down the stairs regularly, punched and kicked me. I was thrown through a glass door once. At various times he broke my ribs, my

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12 Also HCH (2003); Terr (1990); Winnicott (1960).

wrist four times, I had concussion and was hospitalized once … He used to punish me if my sisters did anything wrong.' (Stephen, male, aged 40; housed four years)

'I was on the child protection list, mum and dad used to hit me, not hard. I think I deserved it … If my dad saw me in the street he would slap me and beat me in front of my friends. I know I was bad and deserved it, but in front of my friends! He made my mouth bleed one time and broke my brace in my mouth.' (Melanie, female, aged 16; hostel)

The nature of abuse means that it not only has an impact at the time, but that impact is often permanent, affecting the individual's capacity to trust, form lasting relationships and relate to peers, adults and people in authority (Richardson and Bacon 2003; Bruchey 2001). Abuse is linked to low self-worth, distorted self-image, episodes of running away, leaving home early or in an unplanned way, domestic violence, self-harming, PTSD and time in care (see Diagram 6.1). Although current social policy means that there is greater awareness of the need to prevent, intervene and minimize the harm of abuse, it still exists. Moreover, many of the long-term entrenched roofless grew up before such policies existed. Treating homelessness as a housing issue for such people ignores the pain and long-term impact of abuse. Failure to recognize this results in the use of alternative coping strategies designed to anaesthetize the emotions, but which lock the individual into addiction, the homeless culture and cycles of episodic rooflessness.

If we are serious about helping such people, then we need to look again at existing facilities, as dealing with the aftermath of abuse is complex, time-consuming and fraught with dangers. At times, speaking about the abuse brought back memories, suicidal feelings, bouts of depression and/or violent, angry outbursts. However, people also wanted to tell their story as a cathartic form of exorcizing the ghosts and confirming with others or reaffirming that what happened to them was as bad as they felt it was. 'This is really good therapy, its good to talk about it sometimes' (Mark, male, aged 28; roofless three and a half years, housed four years). The cathartic storytelling appeared to be a by-product of considerable time spent in counselling or within the psychiatric system; it was such an everyday part of their lives that they appeared numb to the impact their story may have on others. As a consequence, it became a barrier, making it increasingly difficult for them to communicate with and form friendships with people who did not have the same type of traumatic experiences.

The incidence of child abuse and its impact on adult life demonstrates the profound long-term impact that traumatic experiences can have. Such experiences appear to affect almost every aspect of the individual's emotional and social life, which may lead to some people withdrawing to the margins of society or being pushed out of mainstream society because they do not fit the 'norm'. Once on the periphery of society, there are fewer ties that bind them into that society and prevent rooflessness.
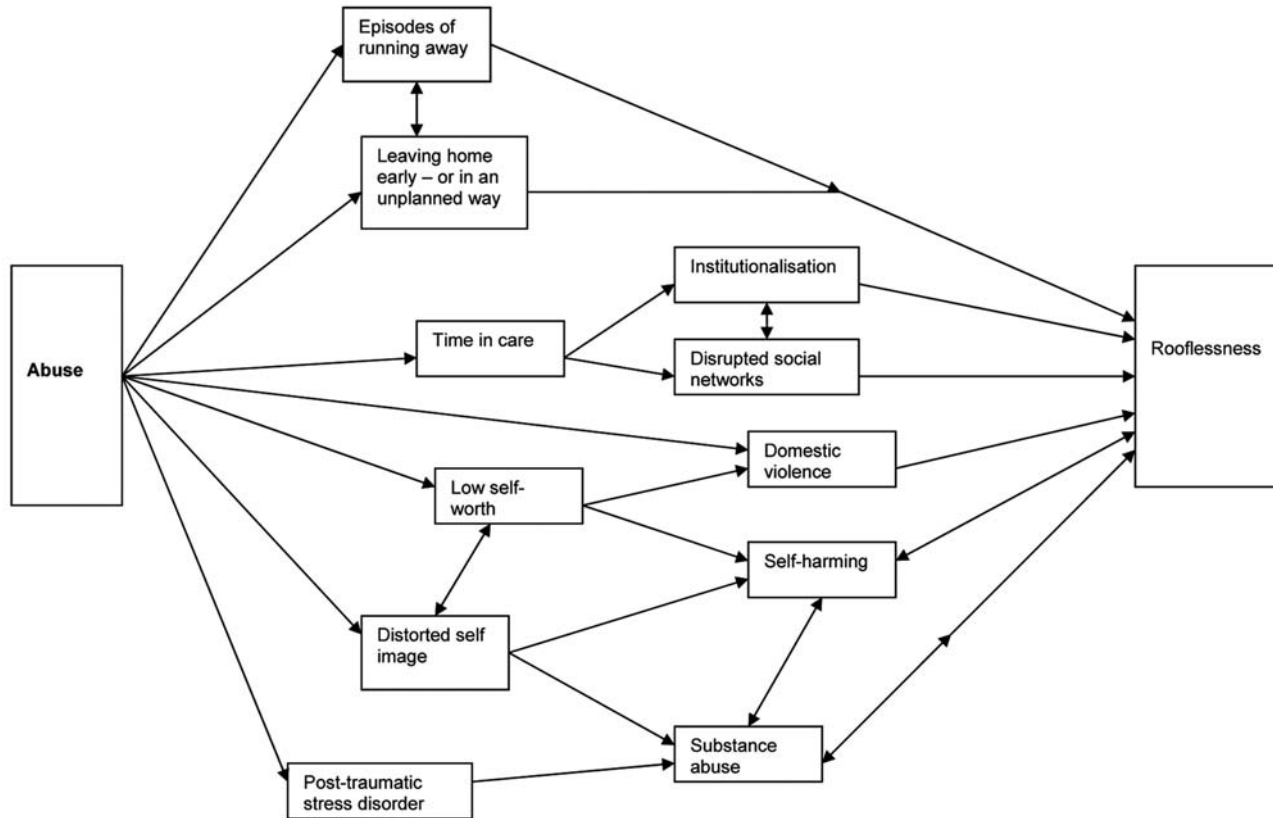
Diagram 6.1 Consequences of child abuse: Associated triggers

From the interviews, there were other seemingly less traumatic events that have a similar impact. For example, being bullied can feel like abuse and has a similar impact on the child that goes on to affect them as adults, e.g. being bullied at work. Bullied people were over-represented among the long-term roofless. The importance of bullying has only begun to be understood and accepted since the late 1990s. What is apparent is that it weakens and inhibits the individual's coping mechanisms and social networks, factors that are necessary to protect against both bullying and rooflessness:

> 'At secondary school I was bullied, spat on, teased and hit regularly. This affected me so badly, I nearly had a nervous breakdown. The doctor signed a letter for me to leave school at 15 so I didn't have to suffer anymore.' (Aileen, female, aged 39; hostel and long-term rough sleeper)

The nature of rooflessness means that people have rarely experienced just one trigger, but multiple triggers. What tends not to be considered is the relevance of so many triggers occurring during childhood, the significance of experiencing three or more triggers in quick succession and the long-term impact of this.
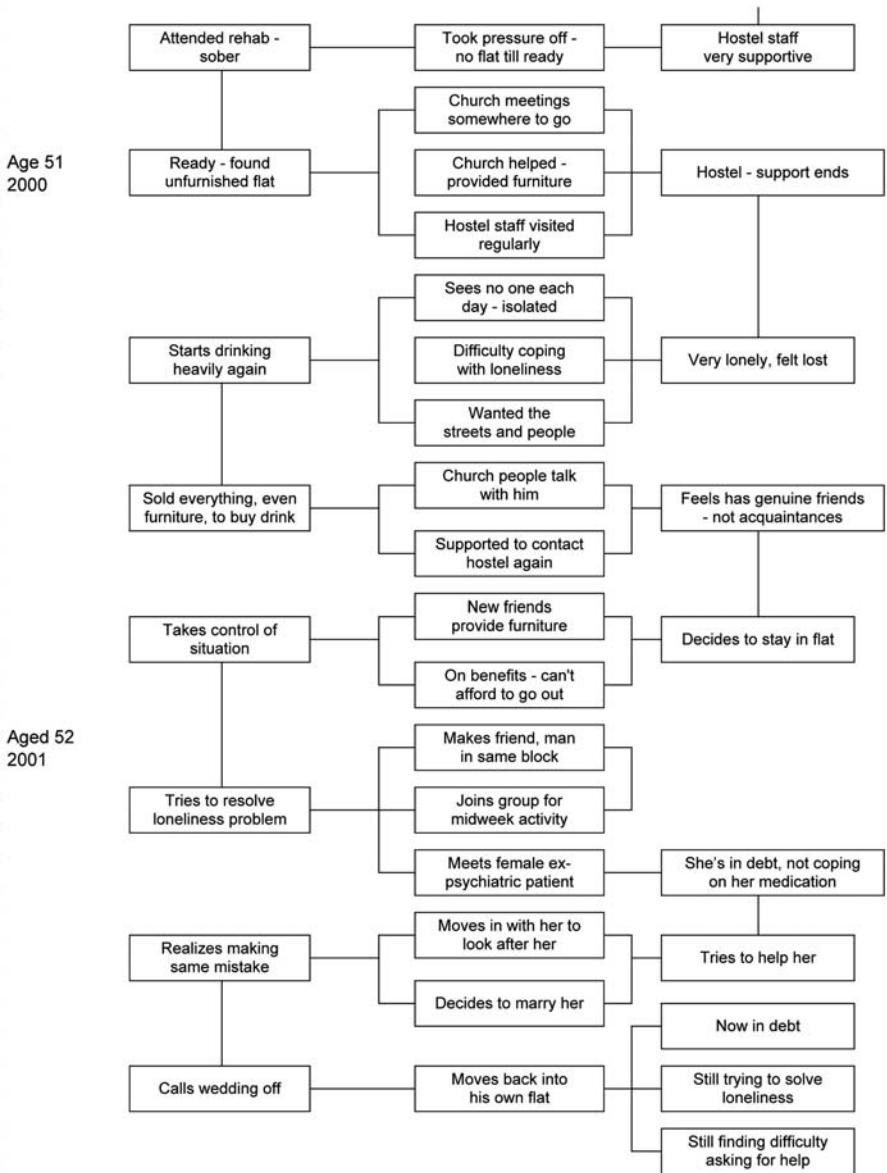
Ian and Foxy's route-maps are far more complex than the first two. They show the entire route into, through and out of rooflessness to date. For both of these men, problems began in early childhood, age 6 or before. They experienced three and six traumatic life events respectively between the ages of 6 and 15. At this point they became either homeless or roofless. The emotional traumas experienced, the instability of the family and home gradually built.[13] For Foxy, this resulted in angry conflicts at school, which further exacerbated the situation. This demonstrates that it isn't simply the events, but the way they are handled and the way individuals' reactions to events are dealt with that augments the initial traumas and turmoil making them into triggers of rooflessness. Such events would have been further exacerbated had there been other issues such as sexuality or race involved here too.
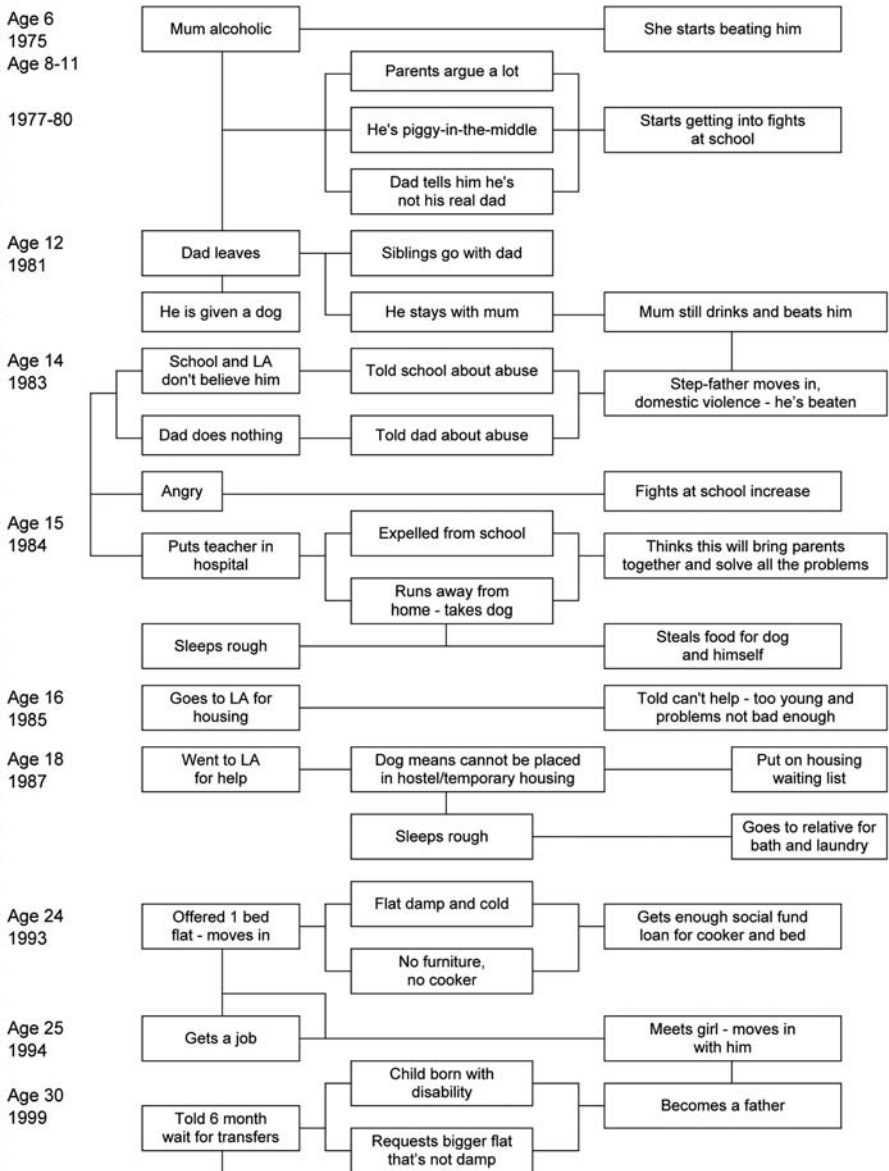

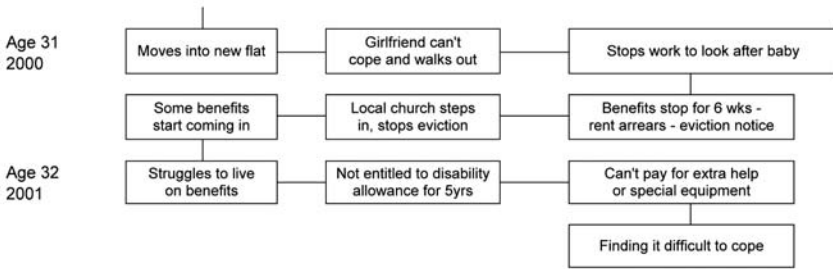13 Also HCH (2003).

Ian's route-map: Age 52, born 1949

Age 0-6 **1949-55**	Father alcoholic	
	Long time in hospital	Problems walking
Age 6 **1955**	Parents died	Shipped around the family
Age 14 **1963**		Drifting → Stayed with friends, family or on streets
Age 17-33 **1966-82**	Became homeless, travels country	Slept rough and in hostels
		Alcoholic - kept being hospitalized → Criminal record - drink related
		In and out of detox and rehab units
Age 34-47 **1983-96**	In hostel met woman substance abuser	Move out - live together → He is still drinking, woman becomes alcoholic
	Couldn't cope with	Her alcoholism
		Her vulnerability and dependence → Split after 13 years together
		Responsibility, i.e. finance, cleaning
Age 47 **1996**	Discharged - went to town centre	Hospitalized for some time → Took overdose
	Police send him to night-shelter	Depressed, drinking, didn't care → Used night-shelter for a long time
Age 49 **1998**	Offered hostel place	Thought about it for a long time → Decided to try it
	Afraid of mentally ill and substance users	Not coping with other peoples problems
		Scared - difficulty settling-in → Atmosphere relaxed
Age 50 **1999**	Still drinking, but allowed in	Changes hostel - less intimidating
	Ran away to London	Didn't feel ready to cope
		Didn't want the responsibility → Offered flat - scared
		Unable to talk about it
	Slept rough for a week	Went to a night shelter → Encouraged to go back to town

Ian's route-map: continued

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Attended rehab -          Took pressure off -         Hostel staff
      sober                 no flat till ready       very supportive

                          Church meetings
                          somewhere to go

Age 51    Ready - found    Church helped -           Hostel - support ends
2000      unfurnished flat  provided furniture

                          Hostel staff visited
                          regularly

                          Sees no one each
                          day - isolated

       Starts drinking     Difficulty coping         Very lonely, felt lost
       heavily again       with loneliness

                          Wanted the
                          streets and people

                          Church people talk
                          with him

    Sold everything, even                            Feels has genuine friends
    furniture, to buy drink                          - not acquaintances
                          Supported to contact
                          hostel again

                          New friends
                          provide furniture

      Takes control of                               Decides to stay in flat
      situation
                          On benefits - can't
                          afford to go out

                          Makes friend, man
                          in same block

Aged 52   Tries to resolve   Joins group for
2001      loneliness problem  midweek activity

                          Meets female ex-           She's in debt, not coping
                          psychiatric patient        on her medication

                          Moves in with her to
                          look after her

      Realizes making                                Tries to help her
      same mistake
                          Decides to marry her

                                                     Now in debt

      Calls wedding off    Moves back into           Still trying to solve
                           his own flat              loneliness

                                                     Still finding difficulty
                                                     asking for help
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Foxy's route-map: Age 32, born 1969

Age	Year	Events
Age 6	1975	Mum alcoholic — She starts beating him
Age 8-11	1977-80	Parents argue a lot; He's piggy-in-the-middle — Starts getting into fights at school; Dad tells him he's not his real dad
Age 12	1981	Dad leaves — Siblings go with dad; He is given a dog — He stays with mum — Mum still drinks and beats him
Age 14	1983	School and LA don't believe him — Told school about abuse — Step-father moves in, domestic violence - he's beaten; Dad does nothing — Told dad about abuse
Age 15	1984	Angry — Fights at school increase; Puts teacher in hospital — Expelled from school — Thinks this will bring parents together and solve all the problems; Runs away from home - takes dog; Sleeps rough — Steals food for dog and himself
Age 16	1985	Goes to LA for housing — Told can't help - too young and problems not bad enough
Age 18	1987	Went to LA for help — Dog means cannot be placed in hostel/temporary housing — Put on housing waiting list; Sleeps rough — Goes to relative for bath and laundry
Age 24	1993	Offered 1 bed flat - moves in — Flat damp and cold; No furniture, no cooker — Gets enough social fund loan for cooker and bed
Age 25	1994	Gets a job — Meets girl - moves in with him
Age 30	1999	Child born with disability — Becomes a father; Told 6 month wait for transfers; Requests bigger flat that's not damp

Foxy's route-map: continued

Note: LA = Local Authority   HA = Housing Association

The impact of traumatic life events should never be underestimated. Ian's route-map shows that the death of parents (or siblings) during childhood has a profound, life-changing impact that leaves the child vulnerable:

> 'I lost my parents when I was 6. I was shipped from brother to brother. I just drifted into homelessness.' (Ian, male, aged 52; housed one year)

> 'I lost my mum when I was 8 years old. Dad got a new partner and I fell apart. They just kept sending me off to boarding school. I met an older feller and lived with him for nearly 4 and a half years. I moved in with him when I was nearly 15. He used to beat me. He drank, so I drank, but I used to be beaten. It took me a long time but I ran away from him …' (Heather, female, aged 19; hostel resident)

Trauma rarely happens within a vacuum. It is not unusual for the child to react through disruptive or angry behaviour at school, running away from home, arguments in the home, involvement in crime, depression, stress-related illnesses or feelings of isolation and loneliness (Halpenny 2001; Rafferty and Shinn 1991). This in turn causes immense pressure on relationships within the family, in care or at school. Research shows that young people frequently need a pressure valve during periods of high stress, especially when accompanied by hormonal changes and the identity crisis associated with teenage years. This is further exacerbated by teenagers' inability to communicate and feelings of being 'locked up' inside themselves (Smith and Ravenhill 2007).

   Foxy experienced a 'pseudo' death, in that his parents separated and he lost his father and with it part of his self-identity (one of Mead's (1934) or Goffman's (1974) roles, that helped him place himself in his world). The sudden shock of finding out that your parents and/or family are not related to you in the way you always thought they were is difficult for anyone to cope with. It causes a sudden rupture of ontological security and loss of identity that may have a life-long impact:

> 'When I was 15 I found out that Ian, who I thought was some kind of cousin once removed, was actually my brother. This came as a big shock; I was only told after I got off with him … it was a shock to find out he was my brother and that really fucked me up.' (Debs, female, aged 28; hostel, long-term homeless)

'When I was in my teens I was told that someone I thought was an uncle, who kept visiting me and taking me out, was actually my father. I was angry when I found out and angry about the way I found out.' (John, male, aged 52; housed 12 years)

'My parents were arguing all the time and I was piggy in the middle. Then dad told me one day he was not my dad. I ran away from home. I was about 15 or 16 at the time.' (Foxy, male, aged 32; housed eight years)

The impact of parental separation on children has, until recently, been underestimated. Research has linked parental separation with clinical depression in under four-year-olds (*Guardian* 2002). Parental separation is a common experience in today's society. It is also a strong feature of youth homelessness (Smith et al. 1998). The literature highlights the impact of step-parents on the incidence of rooflessness, especially for young males. However, it isn't parental separation *per se* that becomes the problem, but the conflict within the home before and during an acrimonious divorce or when a step-parent enters:

'When I was 6 or 7 mum found out dad had been having loads of affairs. I heard all the arguments. They split. I stayed with mum. Dad remarried. I got a lot of shit put in my head by his wife, she sent sick letters to mum. Mum showed the police the letters. They said they had never seen anything so awful. There were horrid words and pictures on posters she'd made. My teachers were helpful, they did try, they offered me to go in three days a week. I had a bad attitude. I was a bit mad. I had a bad temper and I'd fight and cry. I was just trying to let the anger out. Looking back now I'm shocked at my behaviour. It was home problems that affected me so bad. The split between mum and dad made me piggy in the middle. Because of that I wasn't staying home a lot, I would go to friends' houses. In the end she [mum] threw me out.' (Melanie, female, aged 16; hostel)

There is literature on the long-term impact of parental separation during childhood on the individual, though not related to homelessness (CASE 2001). Children with separated parents were more likely to divorce. Emotional problems stemming from early childhood experiences were also triggers of divorce (CASE 2001). This is another example of childhood trauma going on to affect adult behaviour. It also introduces an intergenerational element to the debate.

There is little mention in existing literature of either inter- or intra-generational[14] homelessness in England.[15] However, there are a number of both inter- and intra-generational elements that are inextricably linked with rooflessness. For example, intergenerational triggers were alcoholism, time in care, abuse, domestic violence, violence, frequently changing home address and homelessness. Evidence in Smith and Ravenhill (2007) of more than one sibling (or cousin) becoming homeless suggested that intra-generational rooflessness existed. Once roofless or homeless, one sibling often taught the other how to survive and how to get access to accommodation:

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14 Intergenerational being down the family line, e.g. father to son. Intra-generational being across family lines, e.g. brother to sister.

15 Jackson (2000) discusses this in relation to USA homelessness.

'Looking back in my family history, all my family have been homeless, you know transient people. Someone always lived in a cave so to speak.' (Mary, female, aged 55; temporary accommodation)

This is an important finding that needs further investigation. It suggests that where trigger factors exist and are not dealt with, they can be transmitted down the generations (intergenerational) and within families (intra-generational). It also suggests a need for tackling social problems within society and the family regardless of whether they trigger rooflessness for that individual. More support is needed for families to deal with problems and learn new coping strategies (Asmussen et al. 2007; DfES 2006a; NFPI 2006).

There is a need for greater awareness of the immense pressure placed on some children as they grapple with adult problems and issues during their formative years. For example, there appeared to be a disproportionate number of people with an alcoholic parent during childhood among the interviewees. In Smith and Ravenhill (2007), there was an over-representation of drug-addicted parents. We know that addiction is a family problem, as the nature of alcoholism means that the rest of the family are unavoidably affected (www.al-anon.org). See Diagram 6.2.

An addicted parent also increases the likelihood of violence and child abuse occurring within the home. Al-anon identify a number of problems that teenagers with alcoholic parents experience and carry through to adulthood. These include problems with trust, self-esteem and self-worth, fear of authority figures, criticism, or confrontational situations; plus problems with forming relationships and expressing emotions (www.al-anon.org). They were also more likely to enter into relationships with alcoholic or domestic violent partners. This is a good example of multiple triggers, with one trigger causing or being associated with other triggers of rooflessness and thereby increasing the potency of all those triggers:

'I still see my dad. He is not with my mum. She's an alcoholic and beat me from the age of 6. That's why they split up.' (Foxy, male, aged 32; housed eight years)

'The atmosphere in the family was not a relaxed atmosphere because my stepfather was an alcoholic. He was not violent, but was verbally not nice to everybody.' (Chris, male, aged 30; housed five months)
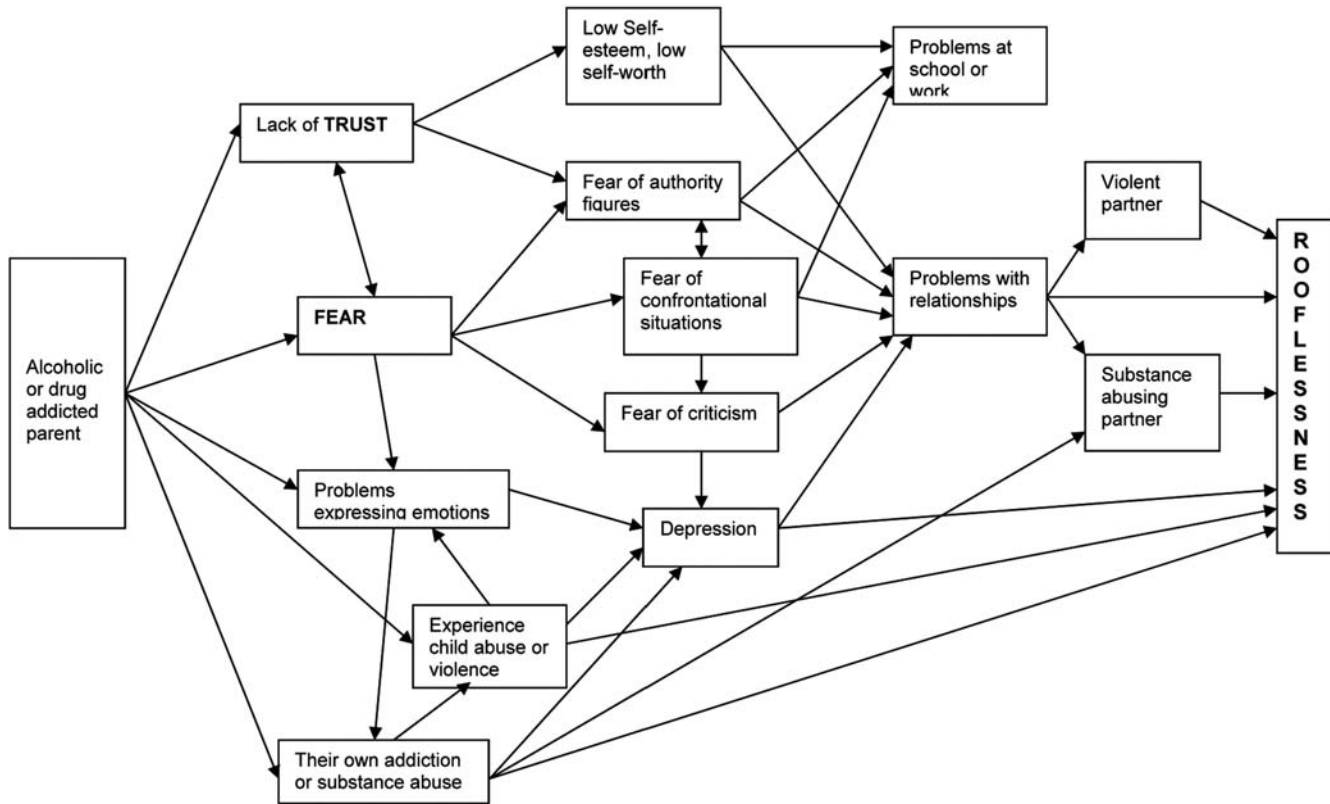
Diagram 6.2 Impact of substance abusing parents on rooflessness

Another family factor overlooked within the homeless literature, but associated with multiple triggers of rooflessness, is that of children witnessing domestic violence. Children who did so experienced similar problems to those of children with alcoholic parents, with the addition of PTSD symptoms. They also appeared to be more likely to form relationships with one or more violent partners or become the violent partner. More disturbingly, there seemed to be an anaesthetizing effect from early experiences of violence that reduced the fear of aggression and violence on the streets, thus making the street feel safe in comparison to home:

> 'Dad would just flip. Anything, nothing would set him off, he'd just see red and start lashing out. Once I tripped and fell downstairs. Dad started shouting at mum, blaming her for me falling. She was crying and saying 'no don't'. He grabbed her hair and dragged her down the stairs and told me it was my fault mum was crying.' (Amy, female, aged 37; housed ten years)

> 'He used to beat my mum up and always shouted round me as a baby. Once he hit mum while she was holding me. Mum thinks that is why I'm as I am now.' (Alex, male, aged 35; rough sleeper)

> 'I didn't get on with mum's boyfriend. He hit her and tried to tell her what to do. I didn't like him, he wasn't going to tell me what to do.' (Sandra, female, aged 16; hostel)

Both addicted and domestic violent parents appeared to acclimatize young people to the homeless culture, making it easier for them to join the culture.[16] Thus when triggers of rooflessness were mounting they were more susceptible to or found it easier to become roofless. Moreover, the impact of these triggers, their accumulation and interaction compounded the problems experienced by people not yet emotionally mature. Thus they may have reacted in an irrational way or made seemingly foolish or bad decisions. Historically this tends to be viewed as personal failings. However, it would appear that such failings are more to do with family influences and learned coping strategies. In addition, society's failure to inform young people about their options or create workable solutions to their problems leaves them with few or no options other than sleeping rough or precarious forms of housing such as friends' houses/floors. This suggests that rather than choosing to be roofless, some teenagers are pushed into it. Rooflessness appears to be the solution to their problems rather than the problem. However, this does not mean that rooflessness occurs swiftly or without a fight. Smith and Ravenhill (2007) identified a number of actions taken by young people before they considered running away, leaving home or actions that could lead to homelessness.[17]

The age at which rooflessness occurs, the individual's early experiences of the homeless culture and the lack of strong positive social networks and other protecting factors (good education, previous employment) appear to determine the degree of difficulty experienced in both avoiding being pushed into rooflessness and leaving it once there.

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16 See Chapter 7.

17 Including talking things through, getting advice, finding a mediator and taking 'cool down time'.

Anita's route-map: Age 20, born 1980

Age 4 1984	Put into care

Age 7 1987 — Parents divorce — Mum gets depressed and starts drinking

Age 8-11 1988-91 — Lives in 6 different foster placements — Plays truant, runs away — Foster home changed — Difficulty making friends

Changes school with each placement

Asks to go home

Age 13 1993 — Parents go to court to get her — Temporary residency order — Lives with mum and step-father — Buries into school work

Court assigns a social worker — Mum alcoholic - loses her job

Age 14 1994 — Keeps quiet - not wanting care again — Step-father sexually abuses her — Intense arguments with mum start

Age 15 1995 — Social worker leaves — Not replaced — Her support ends

Passes GCSEs

Age 16 1996 — Looses contact with dad

Arguments increase, mum kicks her out — Goes to social services — Offer her care placement till 18 — Says no

Goes to HPU — Given list of hostels to telephone — No vacancies

Says no — Invited into prostitution — Sleeps rough with homeless friend — Sleeps on friends floor

They can't help — Goes to London homeless charity

Given bed for 2 weeks — Asks for help — Accidentally finds drop-in night-shelter

Age 17 1997 — Transferred to hostel — No effective key-worker — Evicted for rent arrears — Stays at sisters for 2 weeks

No hostel places — Goes to Housing Advice — Sleeps rough — Thrown out, goes to HPU

Advised to try drop-in day centre

Anita's route-map: continued

Eventually found a hostel place	Doesn't like it. No help/support given	Leaves after 6 months	
Gets live in job	Friends can't stay. Evicted	Moves in with friend in homeless project	
Project place becomes available	Accepted waits for vacancy	Applies to friends project for housing	
Dilemma. Job or secure tenure	Quits job and moves in	Given good key-worker	Life getting sorted

Age 19
1999

Goes to college	Finds out she's pregnant	Pregnancy = automatic eviction from project

Age 20
2000

Key-worker advises her to go to HPU		Ends key-worker support
HPU find mother and baby hostel	No help or support given	Feels bewildered
	Room dirty and infested	Complains, alienates staff — Room changed

Told to go to HPU to change hostels	Requests 2nd room change	No lift, stairs difficult, has asthma
		Heavily pregnant
	GP writes to hostel	GP concerned for her health
Goes to HPU for help	Told to stay - its not for long	Feels helpless, vulnerable, depressed — No support offered
		Outcome pending

Note: HPU = Homeless Persons Unit   HA = Housing Association

The relationship between triggers of rooflessness and the complex nature of family backgrounds and circumstances can be difficult to grapple with. This is complicated further by the realization that the very systems designed to protect young people, on occasions, appear to inadvertently create triggers of rooflessness. For example, those spending time away from the family home during childhood are known to be exceptionally vulnerable to rooflessness, especially care-leavers (Randall and Brown 1993; Anderson et al. 1993). The literature on care-leavers tends to focus on transitions from childhood to adult, leaving home early and institutionalization (Hutson 1997). This ignores the reasons why a child is placed in care.

Anita's route-map shows the impact of family, time in care and rejection by parents on the decisions Anita made that influenced the rest of her life. This demonstrates the need to view time in care in terms of the life-course for its impact to be fully understood. Anita's route-map should be viewed historically in the context of the prevailing social policy at that time. Children rarely stayed with one carer and were likely to experience a series of separations or rejections. It is probable, therefore, that this dulled and numbed the child's emotional response to adults or authoritative figures. Furthermore, care has been shown not to be the safe haven people intended, with children remaining vulnerable to abuse and exploitation both in care homes and foster placements. Simply being in care means that the child is likely to have experienced a number of significant triggers of rooflessness.

The Government recognized the impact of care on adult outcomes and introduced the Quality Protects Programme in 1998 and changed legislation to ensure care-leavers have adequate guidance, assistance, finance and opportunities to make the transition from child to adult and function as a full and equal member of society (Chapter 4). These changes have no effect on those who went through the care system before they were implemented (there are long-term roofless people who were care-leavers and are now aged 40-plus). There is little help available to them now. Society's failure to recognize that social problems need addressing, both retrospectively and for the future, contributes to the continuance of problems such as rooflessness.

The route-maps used so far have demonstrated the need to create a safe, stable home (or home-like) environment for children to grow and develop into adults able to fully function within society. Care not only causes disruption to home life, but also disruption to schooling. School, like home, is a defining part of most children's ontological identity, thus its impact is both profound and far-reaching. Disrupted schooling is over-represented among the roofless. Schooling was disrupted through time in care, parents frequently moving house, illness/parental illness, truancy, bullying or school exclusion. Where disrupted schooling was due to truancy or school exclusion, it would appear that those children were prone to early violence, criminal activity and substance abuse. The interviews suggested truancy was more prevalent than school exclusion, with truancy acting as a coping strategy for dealing with dissatisfaction or other underlying factors. Moreover, disrupted schooling had an unavoidable impact on positive social networks, self-identity, academic achievement and disaffection from mainstream society (see Diagram 6.3).
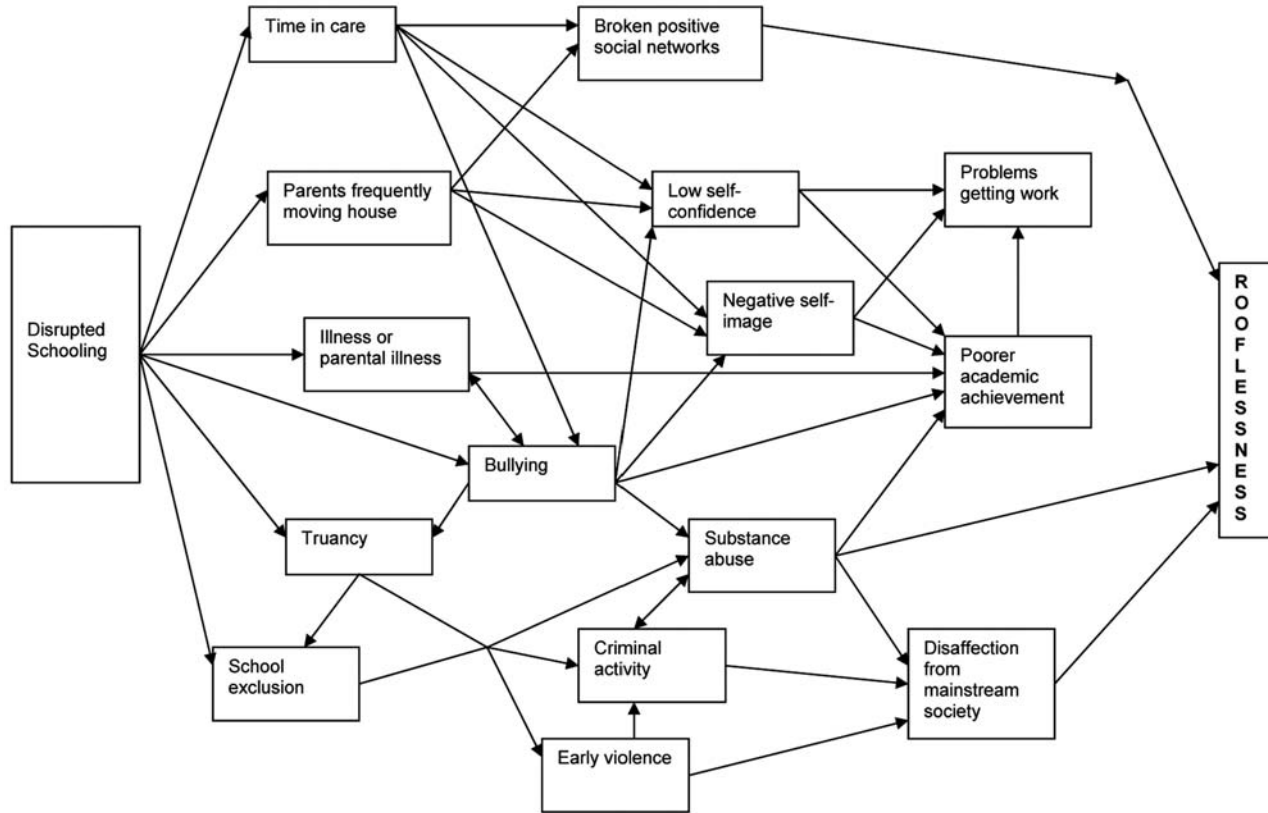
Diagram 6.3 Consequences of disrupted schooling: Associated triggers

The previous examples demonstrate the way that each trigger has multiple impacts and complex web-like interconnections that serve to compound their potency. Children experiencing three or more triggers seem prone to running away from home or leaving home early, especially if one or more trigger is abuse or serious family conflict (80 per cent run away because of family problems (SEU 2001a)). One in nine children have run away from home for at least one night by the age of 16. A quarter of these sleep rough and one in 14 survive through stealing, begging, drug-dealing or prostitution (SEU 2001a). The age a person first sleeps rough has a profound impact on future episodes of roof/homelessness (SEU 2001a; Ravenhill 2000b). Running away from difficult childhood circumstances led to future rooflessness, even when ten or more years elapsed before they became roofless. One of the biggest deterrents to sleeping rough is the fear of sleeping rough. Once a person has slept rough for as little as three days they can become accustomed to the lifestyle and learn how to 'be' homeless and survive: their worst fears are over (Ravenhill 2000a, 2000b). To a certain extent this nullifies that deterring fear and although they may run away and then return home, they are more vulnerable to rooflessness in the future.

Teenagers with a history of running away were more likely to leave home at or before age 16. The likelihood of rooflessness increased if they had repeatedly run away. The younger the person when they left home, the greater the probability that they would have few or no qualifications, be ill-equipped to compete in the labour market, have fewer or no life skills, and have little or no savings. As under 18-year-olds are not legally able to hold a tenancy or automatically entitled to benefits, many averted immediate rooflessness by spending time sofa-surfing, staying with a series of friends or relatives for weeks, months and in a few cases years.[18] There was an average gap of 3¼ years between starting to run away from home and becoming roofless. Thus, it is possible that there is time, were appropriate interventions to exist, to divert these people away from rooflessness. Longer term it points to a need for more support for families with vulnerable teenagers.[19]

In addition to sofa-surfing, some runaways delayed rooflessness by joining the armed forces. In some cases it was delayed for 20 years or more. This suggests a need for further research to establish whether the armed forces triggers homelessness[20] or delays and exacerbates an existing problem. Furthermore, other runaways delayed homelessness through an early marriage or cohabiting partnership, becoming roofless when the relationship ended (Mary's route-map):

'I married at 16, divorced at 22 or 23 then married again at 24 and was divorced again by 29. But because they [parents] threw me out … I had nowhere to live.' (Mary, female, aged 55; temporary housing)

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18 Also Smith and Ravenhill (2007).

19 Smith and Ravenhill (2007) advocated a number of recommendations, including dissemination of practical advice, teaching problem-solving skills.

20 See Lemos and Durkacz (2005); Ballintyne and Hanks (2000); Highgate (2000).

More disturbing, there is a link between long-term rooflessness[21] and the age a person leaves home. Only where people left home after age 19 did the likelihood of becoming long-term roofless appear to reduce. The long-term homeless spent an average of 13.5 years sleeping rough or precariously housed; most became roofless before age 18. This emphasizes the importance of effective early intervention to divert people away from rooflessness or to quickly dovetail them into adequate facilities. It is now recognized that early crisis intervention can prevent long-term rooflessness for this age group (Havell 2001). However, roofless people may find it difficult to receive the help on offer, as childhood experiences can leave them confused and unable to trust any authority figure. It takes time to break down such barriers and help them to live more productive lives, where they feel physically, mentally and emotionally secure:

> 'I feel really frightened at the moment, everyone I've ever trusted in the past let me down. Now I'm afraid to trust anyone. I don't know who to trust. I can't tell whether or not I am being ripped off.' (Shirin, female, aged 18; hostel)

Few escape these tumultuous teenage years, which are difficult for both parents and child to navigate. The difficult child–adult transition is documented in the literature (Smith and Ravenhill 2007; Morrow and Richards 1996; Coles 1995). Teenagers are growing in independence and self-awareness, but are hampered by emotional and ontological insecurity. Those experiencing triggers of rooflessness were more likely to have an augmented independence and lack respect for authority. This together with the tendency to move in and out of sexual relationships made the transition even more difficult. A mixture of age and negative childhood experiences might create unhelpful attitudes that lead to unwise decisions and/or rooflessness, or at least an unnecessary elongation of roof/homeless episodes. For example:

- At 14 some felt they were adults and became rebellious at school or home and began running away:

> 'Do you want to know what a lot of us think at 14? If you're old enough to have periods you're old enough to take care of yourself.' (Jo, female, aged 26; hostel)

- At 16 some knew they were adults and knew they could cope with anything in life. They tended to think that society would make allowances for their behaviour and mistakes because they were young:

> 'I was there six months. I didn't know anything about rent and food, so I thought I'd pay next week and I kept thinking like that. I got evicted. I thought, because I'm young I'd get away with it, you know, they'd make allowances or something.' (Anita, female, aged 20; hostel)

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21 The long-term roofless being those who spent two or more years continuously sleeping rough, or long periods roofless interspersed with relatively short periods in hostels or housed.

Once away from home, reality begins to dawn. Some started to realize that they did not have the skills they needed to cope with everyday things:

'Because I'm young it's all new to me, I didn't understand things, when you're grown up you get letters and things that you do understand. I didn't pay rent at first. It was £6.25 a week. I'd got to get food, cigarettes and things.' (Sandra, female, aged 16; hostel)

• By 18 they begin to recognize that they need help and that they, not other people, need to do something about the situation:

Two leading youth homeless charity spokespersons noted that 16–17-year-olds are difficult to help because they are still enjoying their newfound freedom and kicking their heels up. They feel the world or the system owes them. Once they reach 18, they tend to realize that they need to do something to change things. At that point they are willing to try and are easier to help.

• By their early twenties, some may have sorted themselves out and have their life on an even keel. Some may remain precariously housed for years. Some may enter into a series of cohabiting relationships that are both harmful and abusive. A minority may remain roofless and become the long-term homeless.

Not all young people left home at or before age 16 by choice; some were thrown out or asked to leave by parents no longer willing or able to accommodate them. This was often as a result of constant rows and arguments between parents (step-parent) or siblings. Those without positive social networks to turn to for assistance or accommodation may become roofless. The causes of such intense rows and arguments often involve problems with household rules, finance, employment problems or behaviour (Smith and Ravenhill 2007; Ravenhill 2000b):

'My mum kicked me out. We had arguments, bad arguments a lot of the time. My sister had already moved out. Mum decided it was time I moved out as well. I was only 16 at the time.' (Anita, female, aged 20; hostel)

'It was very argumentative. I had no independence, no privacy. Mum kicked me out because of arguments over 1 and a half to 2 years.' (Ashwani, male, aged 23; hostel two years)

'My mum just packed my bags and put them on the doorstep and went on her holidays for two weeks. I was 15 then.' (Melanie, female, aged 16; hostel)

Parents finding it difficult to cope find there is little or no help or advice available to guide them on how to deal with teenage problems and family conflict (Smith and Ravenhill 2007; NFPI 2006). The only help available is often through social services, but this is usually for teenagers or families with additional problems or those already in contact with social services for other reasons. It would appear that the parents who were most likely to throw their children out were middle class

(Registrar General's social class 2 (II) and 3a (IIIn)).[22] Middle-class parents appear to be less tolerant of their offspring and less able to seek help from social services when they need it. Some middle-class parents used boarding schools for younger teenagers, to delay or avert problems. It may be that existing schools projects aimed at preventing rooflessness need to be extended to cover boarding schools and schools in middle-class areas.

Socio-economic classifications of origin are a recognized means for giving a crude indication of the type of area and property a person is most likely to have been brought up in. Those in lower classes are the most likely to receive poorer quality education, gain poorer examination results and enter the labour market at a lower point (or not). This in turn affects social mobility and ability to afford stable accommodation. Society now recognizes family, school and local area as important factors in future social exclusion (Lupton 2003; Burgess et al. 2001). Current literature establishes a firm causal link between poverty and homelessness (Anderson and Tulloch 2000; Third and Yanetta 2000), suggesting that socio-economic class of origin and the local area a child is brought up in has a profound effect. This ought to influence future social policies and targeted intervention and prevention of rooflessness. The consequence of homeless literature's tendency to focus on individuals' status at the point of rooflessness or immediately before leads directly to the assumption that poverty is a causal factor in homelessness.

However, there is recognition in other bodies of literature (though not formerly researched) that it is not the really poor[23] (Atkinson and Hills 1998; Jarvis and Jenkins 1997) but the nearly poor[24] who are the most vulnerable to homelessness. Moreover, when looking at family backgrounds, homeless literature implicitly suggests that some youth homelessness is a lower middle-class (Registrar General's social class 3a (IIIn) and 3b (IIIm)) problem rather than a working-class problem (Smith et al. 1998; Hobcraft 1998). However, these findings were limited by the range of social classes in the social housing estates studied. This study suggests that the main class of origin could be as high as Registrar General's social class 2 (II), the traditional middle-class. This is much higher than the existing literature indicates and makes the incidence of Prince Charles finding that one of his school chums was homeless less surprising (Moyes 1997). The traditional working classes and unemployed appear to be under-represented on the streets, suggesting that despite having the better start in life, and potentially access to better and higher levels of education and employment, middle-class people were not able to avoid becoming roofless. It is possible that working-class homeless young people were resourceful enough to avoid actual rooflessness by staying hidden but continually vulnerable to rooflessness.

This discrepancy between social class of origin in this study and the literature's finding that poverty is a trigger factor may be explained by the sharp downward social mobility from the family of origin to the individual's class just before rooflessness.[25]

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22 Hobcraft (1998) – see Chapter 2.

23 Registrar General's social class 5 (V) and the unemployed.

24 Those on the margins with low-paid or insecure employment.

25 For example most people were unemployed immediately prior to their rooflessness, or had never been capable of work.

One of the main reasons for this was the high incidence of roofless people having left home at or before age 16. More disturbing, it appears that most of those leaving rooflessness and living in settled housing for four years or more became stuck in long-term unemployment, regardless of their start in life. There was embryonic evidence to suggest that those spending the least amount of time roofless and in the homeless culture were more likely to enter employment, with those in good jobs prior to rooflessness gaining better jobs afterwards.

Family poverty may not be an essential trigger of rooflessness. However, rooflessness can trigger long-term poverty, regardless of class of origin and future housing status. The interplay between family background and class of origin offers an explanation for some adult routes into rooflessness.

Adult Routes into Homelessness

Adult (age 19-plus) rooflessness often stems from triggers that began to amass in childhood. However, rather than becoming roofless at or before age 16, they began their adult lives as members of housed society. For these adults it is important to look not only at what finally triggered their rooflessness, but also what prevented it up until that point. In addition, there were adults who became roofless, but who had no apparent childhood triggers. Triggers for this group included: relationship breakdown, destructive relationships, traumatic life events, substance abuse, mental health problems, debt, arrears and eviction. Both sets of adults experienced similar adult triggers, but those with childhood triggers appeared to be more vulnerable to rooflessness. Adult triggers, like childhood triggers, appear to be inextricably entwined together, thus viewing single triggers in isolation is unhelpful.

Photograph 6.2 Hidden card boxes and bedding ready for night-time
Source: Megan Wilkinson, 1996.

Photograph 6.3 Homeless in Westminster
Source: Megan Wilkinson, 1996.

Photograph 6.4 Homeless in Charing Cross
Source: Megan Wilkinson, 1996.

Mary's route-map shows that triggers did exist in childhood, but their impact was not strong. An early marriage protected against rooflessness for some time; however, the lack of relationship with her parents during childhood and subsequent adult problems combined to trigger rooflessness at age 29, before the 1977 safety net homeless

legislation was enacted. Once back in housed society, she remained precariously housed for approximately 20 years before becoming homeless again and receiving help from her local homeless persons unit.

Mary's route-map: Age 55, born 1945

Age			
Age 0-1 **1945/6**	Parents split		Brought up by a relative
Age 5-15 **1950-60**	Unhappy at school - picked on, bullied		Dyslexic
Age 16 **1961**	Leaves school	Works in hotels	Marries
Age 23 **1968**	Nervous breakdown, moves in with mother		Divorces
Age 24 **1969**	Re-marries		Not happy, starts drinking heavily
Age 26 **1971**	Has baby		
Age 29 **1974**	Divorces	Moves in with mother	Mother looks after child
		Another nervous breakdown	Leaves child with mother
Age 29-35 **1974-80**	Depressed, suicidal, crying all the time	Becomes prostitute	
		Alcoholic, becomes drug addict	Sleeps rough
		Gets criminal record	
	Friends try to help	Lives in squats	Takes seasonal work
Age 34 **1979**	Met another alcoholic	Live together, come off drugs together	
Age 35 **1980**	Has accident	Goes back to live with mother	Thrown out - mother keeps child
Age 36 **1981**	Moves in with man - has hold over her	Gets alcohol under control	Goes on LA housing waiting list there
		Recovers from depression	

Mary's route-map: continued

Age 40 1985	They move area		Goes on LA housing waiting list there
Age 44 1989	Leaves man, moves area		Goes on housing waiting list there
Age 50 1995	Getting ready for old age - moves area		Goes on housing waiting list there
Age 53 1998	Landlord gives notice of rent increase	Housing benefit not able to cover increase	Looks for cheaper flat tries housing assoc., estate agents, local press
Age 54 1999	Rent goes up	Goes to Housing Advice Centre	
Age 55 2000		Sent to HPU	Housed in temporary flat - very dirty
			Outcome pending

Note: LA = Local Authority   HPU = Homeless Persons Unit

Relationship breakdown is the most commonly cited trigger of adult rooflessness. The literature alludes to interlinked triggers such as debt, depression and substance abuse, but fails to acknowledge the chain-reaction-style process that can accelerate to trigger rooflessness. There is little emphasis on the impact of negative or weak social networks, childhood triggers and previous rooflessness or homelessness on the likelihood of rooflessness occurring. Although Morrow and Richards (1996) suggest that those with strong family support structures who are able to return to the parental home after leaving are less likely to become roofless or homeless. People who had never been roofless, but experienced relationship breakdowns, suggest that people such as Mary lacked the protecting factors that prevented their rooflessness. Namely, stable employment (professionals: accountants, lawyers), membership of a community group (e.g. church, club/society), strong positive family ties or family members offering accommodation and emotional support (Diagram 6.4).

Chain-reaction-style process	Interlinked triggers	Destructive/negative relationship
• Negative or weak social networks • Childhood triggers • Previous rooflessness or homelessness	• Debt • Depression • Substance abuse	• Domestic violence • Addicted partner • Partner with mental illness

Divorce and relationship breakdown

Protecting Factors

Prevent rooflessness through...	Family members offering...
• Family to return to • Stable employment • Membership of a community group • Strong positive family ties	• Accommodation • Emotional support • Identity • Ontological security

Divorce leads to...

• Loss of partner
• Loss of stability
• Altered identity
• Ontological insecurity
• Loss of home or the feeling of home

Diagram 6.4 Impact of protecting factors on divorce

Relationships are an integral part of society; they become part of people's identity and create ontological security. Family and a cohabiting relationship are strongly associated with feelings of home (Chapter 2). Thus relationship breakdown represents far more than the loss of a partner; it also represents the loss of stability, altered identity, ontological insecurity as well as the loss of home or the feeling of home. Many roofless people not only saw relationship breakdown as a significant trigger of their rooflessness, but the reformation of, or new relationship, as the solution to their problems. A new relationship not only met the need for accommodation, but also the need to feel 'normal', to 'belong' and be 'loved'. The use of relationships as a solution to rooflessness inevitably links relationship breakdown to episodic rooflessness:

> 'Once in the '70s, I came straight out of prison and got married. It only lasted for about
> four or five years. We moved to Edinburgh, because she was Scottish. We had a son who
> will now be 20ish. As soon as the relationship ended I moved back to London. Once in
> London I began the same cycle again of drugs and prison for six months.' (John, male,
> aged 52; housed 12 years, long-term homeless)

The types of relationships most likely to trigger rooflessness are the negative,
destructive ones (domestic violence, addicted partner or partner with mental illness).
Such relationships tend to alienate people from mainstream society, making it difficult
for them to use social networks for assistance when a housing crisis occurs. Those
trying to escape abusive relationships often find there are few or no options open
to them. Hostels and refuges are often full, making the streets the only alternative
option. This being so, it suggests another example of people being pushed towards
rooflessness, rather than actively choosing to become roofless. They become roofless
by default, in the absence of any real alternative.

These destructive relationships tend to be under-reported in general homeless
literature; when acknowledged they focus on domestic violence. Under-reporting
probably results from the heavy use of surveys that concentrate on single roofless
people, who are predominantly male (i.e. Randall and Brown 1996). Specialist
literature on women's homelessness does give a broader insight (e.g. Ravenhill
2000a; Jones 1999), but tends to focus on domestic violence and ignores the
experiences of men:

> 'She would force me to have sex with her, the way I see it, she would rape me. I didn't
> leave because that was the story of my life, I hated it, but I couldn't leave.' (Stephen, male,
> aged 40; housed four years)

This omission in literature leaves a huge gap in knowledge about roofless women,
violent men leaving partners and the abuse of males. The nature of destructive
relationships means that people can feel powerless to take control of their own
lives and situation and therefore spend longer in the relationship before they escape
(Yearnshire 1997). For example, an addicted partner can put immense pressure on a
relationship, the family and the finances; but the partner remains reluctant to leave
or throw them out. Partners often become addicts, too, through misguided notions of
helping the partner. Addicts also appeared to partner other addicted people, thereby
locking them into a destructive co-dependent relationship that often became volatile
and violent. There was a blurring of the norms and values that normally separate
housed and homeless cultures. This made it easier for those locked into destructive
cycles to slip between the cultures, creating episodic rooflessness.

Another example would be relationships with a partner with mental health
problems. Roofless people frequently partnered people with mental health problems.
The natural by-product of the way the mental health system works (using daycentres
to create social support networks) means that mental health patients tend to form
friendships and enter into relationships with other people with mental health
problems. These relationships are inherently weak and can be destructive as the strain
of living in such a relationship can exacerbate or cause mental health problems. The
use of psychiatric facilities to treat substance dependency places the homeless and

those vulnerable to rooflessness within the mental health structure and therefore in a position to form relationships with people in the mental health system:

> 'I married again, a woman that I met 'in the system' [on a psychiatric ward]. She was a chronic drug addict, I thought that if I loved her I might help her.' (Kev, male, aged 44; housed five years, long-term homeless)

> 'She was high on medication and high from her psychotic depression. I told her I was trying to keep cool, stay off the drink and keep coping with life. I said I'd help her, but I couldn't carry her.' (Ian, male, aged 52; housed one year, long-term homeless)

A further example of destructive relationships would be where domestic violence takes place. There is a domestic violence syndrome that locks the victim into the relationship: on average women will be assaulted 35 times before reporting domestic violence to the police (Yearnshire 1997). It appears that for roofless people, a history of child abuse led them into violent relationships and often a series of violent relationships. Domestic violence was described as:

> 'He started hitting me and was very violent. One time he dangled me over a seventh floor balcony threatening to drop me.' (Aileen, female, aged 39; hostel, long-term homeless)

> 'He beats me and gives me bruises. I've had black eyes and very black bruises in other places. He lands out with no warning. He can be luvvy-duvvy one minute and then wham the next with no warning. He smashes my things in the flat and keeps smashing the windows.' (Jill, female, aged 32; housed one year, second episode)

> 'I used to live with my fiancé, he was violent towards me. When I mean violent, I mean being kicked and punched, thrown across the room and things like that.' (Jackie, female, aged 34; hostel)

This kind of continual assault on the physical as well as psychological person can leave people feeling that the streets are a comparatively safe place, even though women were then often victims of rape and further violence. The possessive nature of violent relationships meant that those women leaving violent partners were subjected to intimidation. In an attempt to break away from this, women tried to hide or move out of the area. This meant breaking existing social networks, creating a housing crisis and depriving them of an adequate safety net of support:

> 'I had a bad relationship, I lived with a man who battered me. I left him and tried to hide from him, but he kept finding me. So I left the area and moved away. I thought I had friends here, but I ended up sleeping in a bus station.' (Jan, female, aged 20; hostel)

Women were often diverted away from rooflessness by people inviting them to live in squats or sleep squat-style in ex-roofless people's accommodation. This left them homeless and precariously housed and continually vulnerable to rooflessness. Attitudes to women within the homeless culture left them vulnerable to exploitation. These destructive relationships created complex problems that united to compound or trigger rooflessness.

The association between destructive relationships and substance abuse was strong. Substance abuse was both responsible for relationship breakdown (triggering violence) and the anaesthetic or solace sought by people experiencing or fleeing from destructive relationships:

> 'I'll tell you why women become homeless, it's because of violent men. They live with men that become violent and then they have to leave, but they've nowhere to go so they end up on the streets. Take me; I had four good men but the relationships were trashed because of drink. Drink turns the man bad, he goes violent.' (Sandy, female, aged 27; hostel)

Where children are involved, relationship breakdown becomes more complex as it may signify the loss of contact with children. Many roofless people, especially women, suffered years of guilt and anguish over the loss of their children. Once roofless and/or abusing substances, this guilt and grief appeared to make it difficult for them to recover and move on.

Relationship breakdown as a trigger of rooflessness, therefore, is not simply about divorce. It must be viewed in the context of the individual's life-course, the multiple events that when occurring together increase the likelihood of rooflessness occurring. Multiple complex events occurring in quick succession destabilize the individual, rupturing their protection against rooflessness and leaving them unable to cope when a housing crisis arises. Most people would have difficulty coping with a series of traumatic consecutive or simultaneous events. Valerie's route-map shows the accumulation of events. Although from age 4–18 she experienced abuse, frequent changes of address, rejection by parents, homelessness and precarious housing, she always managed to avoid rooflessness. However, once at university, a series of traumatic life events occurred in quick succession and in the absence of parental support eventually triggered rooflessness.

Rooflessness often culminates from the erosion of self-confidence and self-identity combined with traumatic life events and bad or irrational decisions. Negative reactive responses were common coping strategies and included escapism (running away, substance abuse), withdrawal (depression, emotional shutdown) and an inability to cope with everyday life for a time. Although rash or unhelpful decisions may have been made at this point, such decisions appeared to be a perfectly 'normal' reaction to an 'abnormal' situation. The crucial time appeared to be during the natural recovery period after trauma, when most people tend to withdraw to recoup and recover. If other triggers occurred at this stage, then vulnerability to PTSD, mental health problems, addiction and rooflessness dramatically increased. The number of traumatic life events experienced tended to increase with age, length of time spent roofless or homeless or precariously housed. For example, the following occurred as a result of rooflessness:

> 'I realized that he'd been preparing me to go on heroine and be a prostitute, hence the rape, the sexual abuse and the free drugs and drink.' (Francesca, female, aged 45; housed 30 years)

> 'I was raped the day after I arrived; in a graveyard. It was another tramp who'd not leave me alone. He was very violent and threatened me with a dog-chain and scissors. He owns some of the girls in the area and he thought he owned me.' (Debs, female, aged 28; hostel, long-term homeless)

Valerie's route-map: Age 26, born 1974

Age 4 **1978**	Parents split, lives with mother	Disrupted education	Changes school with each move
	Mother changes address a lot	Mother - several partners	Abused
Age 12 **1986**	Never sees dad again	Mother becomes aggressive	Beats her
Age 16 **1990**	Left home	Moves in with boyfriend	Goes to college and works part-time
Age 18 **1992**		Catches boyfriend cheating on her	Leaves him. Finds flat. Gets housing benefit
Age 19 **1993**	Goes to university		
Age 20 **1994**	Grandparent dies	Friend commits suicide	Sexually harassed
Age 21 **1995**	Takes a year out	Student loan called in	Splits with boyfriend he moves out
	Makes friend - travel and work abroad, they sleep rough	Sleeps rough and on friends floors	Can't afford rent
Age 22 **1996**	Returns to England	Witnesses serious assault	Intimidated witness
	Sleeps rough	Escapes – leaves area	Takes out restraining order
	Has 'nervous breakdown'	Hospitalized	On leaving, stays with relative
Age 23 **1997**	Relative moves - no room for her	Can't cope living on her own	No relatives or friends in the area
		Assigned to CPN	Moves area - alternates between two relatives
Age 24 **1998**	Sent to Homeless Persons Unit	Placed in a hostel	Hostel changed
Age 26 **2000**		Outcome pending	Housed 1 week

Historically, the assumption has been that adult rooflessness is the result of personal failings.[26] This fails to take into account the long-term impact of individuals' biographies that left them ill-equipped to cope and the lack of alternatives open to them when they attempted to avoid rooflessness. The biggest trigger of rooflessness at this stage was not personal but structural. Roofless and precariously housed people often did not know where to go in a housing crisis;[27] others knew to go to the local authority housing department, but did not realize that they were not statutorily vulnerable and therefore were only entitled to advice.[28] Furthermore, before becoming roofless and in many cases for the first week or so after becoming roofless, many did not know where their local hostels were or how to find them. When finances were low or non-existent, there were no alternatives to hostel accommodation. A combination of lack of knowledge, access problems and the lack of realistic alternatives actually triggered rooflessness. In addition, where housing crisis occurs as part of an escalation of triggers or traumatic life events, people are vulnerable and often need support to either remain housed or find housing. In extreme cases, people remain vulnerable and in need of support for the rest of their lives, which could be 40 or more years (e.g. Ravenhill 2000b; Jones 1999). This is compounded by problems such as substance abuse, which appears to negate the statutory authorities' willingness to assist.[29] Substance abuse also makes it difficult for individuals to accept and receive the help or support offered.

Regardless of personal or structural influences, substance abuse increased the likelihood of rooflessness. This was perhaps visibly one of the most destructive and pernicious triggers. It damaged health, undermined coping mechanisms and inhibited strong positive social networks within mainstream society, leaving people vulnerable to exploitation and rooflessness:

> 'I kept the flat for a while, but I carried on drinking heavily. I soon started staying in bed all day again, drinking myself unconscious. I started being sick and kept pissing the bed, but every time I woke up I just drank some more until I passed out again. I lay in my piss and sick and couldn't be bothered to get out of bed to sort myself out.' (Aileen, female, aged 39; hostel, long-term homeless)

Where substance abuse was not a trigger of initial rooflessness, once immersed in the homeless culture, addiction often followed. One London Borough ex-mayor remembered that as an addicted rough sleeper he was only concerned about where the next drink was coming from and where to sleep. This constant obsession with drink or drugs led people into crime or aggression and increased the likelihood that they would not eat, thereby increasing the substance's potency and compounding their problems. Until recently, substance abuse was seen more as a social evil than a problem, therefore little government funding was targeted specifically at the long-term

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26 e.g. Hope and Young (1986); Watson and Austerbury (1986); Booth (1970).

27 Ravenhill and Smith (2007) explore this further.

28 Approximately 50 per cent of young people knew where their local housing or social services office was (Ravenhill and Smith 2007).

29 Also compounded by sexual orientation, which at times limits access to hostels.

rehabilitation of roofless substance abusers.[30] Crisis found 81 per cent of homeless people were substance-dependent, half the alcoholics wanting help received none and three in five drug users had not been able to use a detoxification service in the last 12 months (Fountain and Howes 2002). Alcohol and drug dependency clinics and rehabilitation centres are often full, with waiting lists making it difficult for people to access help when they need it. The kind of help available locally to substance abusers was a lottery. Many had to use the local psychiatric system or travel considerable distances to gain help. A number found that local health authorities were unwilling to fund comprehensive, lengthy treatments:

> 'Once you start on drugs you're scum as far as the authorities are concerned. They don't look at why you start using in the first place.' (Tessa, female, aged 36; temporary accommodation two years, long-term homeless)

Disturbingly, short-term detoxification programmes (e.g. psychiatric wards) were used to control addiction, rather than recover from it. When addicts felt their addiction was out of control, or beginning to noticeably affect their health (liver sclerosis flare-ups), they used residential services to temporarily dry out or clean up until their symptoms eased (see Ian's route-map). There was little evidence that such programmes encouraged them into longer programmes or helped to resolve rooflessness. In fact, such programmes actually increased people's vulnerability to rooflessness through rent arrears or the loss of temporary forms of accommodation (hostels):

> 'During the first two years I was homeless on the streets. I went into detox three times, each time I left and returned to the streets. I can't remember whether anyone talked to me about hostels at the detox.' (Chris, male, aged 30; housed five months)

> 'I've been in detox a few times and dried out, but I can't let it go. I'm an alcoholic now and I keep having really bad binges, then I go somewhere, stop drinking for a week or so, give my body a rest, then something happens or I remember something and I'm back drinking again.' (Stephen, male, aged 40; housed four years)

Danczuk (2000) found that the two cultures (drink and drugs) do not mix, that is, homeless people rarely seem to abuse both substances. The present study found that in an attempt to recover from drug addiction, some users drank heavily and then became addicted to alcohol. Further research is needed to understand any possible links. In addition, a number of substance abusers did not recognize either that they were addicted *per se*, or the full extent of their addiction, describing themselves instead as, for example, a heavy drinker.

Although addiction is pernicious and is strongly associated with rooflessness, it is a negative coping strategy adopted as anaesthesia to suppress feelings. The fact that many people are addicted to food, shopping, caffeine, chocolate, work, exercise or gambling suggests that addiction is a common coping strategy used by the general population. However, addictions such as alcohol, drugs, gambling and food are viewed by society as negative, self-destructive and wrong, whereas

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30 Also Cockersell (2006).

addictions such as exercise or work are socially acceptable. In the same way that there are socially acceptable addictions, there are also socially acceptable triggers of rooflessness. Substance abusers were often unofficially viewed as undeserving and so were disadvantaged when applying to local authority housing waiting lists. Once housed, many were unable to cope in a housed setting, finding it difficult to budget and keep up personal and house hygiene. This means landlords (both statutory and private) are less likely to accept them as tenants. Once housed, the absence of adequate help and support triggers subsequent episodic roof/homelessness. Thus the relationship between rooflessness, substance abuse and housing is complex, affecting both structural and individual levels. This means that where people become addicted, either before or during rooflessness, there is no simple, easy solution. Instead there is a web of complex, psycho-social problems that need to be dealt with alongside structural problems, both within the homeless industry, social and private housing sectors. These are interconnected factors that cannot be viewed in isolation if solutions are to be effective and far reaching.

One major problem with addiction is that it tends to be viewed as the individual's problem, rather than in the context of other circumstances that push the individual into using addiction as part of their coping strategy. This led some commentators to view addiction as a mental health problem (Cockersell 2006; Krauthammer 1985). Here again we see triggers and understandings of triggers overlapping and interconnected. Mental illness has become an overloaded term that covers huge variations in the degree of mental health problems. For example, it is unhelpful to group chronic schizophrenia in the same category as depression or addiction. Although sharp deterioration in mental health is discussed in the literature as a significant trigger of rooflessness,[31] there is much debate as to which comes first, mental illness or rooflessness (Hope and Young 1986).

One subcategory of mental illness dominated homeless and ex-homeless accounts of their routes into homelessness: depression. Cockersell (2006) found that 25 per cent of homeless people have depressive disorders. Depression is rarely discussed in homeless literature, except as part of general mental ill-health, despite being an exceptionally strong feature of adult routes into rooflessness. It is a debilitating illness that affects the individual's ability to relate to others, cope with everyday life and make decisions. It is often accompanied by feelings of low self-worth, a lack of confidence, low powers of self-motivation and, in its extreme form, it can lead to self-harming and suicidal feelings. Severe forms affect people's cognitive and motor activity, making the simplest of tasks difficult or impossible (Rossi 1989). The nature of depression means that although it is treatable, it takes time for all cures to work (both talking therapies and anti-depressants). Moreover, its very nature means that it is often difficult for sufferers to recognize they need help. Consequently, associated problems (e.g. rent arrears) often escalate and trigger rooflessness:

'I got down. I realized I'd a big problem when I couldn't be bothered to get up on a morning and started staying in bed all day. It wasn't just that I could not be bothered. I really couldn't get up. I lost my job. Unemployed with debts still rising, I got more down.

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31 Cockersell (2006); Randall and Brown (1999b); Fitzpatrick et al. (2000).

I started drinking a bit more because I wanted to feel numb, I didn't want to feel bad anymore.' (Tommy, male, aged 35; rough sleeper)

'The problem is I'm down again. The trouble with being down is that you don't know when you will come back up again. It can take a few days or it can take a year or so.' (Roy, male, aged 38; hostel)

'After the break-up I became very, very depressed. I thought that my world would cave in. I thought I had nothing left. I'd no friends and no one to turn to. All that I could see was black. At first I thought I could never feel any worse, but then I began to feel worse and worse.' (Gabriella, female, aged 35; housed three months, long-term homeless)

Depression, like mental ill-health and substance abuse, can both trigger and be triggered or exacerbated by rooflessness, making it very important for those in precarious housing or experiencing episodic rooflessness to identify and tackle it early. There was a cyclical link between depression and suppressing behaviour (substance abuse) that locked sufferers into a cycle of anaesthesia and thaw, with the problem simultaneously relieving and causing the other. Where substance abuse and depression were linked, there appeared to be an increased risk of rooflessness.

One of the major contributors to depression that triggered rooflessness were feelings of alienation, isolation and 'not fitting in' to society. Loneliness has been discussed in the literature as a trigger of episodic rooflessness (Lemos 2000) and as part of the roofless experience (Baker 2001b), but not as part of people's routes into rooflessness:

'As a child I felt there was something wrong with me that meant I didn't fit in. I couldn't handle life emotionally. I felt something must have been missing from birth. Like a computer programme, I hadn't been programmed to fit in, to feel loved, or to let people get close to me.' (Tommy, male, aged 35; rough sleeper)

'My biggest fear is being on my own. I'm okay in a crowd, but I am afraid to feel alone and be on my own. I think that deep down I have always felt like it, but the drugs covered it up for years.' (John, male, aged 52; housed 12 years)

Deep-seated isolation and loneliness appear to be associated with early experiences of bullying, neglect, rejection and problems at home, which at times caused fear, anxiety and self-loathing. Homeless people's accounts linked these intense feelings to relationship breakdown, poor social networks, inability to ask for help and an inability to perceive or receive help when given. For others they were also linked to debt, eviction, depression, suicidal feelings and an inability to cope with everyday life. All this suggests that, for some, loneliness and isolation during and after rooflessness is merely an extension of a pre-existing problem.

At the extreme end of depression are suicidal feelings and attempts. Suicide accounts for 25 per cent of deaths among homeless people, compared with less than 1 per cent in the general population (Baker 2001a). The blackness and despair of depression can leave some people feeling that they no longer want to live or certainly that they want the feelings to end. The irony was that failed suicide attempts led to deeper depressions as they felt that they had failed yet again:

'When I first came here I was a mess. I wanted to die. I took four overdoses.' (Heather, female, aged 19; hostel)

'I left the house and went back to my parents. I took the best malt whisky, a hosepipe, tape and some sleeping tablets. I attached the exhaust with the hosepipe into the car and sealed up the windows. I took the sleeping tablets and drank the malt whisky.' (Roland, male, aged 52; housed 17 years)

'I wanted to die, I mean I really wanted to die, this was not a cry for help or anything. I wanted it all to end.' (Tommy, male, aged 35; rough sleeper)

Suicide attempts resulted in hospital admissions; however, there appeared to be a surprising number who were discharged with no apparent help (this may be due to their perception of help; counselling was not necessarily perceived as help). Others, once discharged, became so depressed that they could not attend sessions designed to help them. Time in psychiatric hospitals, as demonstrated by Goffman (1961; 1968), affects the individual's perception of self and their relationship with others. Informal interviews with nurses and patients (who were never roofless) suggest that it only takes two to three days for a patient to become accustomed to the hospital's routine, a new vocabulary and topics of conversation (listing ailments, using medical jargon). The longer a person is in an institutional setting, the deeper and more permanent the impact of institutionalization becomes. Leaving the institution may destabilize their ontological security and trigger depression, mental health problems or substance abuse.

Furthermore, people make institutional friendships. Institutions can become communities with a set of relationships that are bound by rules and norms and where friendships can only exist in the context of that institution. This is not unusual. Most people have such friendships at work, in churches or in pubs, clubs or societies. The difference is that when a person spends long periods of time in an institution, they lose contact with or fail to make friendships and relationships that transcend the institutional setting. This reduces the strength and quality of social networks outside the institution, so much so that when a housing or other crisis occurs, there is little or no safety net to fall back on for help and assistance.

'Time in institutions' is well documented within homeless literature, which acknowledges that rooflessness may result from inadequate preparation for everyday life or problems with accessing accommodation after leaving.[32] However, it fails to acknowledge that it isn't the time spent in an institution that is important but the impact of institutionalization. Both Goffman (1961) and Foucault (1977) examine the impact of institutionalization, the way it strips away self-identity replacing it with that of patient or prisoner. This ritual stripping of identity combined with constant surveillance of every aspect of the individual's physical and emotional life must inevitably have a profound impact on the individual and their ontological identity. Homeless people cited institutionalization as part of their routes into homelessness and described it as:

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32 Ballintyne and Hanks (2000); Highgate (2000); Randall and Brown (1999a, 1999b); SEU (1998b).

'After 18 months inside I was all mentally institutionalized.' (Roland, male, aged 52; housed 17 years)

'I became homeless in 1984 when I was discharged from the army. I did 24 years in the service. I was a single man. I should not just have been returned to the community without any help. I had been in the forces all my life until then. I had no help, just discharge papers and a travel warrant.' (Stuart, male, aged 57; housed ten years, long-term homeless)

Goffman and Foucault's studies examined the impact of time in compulsory institutions. This research looked at both compulsory and voluntary institutions and their impact on roofless people's lives. Institutionalization must be viewed in terms of the life-course rather than an episode in time and its immediate aftermath. Thus it is important to view why people entered the institution, their experiences in the institution and the long-term impact of that institution as one long process within the context of their lives. Institutions appeared to delay rooflessness as well as trigger it. Table 6.2 shows the complex relationship between trigger factors and institutionalization. A number of trigger factors often existed before people entered an institution. There were also a number of factors that occurred, often by default, by virtue of being in an institution. Thus before people left institutional life they had already experienced a number of triggers of homelessness, in addition to institutionalization. On leaving an institution, precarious housing and inadequate preparation or support triggered rooflessness for some, but most entered housed society. However, once in housed society a number of other triggers then began to amass that were interlinked with institutionalization, including the strength and quality of social networks, learned coping strategies and relational problems.

Institutionalization and the loss of protecting factors (e.g. employment) were also linked. Existing research suggested a link with structural factors too; for example, the geographical location of institutions – prisons, universities and hospitals are often located in major towns and cities. People leaving institutions often settle in that area, either because they are familiar with it or because help and assistance is set up locally. When these towns and cities are in areas with high pressure on housing supply (e.g. the South-east) it is difficult for people to find accommodation (Matthewman and Read 2002). Rooflessness becomes a by-product of the overheated housing market, as people on low income, benefits or the homeless are priced out of the market or seen as undesirable tenants (Chapter 4). Matthewman and Read's (2002) research, though focusing on structure, demonstrates the complex interconnections between structures and the social and emotional lives of individuals. For example, they allude to the role of tied accommodation for contract, seasonal, catering, security and construction workers in triggering rooflessness during periods of unemployment.

Table 6.2 Triggers of homelessness before, during and after time spent in institutions

Institution	Before entering the institution	In the institution	On leaving the institution
Care	Child abuse	Rejection	Weak, negative or no social networks
	Family breakdown	Frequent change of address	Inability to cope with everyday tasks
	Parent not willing to accommodate	Disrupted schooling	Leaving home at/before age 16
	Traumatic event	Disrupted home life	Long periods in precarious housing
	Running away	Bullying	Domestic violence
Armed forces	Child abuse	Traumatic life events	Weak, negative or no social networks
	Family breakdown	Institutional friendships	Leaving home at/before age 16
	Parent not willing to accommodate	Frequent change of address	Frequent changes of address
	Traumatic event	Unstable home life	Debt, rent arrears, eviction
	Running away	Relationship breakdown	Relationship breakdown, substance abuse
	Parent in armed forces	Bullying	Inability to cope with everyday tasks
	Frequent changes of address		Onset of mental illness, own aggression/violence
Prison/remand centre	Substance abuse	Bullying	Weak, negative or no social networks
	Previous homelessness	Traumatic life events	Long periods in precarious housing
	Traumatic events	Institutional friendships	Debt, rent arrears, eviction
	Bullying	Loss of accommodation	Relationship breakdown
	Disrupted schooling	Rape	Substance abuse, onset of mental illness
			Own aggression/violence

Table 6.2 continued

Institution	Before entering the institution	In the institution	On leaving the institution
Hospital	Onset of mental illness	Institutional friendships	Weak, negative or no social networks
	Accident/injury	Loss of accommodation	Debt, rent arrears, eviction
	Traumatic life event, child abuse	Loss of physical ability	Relationship breakdown
	Depression		Inability to cope with everyday tasks
	Inability to cope with everyday tasks		Mental health problems
	Substance abuse		Substance abuse
Boarding school	Family breakdown	Bullying	Relationship breakdown
	Traumatic life event	Disrupted home life	Inability to cope with everyday tasks
	Frequent changes of address	Institutional friendships	Parents not willing to accommodate
			Long periods in precarious housing
			Debt, rent arrears, eviction
			Onset of mental illness

Other economic factors can also trigger rooflessness. For example, the recession in the early 1990s caused debt, rent/mortgage arrears and subsequently eviction. The pressure from these events may not only have triggered homelessness but also relationship breakdown, depression, mental health problems and substance abuse:

> 'I blame the building society for my homelessness. When recession hit at the beginning of the '90s, carpentry work dried up. With no job and massive increases in mortgage interest rates, I started to get into debt. Round this time my girlfriend and daughter left me. I found it difficult to cope with the end of the relationship, unemployment and increasing arrears. I became down, so I started drinking and taking drugs. The mortgage arrears continued and I was taken to court several times. Each time an agreement was worked out so I could pay an affordable amount towards my mortgage. It would be alright for a few months then the interest rates would go up again and they'd put up my repayments, so they'd take me to court again … Once I lost the court hearing, I had to file for bankruptcy and lost my house and most of its contents. I moved in with a series of friends for a while. I got into another relationship and moved in with that girl. But I started feeling down again. That relationship ended and that made me feel even more down. This left me with no money, no job and nowhere to stay.' (Roy, male, aged 38; hostel)

Adults often realized that rooflessness was a possibility for an average of one to two years before it happened (Mary's route-map). Although they spent much of this time in denial, they did not fit their own preconceived ideas of roofless people (tramps, alcoholics).[33] Many tried to avoid rooflessness, spending a further year in various forms of precarious housing before becoming roofless (Melanie's route-map). Once roofless, there was an average of one to two years before they sought or were offered assistance. The main reason for this appears to be ignorance about how to avoid rooflessness, what to do in a housing crisis and eventually a lack of alternatives open to them.[34] The assumption appeared to be that when crisis eventually happened, the State would assist.[35]

    More disturbingly, when people did try to seek help to avoid rooflessness, they often approached local or central government departments for assistance only to be met with dismissive attitudes, staffs' lack of knowledge, long waiting lists, inadequate services; alternatively, they were passed between departments (Waters 1999):

> 'A teenager being physically abused: I told social services, they said with the size of boy that you are, you should be able to fight back. I went to the council, they said I couldn't get a place until I was 18, and only then if I get married, pregnant or had an accident. So there was no chance. I spent five or six years on the local authority waiting list. Most of that time I slept rough in sheds and derelict buildings.' (Foxy, male, aged 32; housed eight years)

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33 Smith and Ravenhill (2007) explore housed people's preconceived ideas of roofless people.

34 For Dutch comparison, Doorn (2002; 2004b).

35 Smith and Ravenhill (2007) found that some parents held this assumption, evicting their teenager in the belief that the State had a duty to house them.

'When I went to sign on I was told I couldn't get any money. When I said what am I supposed to do with no money, they said become a rent boy in Tavistock Square.' (Allan, male, aged 56; housed two years, long-term homeless)

This resulted in unnecessary rooflessness and the migration of roofless people to London or larger cities, where better assistance and facilities were available. Moreover, the current homeless legislation means that the physically fit and mentally healthy are penalized by the system. This is part of Carlen's (1994) agency maintenance of homelessness. Furthermore, as the majority of assistance focuses on crisis management, assistance is primarily available after becoming roofless, thereby actively encouraging rooflessness.[36]

Conclusion

Routes into rooflessness are complex, multiple and interlinked. The complexity of the triggers increases with the age of the individual and the duration of their rooflessness or episodic homelessness. This makes crisis intervention increasingly difficult the longer a person remains roofless or precariously housed and vulnerable to rooflessness. The complex triggers consist of biographical, structural and behavioural factors that, when combined, increase people's vulnerability to rooflessness. Such triggers are also closely associated with weak social networks, poor self-esteem or confidence, few or no protecting factors and people on the margins of society. This exacerbates and accelerates the roofless process. For many, rooflessness would appear to be the answer to their problems rather than the problem, which explains its continuance and suggests that a closer look at the family and social networks is needed. To date, the homeless industry and wider society has proved unable to deal with much more than crisis management, available at the point of rooflessness. This actively pushes people out of mainstream society and at times into rooflessness. Furthermore, it creates a situation in which individuals are almost forced into creating or joining a counterculture in which they can survive. It is this counterculture, the homeless culture, which will be examined in the next chapter.

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36 A phenomenon identified in Jencks (1994) – Chapter 4.

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Chapter 7

Homeless Culture

Little has been published on homeless culture in Britain, partially because the research is difficult, time-consuming and costly. Additionally, people within the homeless industry fear that such an analysis could create a discourse by which homeless people would be judged, and this is felt to be unhelpful. However, it is important to homeless people to have a defining discourse that accurately portrays their lifestyle (Min 1999). Furthermore, if we are serious about preventing and resolving rooflessness we need to understand the importance of the homeless culture in attracting and holding members. This chapter aims to give some definition to the British homeless culture and explore how and why it becomes attractive and locks people into rooflessness for considerable periods of time. It explores the intensity, vibrancy and attraction of the homeless culture.

Chapter 6 demonstrated the complex nexus of triggers of rooflessness, which effectively push those vulnerable to rooflessness to the margins of mainstream society. The vast majority do not decide to take to the streets, but are effectively pushed there. Once there they become part of a continuum of social exclusion and inclusion where people on the margins of mainstream society move into and through the homeless culture (bobbing in and out) – a culture that developed or evolved around the support needs of this group. It caters for people's need to belong, to be respected and to be able to feel, as Giddens (1991) would argue, ontologically secure. It is the need to 'belong' somewhere, anywhere and to feel secure that often acts as a catalyst for new members joining or helps to create a subculture in an area.

Subculture is defined as the system of beliefs, values and norms adopted by a significant minority in any given society or culture, in this case, the roofless, homeless or precariously housed in Britain. Subcultures often develop from a position of marginalization and powerlessness within mainstream society. Thus the function and attraction of the homeless culture can be interpreted as having developed to serve specific needs that mainstream society does not cater for. Subcultures (including the homeless culture) also have discernable identifiers, for example language, dress, demeanour and behaviour. These give an identity to both the group and individuals within it. The homeless culture exists in most major towns and cities in England. In areas where roofless statistics are the highest, the culture splinters into further subgroups, thus ensuring that most who want to, can belong. Subcultures enable members to become 'mainstream' within their group. A key feature of the culture is its paradoxical capacity to absorb loners, who remain isolated yet part of the homeless culture. Furthermore, those refusing to identify with the homeless culture or admit that they were roofless were more likely to spend less time on the streets. They often actively sought help and viewed rooflessness as a temporary blip that could be

overcome. Consequently, they appeared to be more successful when moving into a secure tenure.

In general homeless culture is characterized by dense social networks and reciprocity, with people experiencing anxiety and depression when they leave or are denied access. These characteristics are not a purely British phenomenon within the homeless culture.[1] Nor are they peculiar to homeless culture alone; they are a characteristic of poverty cultures in general (e.g. Gans 1962; Stack 1974).

Wagner (1993) warns that in analysing homeless culture and the variations within it, there is a danger of stereotyping people according to diagnostic types or the social problem(s) perceived to have propelled them into rooflessness. Thus it is important from the outset to distinguish between classification and association (Wagner 1993). People who associate with a particular subculture do not necessarily subscribe to all the norms and values within that subculture. Equally, an individual's association with a particular subculture does not indicate their route into nor the triggers that resulted in rooflessness. Historically social scientists have encountered problems when distinguishing between triggers and the effects of being roofless (Wagner 1993; Marcuse 1988). For example, depression can trigger homelessness and be triggered by homelessness, so too can alcoholism. For many, association with the homeless culture is influenced rather than determined by social problems, thus some form subcultures based primarily on age or gender:

> Association is complex, based in part on chance, on subjective self-concept, and on demographic characteristics but also on overall limited social roles that exist within the street community. (Wagner 1993)

No subculture is homogeneous; there are bound to be different subgroups within the main culture. These are usually based on people grouping together with something in common. Wagner (1993) defines his subcultures using age group, geographical location or the public space the subculture tends to frequent.[2] Most of Wagner's categories could not be applied to British homeless cultures, although the social club is similar to the daycentre groupies and street drunks might be applied in its broadest sense to street drinkers.

A comparison of independent studies of roofless and street culture in England (Ravenhill 2003), The Netherlands (Doorn 2002, 2004b) and North America (Liebow 1993) show great similarities in terms of initial inertia into the culture, the reciprocal co-dependencies developed and the trust–mistrust nexus. The similarities between the studies suggest that, regardless of routes into the roofless culture, the workings and impact of the culture in these Western societies is almost identical. This is despite different national infrastructures designed as protectors or safety nets, different crisis management strategies aimed at the roofless and differences within each national homeless industry. Further research into these similarities is needed.

The following are descriptions of dominant subcultures within the British homeless culture. They should be viewed broadly as groups that associate together

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1   Wagner (1993) and Liebow (1993) – USA; Doorn (2002) – Dutch; Gruber (2005) and Kokot (2004) – German.

2   Street drunks, street kids, young turks, social clubs and politicos.

and, although they have been defined as categories, the headings used to define them should not be regarded as stereotypes or as groups of people with identical problems that have common solutions. Most subcultures can be single- or multi-sex, containing a variety of age groups, although it is rare for teenagers and those over 35–40 to mix in the same subculture.

Descriptions of Dominant Subcultures

It is impossible to discuss all the subcultures in great detail, as the homeless culture is synergical in nature. A number of the subcultures are subdivided into smaller groups (especially in London) and other groups are hidden from view (squatters). All are part of homeless culture as a whole. This section will focus on the overarching subcultures that tend to dominate the scene.

The Street Drinking Culture[3]

Street drinkers are often seen sitting on street corners, in parks, bus stations and doorways at almost any time of day or night. They unite to drink. Evidence suggests that it is rare for non-drinkers or drug-users to fit in with this crowd (Vision 21 2000). In areas with high concentrations of street drinkers a number of smaller groups form, categorized by age, the severity of their alcoholism or men only. There is great camaraderie, much teasing and merriment. With inhibitions gone, some groups mock passers-by, making fun of them and their aversion. They see all passers-by as the same. They mock one group because another group will kick, spit and even urinate on them later. Ballintyne (1999) found that 64 per cent of rough sleepers were victims of verbal abuse and 35 per cent had been wounded. Two out of three attacks were by the 'general public'.

Alcoholics go to great lengths to explain the difference between an alcoholic and a drunk and are anxious that people do not confuse their identity:

> 'What do you see, an alcoholic or a drunk? It's important. You think it's all the same, that we're drunks and alcoholics. Well remember this, we are alcoholics because we drink; because we drink too much. But a drunk is someone who beats up on his wife. None of us are drunks, none of us are like that. We have nothing to do with drunks.' (Jason, male, aged approximately 40; rough sleeper; research diary)

There are two dominant, diametrically opposed daytime subgroups: the depressive contemplators and the clowns. People of all ages and gender can belong to either group. The two groups do join at times and exchange banter and some people switch from group to group, reflecting their mood and needs at that time. 'Whether their friends are drinkers or drinkers are their friends, one thing is certain, the drinking group is extremely tight-knit' (Danczuk 2000).

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3   Also Johnsen and Fitzpatrick (2007).

Photograph 7.1 Cathedral Piazza – Victoria, London
Source: Megan Wilkinson, 1996.

Depressive contemplators
These are characterized by groups of drinkers sat in huddles, several crammed onto one bench with others sitting on the floor close by their feet. Heads nearly always bowed, sometimes sitting in silence, often moaning about their problems or life before they started drinking. They rarely welcomed other people into the group, but if people sat with them, adopted the same posture and were quiet, they were accepted and absorbed, without anyone making eye contact. In daycentres, they sought the most staff time, were more likely to feel suicidal and needed the most help with application forms.

Clowns
These are characterized by their animation, laughter, playful joking and teasing. They were open, greeting people with a side-on hug or a huge handshake, shouting their name loudly or 'how are you my man'. The clowning antics always appeared immature, almost like raucous, giggly 35-year-old teenagers. The show was deliberate, designed to provoke a reaction, any reaction, meeting an ontological need

to prove they existed to both themselves and others. The more people stared, frowned on their behaviour, or reacted in any way, the more outlandish the behaviour:

> A-J was on his feet, reeling from time to time with can in hand as he overbalanced but tried to keep the can steady so as not to spill a drop. The friends watched every move, commenting on what he was doing … People at the bus stop reacted, some turned away and ignored the scene, others turned to watch the proceedings. With an ever-growing audience, A-J joked loudly that he had become a circus attraction. His friends asked where his 'act' was. A-J struggled to take off his coat without letting go of his can, 'I'll show you'. He ran the 20 yards across the pavement, climbed the short stone stand that anchored the ornate lamp-post, then climbed halfway up the lamp-post. 'Ta-da!' he announced. 'More, more,' egged the group watching. The people at the bus stop swapped roles. Those refusing to look turned round to see what was happening and those that had been watching, looked away in embarrassment. 'Now for my grand finale', he announced. He fumbled with his button and zip then pulled down his trousers, baring his buttocks to moon at the crowd. He stood on his perch for a while laughing at the people at the bus stop. Someone shouted 'the law'. He jumped down, adjusted his clothing and went back to the bench. 'I nearly pissed myself", he announced. They carried on laughing and joking. (A-J, male, aged 44; observation diary)

In daycentres clowns are easily recognized; they are the 'life and soul' of the mealtime, joking with staff, chatting up women or, in one centre, playing basketball. Altruistic in nature, they often adopt weaker roofless people who need looking after, acting as protectors (against bullies) or pseudo-parents, making sure members are safe at night or when they pass out drunk. Their loudness and clowning antics can be intimidating, but act as a deterrent to onlookers and therefore act as protection from the outside world.

The Drug-addicted Culture

Drug addicts were not systematically observed on the streets, but they were present in the hostels included in the study. There they provided evidence of their perceptions of their subgroup. Drug addicts often hide away, preferring squats, stairwells, alleys or parks out of the sight of the public and police. In contrast with the street drinking culture, they seem less violent. Some drug-users speak about the 'old days' when as travellers they had more freedom, with travellers' sites perceived as a safe haven for drug use.

Daycentre/Hostel Groupies

Groupies are often seen sitting on the steps, pavement or nearby greens outside day centres, night-shelters and hostels that eject residents in the daytime. In the absence of anywhere else to go, they wait for opening time. Where appropriate, they even sleep rough in the vicinity. Groupies may also be members of, for example, the street drinking culture. Daycentres are often in locations where people can easily sustain their dependency, gain access to food or beg. They exist in most cities, but classic sites in London are:

The Lambeth Daycentre

Near Waterloo station, it offers off-street seating on benches or steps under the church porch. In the summer it has a small, partially secluded fenced-off lawned area with park benches. It is near good food supplies, pubs, off-licences and public toilets. Historically, amongst its groupies were members of the 'bull-ring' community that thrived in the nearby subway until its closure.

Riverpoint Daycentre

Situated in the crypt of a church near Shepherds Bush, offering off-street seating on a flight of stairs and boasting a nearby green with park bench seating to spend the hours between opening times. It is also conveniently situated near a shopping centre, which provides useful begging sites, public toilets and a source of food and drinks.

St Martin's in the Field Social Centre

Has off-street seating on the steps under the church porch. This is a good sunbathing spot and in the height of summer offers shade from the sun. This area is a popular tourist attraction and therefore has useful begging sites. A number of food outlets and public toilets are situated in the vicinity.

The Passage Daycentre

Situated near Victoria Street, which has numerous useful shop doorways and recesses for sleeping. It boasts a number of off-licences for the heavy drinker. There are also usefully designed buildings that offer protection from the rain or warm air vents at street level for outdoor heating in cold weather and numerous side streets that make quick getaways very easy.

Groupies tend to frequent one centre on a regular basis, forming friendships with others who attend. They often spend the night together, nearby on the streets, in squats or crashing on one friend's floor. Thus the groupies are not necessarily roofless, some have accommodation but are lonely or want to be with their drinking friends:

> 'Who, me love? No not me. I've never been homeless in my life. What made you think that I might have been? I started drinking after my two sons left home. The wife died and I lost my job. I come here because I get a free meal and you can have some good conversations.' (Toby, male, aged 50s; observation diary)

Groupie friendships appear to be very intense. Fights easily break out, especially over women and money. These are usually quickly settled by a 'good punch-up'. Where such disagreements are severe, one of the groupies may have to leave the area:

> Two men were searching for Danny because he owed them money. They were very aggressive with staff and clients. Danny escaped through a back exit and ran down the street. The men chased after him. Half the clients said they had to go because they were friends with or knew Danny and if the men didn't find him they would be back and after them. (Danny, male; observation diary)

> Staff are worried, no one has seen Danny since he ran away from the church. They tried to find out how or where he is from his friends, but they say 'he is keeping his head down'. Apparently he owes some money and can't afford to pay it back at the moment, so he has to stay away. The men looking for him are violent. (Danny, male; observation diary)

The specialist daycentre groupies (those with mental health problems) are less likely to be territorial. By using the same facilities they get to know each other well through group sessions and less formal contact. A common understanding of what it is like to live with mental health problems unites them. Although no attempt was made to systematically observe people with mental health problems, it became evident during the research that a separate group within the homeless culture existed with its own norms and values.

Precariously Housed

The homeless culture contains street users as well as rough sleepers. Thus some culture members are precariously housed, such as those living in temporary accommodation, hostels, B&Bs, squats or staying with friends. They often experience episodic rooflessness and may be part of any of the subcultures or create one of their own. The precariously housed often form groups centring on accommodation (for example, a squat, a person's home used as a flophouse). It would appear that when mixing within the homeless culture, they become insular, protecting each other from 'outsiders'. There are 'in jokes' that mark them out as a subgroup. At times there are deep, caring relationships; if one person is upset or 'down', the rest can be down or protective. Some see themselves as a family unit. These groups can be volatile; if there is an argument, it can easily turn into a brawl:

> 'It's great in the squat, it's like a family. Most of the time we get on well, you have to. There are times when you need to know when to keep yourself to yourself though. We have some good laughs, we have some good fights too. But that's how it is. Rolling round punching one minute, but if someone from outside starts on one of us, we start on them.' (Woza, male, aged 30ish; research diary)

Photograph 7.2 Victoria Embankment Gardens, London
Source: Megan Wilkinson, 1996.

Intermittent Participants

A number of individuals drift from daycentre to daycentre and town to town. Unlike other nomadic communities (travellers), they do not form groups, preferring to remain as individuals. However, they have a number of characteristics in common and they perceive themselves as belonging to a distinct subculture. They form two distinct groups:

a) Loners

They rarely make friends, they trust no one and find it difficult to use homeless facilities. They drift to avoid too much social contact and move if anyone gets too close. They tend to sleep alone on roofs, in sheds, behind bushes, in dark, secluded alleyways. Some can be very resistant to services aimed at helping them:

> 'I've tried everything with him. I've tried chatting to him, I've taken him out for a meal, everything. When it boils down, he is just plain nasty and selfish. He's out for himself, he only speaks to people if he wants something. He never asks, he just demands, 'buy us a burger', 'give us a cig'. He's never grateful. He is intimidating; you hear a lot of stories about his violence.' (daycentre worker)

Loners were driven by fear. They had a yearning for human contact yet pushed others away. Some felt mentally or psychologically disturbed by their experiences in life (rape, bullying) or had mental health problems and so isolated themselves. Some in the homeless culture began as loners, after making friends they settled into the culture in a particular area or at a specific daycentre:

> 'You have to be persistent with outreach work and gain people's trust. This may take time. We found one man living in an old shed. When we first made contact, he would not come to any of the facilities and did not want help. Over time we made friends and eventually he came into the night shelter. He'd been a train driver and after someone jumped in front of his train he had a nervous breakdown. He lost his home and everything, he felt too guilty and untouchable to mix with other people.' (outreach worker)

b) Drifters

These individuals come into a community, stay a short while and then move on. They don't want to be tied down or have to 'settle down'. It is difficult to observe drifters except at a distance or through other people's eyes via informal conversations and interviews. Often, they were ex-travellers. People appeared to drift out of boredom, for holidays or to find new areas where they had not outstayed their welcome. There appeared to be a tendency for drifters to run up rent arrears or get into trouble with police and then move on. They appeared to be disruptive when entering local homeless cultures and divisive when they left. Long-term roofless people viewed them as part of the culture, recognizing drifters over newcomers. Although members of some subgroups welcomed drifters, they took action to minimize the harm.

The following subgroups comprise homeless and ex-homeless people who have been in settled housing for at least five years. However, they are still very much a part of the street or homeless culture.

Homeless Advocates or Activists

Homeless advocates or activists are those ex-homeless people who decide to become politically or socially active and get involved with organizations working with or for the homeless. Some band together to form new organizations aimed at helping or

fighting on behalf of roofless people (NOMAD project in Sheffield). There were a number of reasons for this, including philanthropic, reciprocal and practical reasons.

This group often act, behave, dress and speak like the roofless. Their homes can be unkempt and dirty. They may still frequent the same daycentre, as client, staff or volunteer. Although not roofless, they still tend to identify themselves more with the roofless than the general housed population. For others there is a gradual movement along a continuum of responsibility that leads to increased confidence and full-time work. For them the role is an essential part of resettlement. This means that they may become part of two cultures, straddling the divide between homeless and mainstream cultures. From this position they act as facilitator attempting to help others make the transition. This is not an unusual phenomenon; it occurs within other subcultures, for example members of the deaf culture often alternate between the hearing and deaf cultures and act as mediators or facilitators between the two groups (Sainsbury 1986). This is also part of Goffman's (1959, 1974) theory about 'self' and the different roles that any one individual can play both simultaneously and according to the environment or setting they are in.

Homeless at Heart

The homeless at heart are found in every daycentre for the homeless. They are often lonely and isolated in their accommodation. At the daycentre they spend time with friends and mix in a culture that accepts them as they are. Daycentres are good for economic and practical reasons too. On benefits, people find it difficult to make ends meet. Daycentres provide cheap or free food, clothing and laundry facilities, or help with form-filling and accessing benefits. The homeless at heart tend to dress and speak like the roofless and it is difficult to tell them apart. They class themselves as members of the homeless culture. In the summer months some occasionally sleep rough with their friends. Unlike the episodic roofless (losing their housing through inviting friends round who then cause a nuisance), this group avoid having friends to stay and pay their rent regularly:

> 'Some people, they choose to be on the streets, see. The majority of people are not like it. After a while, like, it comes down to loneliness. They sleep rough for a month sort of thing, its ordinary you know. And that's all right, that's fine in summer. But if you do it 365 days, then it's a totally different game.' (Jez, male; research diary)

It would appear that the homeless at heart find it difficult to feel part of and function within mainstream society. This being so, they are effectively forced to remain within the homeless subculture where they feel accepted and where they receive a level of support that mainstream society is currently unwilling or unable to offer. In this they are not unusual. Other minority groups (for example, the deaf) form their own counter- or parallel cultures to counterbalance the need to feel and be perceived as 'normal' (Sainsbury 1986; Higgins 1980). In this sense the inverse of normalization is taking place. Rather than individuals being made to dress, act and behave in a manner compatible with mainstream society, they instead choose to create a society in which they are the norm. Sainsbury (1986) notes that it is not being deaf that

makes an individual a member of the deaf culture; it is through identification with the culture, shared experiences and participation in the culture. This is also true of the homeless culture: to be part of it the individual has to participate in it, identify themselves as homeless and share in the culture.

A similar development has been observed among servicemen under duress, for example the prisoners of war in the biography *The Miracle on the River Kwai* (Gordon 1963). Like many roofless people, they endured gruelling physical and mental hardships, poor diets, poor accommodation, and little or no medical assistance. The soldiers realized the importance of emotional and physical support, the need to belong to someone and be valued by someone. Without these ingredients people literally died from lack of care or no will to live. They set up a buddying scheme to ensure that every soldier had someone who cared and was responsible for looking after them. Among the roofless, such strategies were evident. Intense friendships and a sense of belonging offered emotional support and ensured the ontological safety of the individual as well as the group. The intense friendship and reciprocal care received within the homeless culture seems not to be prevalent in mainstream society. The lack of an alternative within housed society may contribute to the marginalization of people dependent on or in need of such care, effectively forcing people to remain within the homeless culture.

Each of the above subcultures forms an integral part of the homeless culture, but the culture is far more complex than groups of people that associate together. To understand it and its impact on its members and those who are excluded, we need to understand how people enter the culture, how they become a part of it, how the culture's norms and values are transmitted and what they are. It could be argued that in many ways the process of becoming roofless mirrors Goffman's (1961) description of the process of institutionalization. There is the initial inertia, the stripping of self-identity as clothes wear out, hygiene and personal care becomes impossible to maintain and the corporate identity is absorbed.[4] This depersonalization includes the loss of their name (street people are often known by nicknames and aliases), personal demonstrable history (photographs, keepsakes, forms of ID) and the loss of 'me' (the stories, memories attached to photographs and keepsakes).[5] There is a language and demeanour that needs to be adopted for survival. Homelessness then becomes one of Goffman's (1970) games, the rules of which need to be learned and accepted, before the actors within that game can play. The idea of learning to play the game is a form of institutionalization that is reinforced by mainstream society through labelling (Goffman 1961, 1968). Cumming and Henry (1961) disagree with Goffman, using Parson's (1951) theory to argue that both society and personality are action systems, and what is interesting is not the individual's personality nor the structure of society, but the interface between the two. Applied to homelessness, it is at this interface that the homeless culture is born.

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4 Doorn (2004b) for graphic discussion of Dutch homeless people's inertia into street life. Liebow (1993) offers an American account.

5 Doorn (2004b) discusses the importance of photographs. Also see Wilkinson (1996); Sontag (1977); Berger (1972).

Learning to 'be' Homeless

Sleeping rough does not make the individual a member of the homeless culture; it makes them roofless and vulnerable to exploitation and violence. People have to accept the culture and want to be part of it before they can belong (Illustration 7.1). Thus rooflessness appears to be a learned way of life. People experienced a definite divide between being outside and inside the culture; inclusion was perceived as 'fitting in'. Fitting in was at times a scary process. However, those who had been systematically emotionally dulled by life experiences found it less frightening. The streets were preferable, safer and less frightening than remaining in their previous accommodation.

Illustration 7.1 Becoming homeless

Some people appeared to ease into the homeless culture gradually before becoming roofless, whereas others are plunged into rooflessness, finding the experience terrifying and bewildering and then they become part of the homeless culture. Those easing in gradually were often the precariously housed and those who began mixing with street users and roofless people before they became roofless (to drink). This gradual, mutual withdrawal from mainstream society and mainstream society's withdrawal from the individual is identified in Cumming and Henry's (1961; Parsons 1951) disengagement theory. When applied to rooflessness, it involves a gradual decrease in interaction between the potentially roofless person and the social systems (family, education, work) they belong to. Disengagement results in the individual being less bound into mainstream society.

Engagement with mainstream society is an important stabilizing factor for the individual's ontological security (Giddens 1991). Applied to rooflessness, this suggests that disengagement may exacerbate existing feelings of isolation and disaffection, thereby accelerating the homeless process. Separation from the predictable norms, values and expectations of the mainstream may increase anxiety and fear and threaten ontological security, or create feelings akin to Durkheim's anomie (1952; Merton 1949). In an attempt to counterbalance this instability and threat to ontological security, it would appear that some take refuge within the homeless culture. In turn, the homeless culture acts as a strong anchor, reinforcing its values and creating a community in which the individual is accepted for who they are, thus creating stability and security. This need for security, order and predictability ties the homeless person into the homeless culture, making it difficult or impossible to leave and re-engage with the seemingly hostile mainstream society.

Disengagement theory does not account for those who had little or no contact with homeless culture prior to rooflessness and those suddenly becoming roofless. Those who suddenly move from housed society into rooflessness can experience an enormous culture shock.

Culture Shock

Culture shock can exist for all new entrants into rooflessness, but the shock appeared greater for those in self-denial about the precariousness of their housing situation and those who left accommodation abruptly.[6] The sudden rupture with reality, tangible fear and uncontrollability of the situation is enough to shake anyone's ontological foundations. The biggest culture shock came not from the way they perceived themselves, but the way other people perceived them:

> 'Living on the streets came as a big shock, partly because I never thought it would happen to me, but also because I'm not used to the people. People are not nice to me now. Most people walk straight by, as if you're nothing, as if you don't exist. Some look down their noses at you. Some are really horrible and call you names. Kids are the worst because they come up and kick you when you're lying down. They can give you a right kicking.' (Tommy, male, aged 35; rough sleeper)

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6   Also Doorn (2004b).

The roofless are often perceived to be deviant and mainstream society tends to judge and treat them accordingly. Culture shock occurred with the sudden imposition of a new social identity, an identity through which they were expected to create a sense of 'self' and conform to a set of norms. Once roofless, the process of degradation and dehumanization causes a crisis. The need to feel physically, psychologically and emotionally secure, to know that the 'self'[7] and social identity are stable and can remain so, becomes paramount. This rejection by mainstream society and its institutions forces the individual to seek out alternative stabilizing factors as protection against mental health problems that may develop or worsen. This point of struggle between the old identity and way of life and the roofless identity pushes people into joining the homeless culture. They are forced to learn how to look, act and speak like the roofless in order to survive both mentally and physically. Thus people do not mutually withdraw from society as society withdraws from them; instead, society pushes them out of the mainstream and isolates them (Townsend 1928; Sainsbury 1986). That is, their exclusion is externally applied rather than a process of self-exclusion or disengagement. That being so, a form of normalization takes place, where pressure externally applied causes people to conform.

The process of learning to be homeless is relatively short. It appears to take only two or three days for an individual living on the streets to learn how to be homeless and become acclimatized to parts of the homeless culture (Ravenhill 2000a). In that time, people get over the initial traumatic shock of sleeping rough, learn where to get food, clothing and laundry facilities, where the begging patches are (if they need one), which spots are claimed by someone else and make friends or acquaintances who tell them how to fit in and survive (Ravenhill 2000a). The individual then starts to acclimatize:

> 'The first night you're cold. You don't sleep. You keep walking around from place to place. You can't settle anywhere. The next day you are dead on your feet, desperate for sleep, but you daren't. The next night's not so bad, you get a little sleep. You get used to it really quickly, once you do, its not that bad. You start making friends and then that's it really.' (Jen, female; research diary)

New Horizon Youth Centre noted that after three weeks sleeping rough a young person feels mentally and physically fine, especially in the summer; they feel that they can cope with sleeping rough and in some cases are enjoying the experience. They also note that after three months, there is a noticeable decline in mental and physical health (Ravenhill 2000b). Homelessness is not an easy option:

> 'I had to sleep rough. I remember waking up with my hair and hand frozen on the pavement. It hurt a lot. Can you imagine that?' (Van, female; research diary)

Fitting In

People rarely sought out the homeless culture; this happened by accident. The novice was often spotted and befriended by someone acting as chaperone or guide. Although

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7   For example Mead (1934).

wary at first, individuals seemed to welcome this, as it avoided confrontations on the street and gave them a feeling of relative security. Drinkers tended to be befriended by drinkers, druggies by druggies. This was reciprocal as the old hand benefited from the novice's few useful possessions and perhaps even money:

'I was frightened. I slept in the bus station. I met someone there. He took me to the daycentre the next morning. He said he knew a girl in this hostel, so he asked the staff to see if there was a place for me.' (Jan, female, aged 20; hostel)

'Once on the streets you've got to get to know people; as long as you don't tell them too much. I met a couple of people, I knew him from his asking for change near where I lived. I slept rough with them.' (Anita, female, aged 16; hostel)

The process of fitting in is accelerated by intense, constant close contact. Friendships are formed that offer a form of counselling. This softens the blow of the triggers of rooflessness and culture shock. These friendships can have a calming effect on the panic experienced when first becoming roofless and they appear to stabilize the mood of people who are depressed, creating ontological security:

'Mixing with the crowd, sleeping rough with them, joining in the banter gradually brought me out of myself. I found a new way of coping, just by chatting with the other people on the streets. I got to know lots of people and became very pally, they helped me forget about my family in Denmark and my brothers in England.' (Chris, male, aged 30; housed five months)

One way of being absorbed into the culture is by being invited into a squat. It is usually men who invite women in. On the streets women are seen as more vulnerable and in need of protection. Men also like to have women around, assuming they will cook, clean and create a homely atmosphere. A woman in a squat can reduce the levels of aggression and violence and create the potential for a relationship. Reciprocally, women gain relative security, especially if one man looks after her. However, this is usually in exchange for sex and is no insurance against the ever-present danger of rape:

'Almost as soon as I arrived, I met the 'wrong people' and began living in squats. I didn't have to spend many nights sleeping out, because people kept inviting me back to their places and I usually went. I was offered one place, but I was raped there. After that I left the squatting scene and went to a hostel but that was worse than the squats.' (Gabriella, female, aged 35; housed three months)

Evidence suggested that many women were diverted away from sleeping rough, both into squats and, more disturbingly, into prostitution. Young women and vulnerable teenagers were targeted for prostitution in exchange for protection and accommodation (Browne 1998):

'I had to sleep rough with a couple of people I know. She was working [a prostitute], she offered to take me to meet the same man that got her working. But I said no.' (Charlie, female, aged 16; research diary)

In an attempt to fit in on the streets, vulnerable people were often drawn into lifestyles to which they were unaccustomed. For example, there was evidence of people gaining their drink or drug problem on the streets to fit in or as a learned practical tool of survival:

> 'When you're on the streets you drink yourself into a stupor just to get to sleep, especially if you're on your own.' (Kim, female; research diary)

> 'The drink keeps you warm. If you have money to spend, it's best spent on booze not food. Food doesn't warm you up, help you sleep, or help you go numb. The drink warms you up.' (Gravy, male, late 30s; research diary)

It is at this stage, just as the newly roofless person begins to learn the culture and change their behaviour, that the real identity crisis begins in earnest. Homeless people feel trapped into behaviour that as a housed person they would never have contemplated. Feelings of isolation from the housed world become intense, often prompting one of two reactions: a desperate bid to leave the homeless culture and rejoin housed society, or complete immersion in the homeless culture. The latter group appeared more likely to become homeless long term. This struggle for an identity becomes all the more complex for those with distorted self-images resulting from childhood experiences. This distortion often made it easier to adopt the roofless persona:

> 'When you've been abused, you feel dirty, you feel horrible. You feel everyone can see your dirt. It's like if they come near you, if they touch you, they will get dirty too. That makes life hard. You feel inferior at work. You feel inferior socially. You find it hard to make friends, have relationships. Then you feel like there is a big gap between you and the rest of the world. You hate it, but you can't bridge it. You feel numb and powerless, unable to move, unable to change the way life is.' (Jen, female; research diary)

The initial triggers of rooflessness appeared to weaken people's coping mechanisms, increasing their vulnerability and reliance on the homeless culture for support. This was further exacerbated by the exhaustion, dehydration and malnutrition experienced by many longer-term roofless people. There is a tendency to misinterpret this as the individual's 'personal weakness', when in fact it is more a reactive response to adverse circumstances (e.g. Glaser and Bridgeman 1999):

> 'I'm an alcoholic and have been for years. Certain things happened to me as a child and that made me start drinking. I started drinking at 13. I was bullied at school. I was spat on, teased and hit regularly.' (Aileen, female, aged 39; hostel)

> 'I trained to be a construction worker, during training and after on the job I still noticed that I found it difficult to 'fit in', mix with other people socially, and generally make friends. This made me feel different. I felt stuck and didn't know how to change things, how to let people be friends and how to be friends with them. Something must be wrong with me to feel so socially inept.' (Tommy, male, aged 30; rough sleeper)

The loss of their old identity came as a welcome relief for some. They recreated themselves, changed their name and adopted unusual dress styles. In mainstream

society they felt anonymous, whereas on the streets they were known. This identity crisis appeared more acute for the older newly roofless (mid-twenties and older). It was important to this older group of newly roofless people to be viewed as something other than roofless.[8] They perceived themselves in terms of their pre-roofless status. Men perceived themselves in terms of their job title and family status, whereas women perceived themselves in terms of parental occupation or motherhood. Both also used sub-identifiers, including good family background and educational achievements. They used negative as well as positive labels to describe themselves, convey status and indicate their self-worth.

The Culture

Once an individual has acclimatized to rooflessness and survived the first few days and weeks, it becomes increasingly difficult to help them move back into mainstream society (Ravenhill 2000a). This is, in part, because of the intensity and strength of the networks and friendships formed early on. Separation from such intense friendships can be painful and may become increasingly difficult the longer a person remains within the homeless culture. These cohesive friendships and informal support networks are at the heart of the culture's continued existence.

Strong Intense Friendship

The strong intense friendships are often described in familial terms. Friends are described as being like family or brothers, involving trusting the other with personal biographical details. They offer interdependence on each other for protection, stability and comfort. In this they are not unusual; such intense friendships also exist in the armed forces or university halls of residence. Among the roofless a paradoxical trust appears to exist; they trust each other with their lives, but not with their money. It is the shared experiences, especially of hardships, that create this trust (Highgate 2000). The depth of friendship was described thus:

'We love each other. Not like that, not that kind of love. We're like brothers, we're family. We sleep together; not sex, we're not into that. We curl up at the back of the car park and he puts his head on my stomach. Once we were all curled up and he put his arm over me, I said, 'What the bloody hell do you think you're doing?' He said he didn't have a missus and he didn't have a teddy to cuddle up to, so I would have to do. He cares for me. He sees I'm all right. We care about each other.' (Jason, male; research diary)

'I took sandwiches round the bull-ring, there was a woman there who fainted. She looked very ill. The men looked like really hard men, you wouldn't imagine them having any compassion. They picked her up and put her on a settee they had under there. I said 'Shouldn't we call an ambulance?' They told me she'd discharged herself from hospital that morning. The doctors said there was nothing they could do for her. She only had a matter of days left. 'She's come home to die', they said.' (church minister, Vauxhall)

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8   Smith and Ravenhill (2007) explore this in greater detail.

'Everyone helps each other you know. You always have the community like. They don't just watch you die. There's an old boy with diarrhoea. Nobody's helping him but us, the people on the streets. Like when he shits himself it isn't left, it isn't Joe Bloggs that wipes his arse, you know.' (Tony, male, aged 31; rough sleeper)

Even where less intense friendships exist, the feeling may still be strong enough to determine whether a person tries to settle into their own tenancy or give it up. One of the causes of episodic roof/homelessness is that people miss their friends on the streets once they are housed:[9]

'What I really want to do is go back to my old drinking ground to meet the people I've known for two or three years, but I know that I can't because everything I've worked for will go pear-shaped. They would just come, live here and wreck the place. Now I have to just forget about all of them, but I'm finding it really hard.' (Chris, male, aged 30; housed five months)

As established, the homeless community provides ontological security to its members and one important part of that security is created through the informal counselling service offered to its members through friendships – a service available 24 hours a day.

Informal Counselling and Support System

Mental ill-health and depression in particular are both a trigger and a product of rooflessness (Marcuse 1988). The nature of the homeless culture means that people are more tolerant and ready to listen. There is great safety in the knowledge that other people know how you feel:

'You need people to understand what you're on about, but they don't. They don't give a shit. Your family get fed up with you going on about stuff, they don't understand. You go to the doctors, the hospital and they look at you as though you're mental. On the streets people care, they know where you've been. They know what it's like. And you feel 'great, at last, I'm not mad'. They've been through it too and they know what it's like.' (Ben, male; research diary)

Some counselling skills were acquired through people's own contact with the mental health system. During that time they amassed enough knowledge to spot tell-tale signs and patterns of behaviour and know what to do and say to divert people away from suicidal feelings or deep depression. This function of the homeless community literally saved lives. Even where counselling skills were not evident, the deep caring and support often pulled people through:

A new woman was brought to the drop-in this evening. She was drunk and sleepy, and had obviously been crying a lot. Her friends explained, her dad had died and her family did not want her to go to the funeral. They could not stop her crying, she cried all day and night and they were afraid that she would make herself ill. Her friends were coping with the situation the only way they knew how. They begged or stole enough cans of lager for her

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9   Also Dane (1998).

to drink and pass out for a few hours. Every time she woke up she cried, so they acquired more cans until they could knock her out again. (observation diary)

Evidence suggests that these support systems made leaving the streets difficult, as the vulnerable often had to leave the people they had relied on for their life, sanity and survival. It was hard to let go of that level of support, knowing that there was no equivalent for them in mainstream society. Conversely, high dependency by vulnerable people on such support systems left them open to abuse. Interdependence among vulnerable people, at times, endangered friends and groups within the homeless culture. Those perceived to be strong were relied on heavily. The intense pressure of supporting others emotionally and psychologically, whilst still vulnerable, then pushed them down, causing cycles of depression and episodic rooflessness, plus a return to drinking and substance abuse. Thus, this dependence could result in a negative reciprocal relationship that locked people into the homeless culture and prevented them leaving:

'Everyone in the group sees me as strong, as getting my life together, I'm not. They all tell me their problems and expect me to have the answer. I feel swamped and it makes me not want to meet them. I can't cope with them. If I don't meet up, I'm on my own, bored, lonely, then I'm on a downer and I can't afford a downer, not again.' (Robbie, male; research diary)

It was evident that relationships were often used for intense support, especially by the mentally ill. Some became very dependent on their partner. The negative impact is increased when a partner is a self-harmer.[10] It would appear that self-harm was used to blackmail the partner into caring for them or to make the partner responsible for their mood swings and actions. This increased difficulties for those ensnared in someone else's cycles of depression and mental ill-health:

'I just got out of hospital, with suspected concussion. It was my girlfriend, we were at the bus stop and she pulls out this knife and says that she's going to slit her throat. So I grabbed her arm to get the knife off her. She's done it before you know, cut herself, lots of times. She's been in and out of hospital. Anyway, I tries to get this knife and I wrestles her to the ground. No word of a lie, we were rolling in the road. She is strong when she's like that. I got the knife, but she runs into the shopping centre and I chases after her. Now people think I'm going for her, because I have the knife and she's screaming. But if I don't catch her she'll do something else to herself; there's no stopping her when she's like this. I don't know if I slipped or was tripped, but I smacked my head on the floor and went out. They got an ambulance and everything. She came with me like, but she cut her throat that night and now she's in hospital again.' (Fenny, male, late 20s; research diary)

Last week his girlfriend cut herself. She went to his flat. He told her they were finished and he couldn't cope anymore, he left her in the hallway. She was banging, shouting and screaming and neighbours called the police. She kicked a hole in the door and cut herself again. She smeared blood all over the walls. He is afraid to go back to the flat and thinks he may get evicted. (Fenny, male, late 20s; observation diary)

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10 Self-harm includes cutting, burning, punching or banging head against walls and suicide attempts.

Some homeless people were exceptionally needy. There appeared to be a void, a vacuum inside that nothing filled; there was almost a childlike need to be loved and cared for. These people had often spent large proportions of their life in and out of institutions, especially psychiatric hospitals. They learned coping strategies involving high dependency on others, use of casualty facilities and any means available to gain attention from people in caring roles (such as daycentre staff, nurses). Institutional care or attention from professionals was interpreted as a form of affection that temporarily filled the vacuum:

> Tim was very upset today; he had taken a lot of drugs. He seemed to move and speak in slow motion. A-J explained that Tim was upset because he had given him some jumpers and Sanjay at the burger bar had let him use his place for a wash and shave. He was upset because he couldn't believe that anyone could be so nice to him. A-J said he couldn't cope with the feelings caused by people treating him like this, so he got stoned. He explained, 'Tim gets it worse in the middle of the night, he gets lonely and wants to be loved. He travels all over London to go to casualty because he can usually sit there for four hours and sometimes get a cup of tea. He has company there and at the end of the evening he gets a nurse to sit down with him and listen. He just wants love and that's how he gets it. (observation diary)

This kind of use of both self-harming and casualty departments would appear to be a means for coping with severe emotional or psychological distress, often stemming from childhood experiences. Alex explained it like this:

> 'It's like you're in pain, inside, deep inside. You remember stuff, stuff in your childhood. You hurt and you need to let the pain out, you need the pain to stop. When you cut, it's like you put an open wound on the outside, so people can see how much you hurt. It makes your brain focus on the pain on the outside instead of the pain inside. So it's kind of a release. You go to casualty, and they stitch you up and if you're lucky they talk to you and you feel human. Or they treat you like a mad person and you feel worse, but then you have a bandage and a cut that shows you hurt. You look after your cut and nurse it better. You look after it like you want to the pain inside. Once it's all healed up, and the pain on the inside starts building again, you have to cut to let it out or you'd freak out.' (Alex, male, aged 35; rough sleeper, long-term roofless)

People with such intense need can be a drain on the rest of the homeless community and can cause considerable distress. Indeed self-harmers had a dual impact on the people around them. Members of the homeless community try to prevent them from harming and feel guilty if they do not succeed. Simultaneously, self-harming marks individuals out as vulnerable and in need of care. Through a mixture of threatened and actual harm, they create an environment around themselves that is protective, attentive and allows them to be dependent on others. This dependence and attention is then interpreted as love and caring.

Intense friendships and interdependence do not result in equality within the homeless culture. Although there is great tolerance and understanding, there is still a very clear hierarchy and pecking order.

Hierarchies and Pecking Orders

A strange inverse of mainstream society's hierarchies and pecking orders exist within the homeless culture. The homeless person with the most problems and difficulties ranks the highest. For example, survival of the worst child abuse, addiction, the most roofless episodes or longest duration of rooflessness is respected more than qualifications, social class or employment record. On the street, sclerosis of the liver or hepatitis are badges of merit. These inverses occur elsewhere in society, for example Phillips (2006) discusses young people perceiving ASBOs (anti-social behaviour orders) as status symbols. Inverse hierarchies within the homeless community seem to stem from the perception of life as an endurance test, with survival being the key factor. Survival is perceived as strength of character, not weakness. They know people who did not survive; they died or disappeared into oblivion through chronic substance abuse or drugs used to control mental illness. Survival and endurance was worn as a badge of honour, a source of pride and status to be boasted about. The more badges, the higher up the hierarchical ladder the individual moves. This boasting and status is in some respect cathartic:

> 'No one messes with A-J, he's been at this for too long. He knows everyone there is to know. People like him, they trust him, he's a good sort. He'll look after anyone. There's nothing he hasn't done, there's nowhere he hasn't been. He knows you know, he knows. He's king, ha ha! king.' (Jason, male; long-term roofless; research diary)

> '16-year-olds can't know what it's like to be really homeless, they haven't been homeless long enough. People here say they are going over on coke they think they're drug addicts, but they're not. They wouldn't be able to take the real stuff I've taken in the past. They aren't heavy users like I used to be. Some people here wish they'd a drug habit, but all they really want is to belong to people, they're sad.' (Van, female; research diary)

These inverse hierarchies caused problems at hostels and daycentres, especially when the newly homeless did not recognize them. Problems were also caused by rehoused daycentre users reversing the hierarchies as they tried to resettle. There was evidence of intolerance towards younger homeless people in particular and those with small or no drink/drug problems. The tension within the hierarchies created common bonds between residents who perceived themselves as 'the same grade'. This stimulated the creation of informal support networks between peers. However, peer pressure at times had a negative impact as it deterred people from leaving the homeless culture. Leaving was seen by some as a sign of weakness and failure to cope with rooflessness. Furthermore, it is difficult to exchange the respect gained within the homeless culture for obscurity in housed society:

> 'They couldn't hack the life, they wanted out. It's hard being homeless, you've either got what it takes or you haven't. They haven't. They are better off out of it if they can't hack it.' (Woodsy, male; research diary)

Failure in the resettlement process appeared to be another badge of honour, proving they had deep-seated complex multiple problems unlike other roofless people. The inverse hierarchy structures within the homeless community created a sense of respect

for people not respected in mainstream society. Thus inverse hierarchies act as a strong incentive to remain roofless, or within the hostel system. More disturbingly, there is a macabre side to the inverse hierarchies. Women appeared to boast about the number of rapes like trophies. Criminal records were a source of pride, providing it was respectable crime (e.g. violence, theft). A record for GBH or murder did not necessarily create friends, but ensured privacy and no bullying. Crimes like child abuse, rape or violence against the elderly were not respectable and these needed to be kept quiet:

> 'I had all my money stolen along with my spare clothes, shoes the lot. I wasn't streetwise. I kept myself to myself after that. I kept myself safe, I just told everyone I'd been inside for attempted murder and no one came near me.' (Roland, male, aged 52; housed 17 years)

Inverse hierarchies, in part, developed and are reinforced by the homeless industry, medical profession, social services and housing departments. For example, when applying for social housing, the more problems you have the more points you gain. If you have complex multiple needs, you are a 'special case', one meriting more time and more elaborate support. In court, if you can claim to have a dysfunctional family, this is a useful status that excuses or dilutes the strength of the crime committed. There was evidence to suggest that language and jargon of professionals is incorporated into the homeless culture's vocabulary. Common understandings were assumed that shortened explanations of common problems or sets of circumstances. This avoided painful, complicated explanations. The use of jargon acted as a series of labels adopted by people within the homeless community that in mainstream society would have been viewed as negative, embarrassing or shameful. These labels represent more badges of honour.

Hierarchies are not always accepted passively. The homeless culture is very volatile; aggressive arguments and violence can erupt at any time. There are times when there is jostling for power, status and respect. Many of these power struggles take place around territorial ownership and, to a lesser degree, the ownership of people (often women or weaker people dependent on the group) within that territory.

A Violent Culture

Violence within the homeless culture is paradoxically as much a part of the culture as looking out for each other. Conflict can occur within groups, between groups or between homeless culture members and 'outsiders'. Angry, violent (especially) men are common within the culture. A number have been diagnosed with behavioural problems and have trouble controlling their tempers and violent outbursts. Many are angry at 'life' and at the way things have turned out for them. There were also feelings of intense frustration and anger at a system that excluded them from accommodation or the help they needed. This led to intolerance and provoked anger at the apparent injustice of much smaller matters. When mixed with drink or drugs, little incidents easily sparked off rage and violent outbursts:

> 'Last night Jim came in pissed out of his head. Packer sat on Jim's box and broke it. Jim lost it. He went for him. I mean he really went for him. They were rolling round

everywhere, punching each other. They broke nearly all the furniture we had. But that's how it is.' (Woza, male; squat; research diary)

'I enjoyed living with travellers. Sometimes it could be a dangerous place. I remember seeing PH beating the shit out of Daz with a shovel for breaking an ambulance window. Site politics, I suppose.' (Debs, female, aged 28; hostel, long-term homeless)

To a certain extent such incidents were not perceived by the homeless culture as violent. Instead they tended to be viewed as a fight among friends or family, a good way of 'airing a grievance' or 'clearing the air'. Some would even say it was 'a good laugh'. Those who were not accustomed to living with violence before they became roofless soon acclimatized to it and learned strategies to keep themselves safe and deal with their fear. Some victims of domestic violence or physical child abuse appeared to find the volatile and violent atmosphere both exciting and comforting, yet simultaneously terrifying. People spoke of a 'buzz' and associated this with being 'like a drug'. This offers insight into why some people enter a series of violent relationships. A combination of violence being perceived as the norm and the strong anti-police culture meant that most crimes within the homeless culture were never reported:

'I would be naive not to admit that what goes on in their world I know very little about. Most crimes, most acts of violence, and certainly there is a lot of bullying going on, and most of that will never make it to the crime sheet.' (constable, Victoria area police patrol)

In many ways the violence and people's reaction to it shaped the homeless culture. Those experiencing the violence as intimidating or terrifying, either withdrew from the culture or looked to link with a 'protector'. Protectors were often violent people who controlled their violence and liked the power and status of protecting others. Violence and the fear of violence deterred some people from using hostels or daycentres, making the streets appear safer. This could be catastrophic for the newly homeless. There were long-term roofless people who had witnessed violence in hostels in the early days of rooflessness and were so afraid they refused any future help that involved living in a hostel. However, over time, most appeared to become blunted, even immune to their instinctive fear of violence. This enabled them to function within the culture as impassive spectators, whilst remaining vigilant against becoming the victim or being caught up in the middle of the violence. Thus violence was tolerated and incorporated into the culture as a normal everyday occurrence.

One of the biggest triggers of violence was alcohol, fuelled by the ever-present latent anger waiting to be released. Disputes over begging patches also triggered violence. The literature establishes begging as a strong feature of the homeless culture (Doorn 2000; Vision 21 2000; Danczuk 2000; Dean 1999). Key begging patches were fought over and owned by individuals. In some areas beggars had to gain permission and were allocated timeslots. Time on a patch was sometimes paid for or protection money charged. Begging on someone else's patch was perceived as akin to stealing and left people in serious danger of being beaten. The length of time individuals spent begging seemed to depend on how much money they needed and

how long it took to raise that amount of money. Some begged to raise enough money for a meal or hostel fee, others for alcohol or drug money. It was often treated as a chore rather than an enjoyable experience.

Photograph 7.3 Begging
Source: Megan Wilkinson, 1996.

Photograph 7.4 Begging while asleep
Source: Megan Wilkinson, 1996.

> 'It doesn't sound a lot to have to get up and sit on the streets and beg, but some days it takes a lot to move you know, to actually get up and move, to walk. Normally I don't do a lot of begging, I do it to try and scrape enough together. I don't want to beg for too long today. I'd be happy if I managed a fiver for the day.' (Tony, male, aged 31; rough sleeper)

Many found it embarrassing when they first started to beg and would not make eye contact, or would read a book or do puzzles. Over time they became acclimatized, had their self-respect sufficiently crushed or were simply desperate for money. Begging was more common among those with chronic substance abuse problems and easier to do when numbed by those substances. Contrary to Vision 21's (2000) findings, where over two-thirds of their sample begged, the majority of people in this study refused to beg and were offended that people assumed that they did. Most survived on benefit money, the shared resources of their street friends and in some cases shoplifting or busking. *Big Issue* selling was not seen as begging, but there were a number that would not sell it. For many it seemed important to state that they did not beg as a means of defining their lifestyle and status. People refusing to beg perceived themselves as higher in status than those who did, with *Big Issue* sellers and buskers somewhere in the middle.

There are two dominant types of beggar: aggressive and passive. Aggressive beggars directly approach people for money (Illustration 7.2). Some use intimidation, but most simply ask for money. They often stand or walk around well-populated areas, for example bus stations, on trains or main pedestrian routes. In contrast, passive beggars usually sit on the pavement waiting for passers-by to drop money into a hat or empty cup. Some make it a little more obvious by adding a sign: 'Hungry and Homeless' or 'Please Help'. Others add pathos by holding out a silent hand and making eye contact with people.[11]
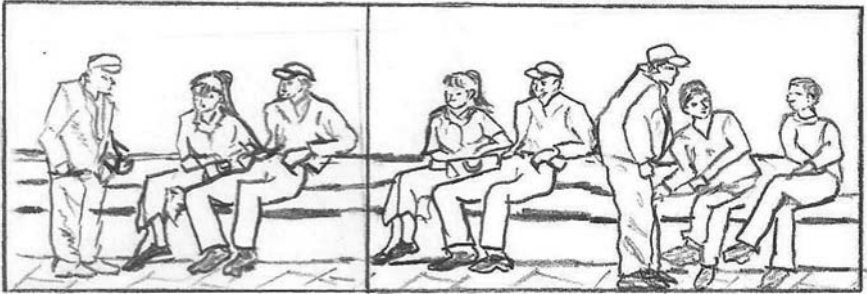
Illustration 7.2 Aggressive begging

There are other forms of begging. One involves developing a 'sob' story and touring different projects, churches or vicarages, hoping for a financial handout. Another is the passive–aggressive beggar – passive because they tend not to approach people or verbally ask for money, but aggressive because of the place they choose to sit, by cash machines, for example. A police spokesman viewed this form of begging as aggressive because it can leave people feeling intimidated, in fear of crime or morally obliged to give. Police in some areas (for example, the Charing Cross district, including the British Rail station, The Strand and Leicester Square) had a liberal attitude to begging, recognizing that public safety was the main issue; they turned a blind eye to passive begging and intervened to stop aggressive and passive–aggressive begging.

The police are often drawn into the homeless industry. Evidence suggests that in some areas, they also become part of the periphery of the homeless culture and were involved in shaping the culture. A rapport built up over a number of years with rough sleepers developing a level of trust. The roofless knew the rules for that area and followed them. Newcomers to the area or street were then obvious and both the homeless community and police advised them about facilities and acceptable behaviour. Police spoke of a reciprocal element between themselves, the roofless and shopkeepers. Roofless people, though they may steal from shops during the day, inadvertently acted as security guards at night and this relationship was recognizable by all.

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11 Doorn (2000) discusses begging in Utrecht.

The homeless culture reels from extreme to extreme with the intense friendships, yet violent relationships, times of bullying and times for romance and periods of fun and happiness in the depths of despair. Women played a strong and vibrant role within the culture. Their presence triggered cohesion and division, peace and war, romance and devastation.

Women within the Homeless Culture[12]

There was a reciprocal male–female relationship within the culture that calmed volatile atmospheres and created a form of protection. There were sexual relationships among the roofless and within the homeless culture generally. These served a number of purposes, including the possibility of accommodation if one partner had somewhere to live, and a means for feeling 'normal' within an abnormal situation. Relationships met the need to belong and be valued. They demonstrated that roofless people were not completely down and out. They were worth something. Moreover, their manhood or womanhood still existed. Within the culture's inverse hierarchy, having a partner was seen as a badge of honour, especially for men. Some men viewed women as a possession, merely a sexual object to own, sell, demand sex from or rape if consent was not given:

> 'I was raped the day after I arrived in Exeter in a graveyard. It was another tramp. He wouldn't leave me alone. He was very violent. He threatened me with a dog chain and scissors. He shoved his penis up my arse. He owns some of the girls in the area and he thought he owned me.' (Debs, female, aged 28; hostel, long-term homeless)

> 'Some men say they are protecting you, but really they are pimping off you, using you. They just beat you up. It comes to a point when you've no choice but to do it.' (Tessa, female, aged 36; temporary accommodation, long-term homeless)

However distasteful, some long-term roofless women appeared happy to accept male dominance and ownership. These women were more likely to have experienced serial domestic violent relationships, sustained sexual abuse as children, have learning difficulties or lower intellectual ability and have little self-esteem or self-worth.

Another part of people's desire to feel 'normal' was the need for fun. Members of the homeless culture had plenty of fun times. They organized events and outings, which often involved alcohol and a little illegal activity (stealing, fare evasion).

Having Fun!

Rooflessness can be very dull and boring. There are few places to go once daycentres close at night, for the weekend or for bank holidays. Those within the culture who are capable of organization and keeping track of days and time sometimes co-ordinate and arrange special events for the others. However, things invariably go awry, but this is part of the fun:

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12 For further reading on women's homelessness see Reeve et al. (2007); Liebow (1993).

A-J's friends made arrangements with some of the women for a barbecue. The men were in charge of building a barbecue on a nearby building site and the women were to bring the meat. There was great excitement as the event was planned everything was arranged for Sunday at 12pm. The men managed to steal onions, tomatoes and some slightly rotten vegetables, from behind the supermarket. They broke into the building site, found a grate lid and some bricks and set up a barbecue. They hid their stockpile of lager and set off to meet the women. The women overslept and didn't arrive until 3pm, by which time most of the stockpile of lager had gone. Having forgotten to steal some meat they decided to go ahead with the barbecue and had grilled tomatoes, onions and mouldy vegetables. (observation diary)

Camaraderie was an essential part of the homeless culture. The ability to banter served as a kind of entry visa to more relaxed, less intimate friendship within the culture. It facilitated bonding with people, building trust and deepening friendships and relationships. Camaraderie identified insiders from outsiders. The gentle chiding and friendly goading was used to communicate group rules to newcomers, without causing confrontations or aggression. Thus humour and camaraderie served specific purposes (Table 7.1):

Table 7.1 The purpose of humour and camaraderie

Let off steam	Sharing funny stories, having a good laugh released/diffused tension and aggression, thereby reducing violent atmospheres.
Break the tension in emotionally charged situations	Puns and play-on-word games released emotional tension in situations such as group discussions on incest, death or suicide attempts. Untreated, such emotional situations may lead to drink/drug binges, suicidal feelings, violence or self-harming.
Cheer up	Those recognising the danger signs when the whole group felt 'down', lightened the atmosphere with humour to avoid the dangers of depression within the group.
The funny side of life	By making sad/awful events seem funny people fulfilled their need to talk about issues, without dampening everyone's spirit.

'You has to see the funny side. The harder it gets, the more you needs to laugh. You go mad if you don't. Sometimes it's a bit sick, but life's a bit sick and you has to see the funny side.' (Don, male; research diary)

Sometimes, despite people's best efforts, humour and fun collapsed into trips down memory lane. A large proportion of the observations were carried out whilst the researcher was pregnant, thus researcher presence often triggered memories of parenthood or their own childhood. At times, an intense sense of loss caused by separation from their children was reawakened for some.

Homeless People and their Children

Part of the process of becoming roofless for many older people involved the loss of children (through relationship breakdown or care orders). This created enormous feelings of guilt. Mothers were affected more than fathers, as their children were more likely to go into care than remain with their partner. Mixed with the grief and despair was a sense of failure. Some felt they had failed their children and at being a mother. Anger about the situation translated into a reactive response, motivating some people to try and resolve the problems that led to rooflessness, in an attempt to win back their children (or, in the case of some men, to win back their child's affection). Anger was expressed about themselves and the 'system' they felt failed them and their children. Crushed by the enormity of that task and their own continuing problems, despair gave some an excuse to give up on themselves and life. Those people from ethnic minority heritage, especially Asian women, had an added dimension as those thrown out of or fleeing the marital or paternal home had to fight their culture or religion too. It is very difficult to help women in particular back into mainstream society – a world where they feel guilty and that people frown on them because they were not 'good mothers'. The grief and guilt experienced by some was acute and debilitating.

Fathers as well as mothers felt this deep loss. At times the pain of loss appeared to lie dormant until something (for example, the researcher's pregnancy) reminded them. For others it was an ever-present part of their daily life. Memories of lost children had a direct impact on behaviour and levels of substance abuse – substance abuse being a coping strategy:

> Since he found out that he couldn't see his children again, his drinking increased dramatically, the number of assaults committed increased and the amount of time in police cells or court increased. There has even been a short spell in prison. His friends are worried that if his drinking doesn't slow down, he will not survive the summer. Already his face and nose are red and liver inflamed. His dress sense has changed from 'dapper' to outrageous. (He died 2 years later.) (A-J, male; observation diary)

> 'If my kids go into adoption there is no way I am coming off smack, that's all I'll have left and I'll need it then to go on living.' (Van, female; research diary)

How people left their children was important. Those parents able to choose how they left their children (placing them with relatives or in care) coped better than those who could not. Although they grieved and pined for their children, they knew they had made the safest or wisest choice:

> 'By the time my daughter was 4, I was having drinking binges so heavy that I'd blackout. One time while I was unconscious, she put lipstick all over her face, broke all my fags, emptied milk and eggs all over the kitchen floor and emptied some drawers. Another time I came round and found my mother in the flat. She told me that she'd [daughter] been standing on the windowsill and opened the window. If she hadn't come when she did she might have fallen out. She was taken into care, but because I reported myself to social services. While I was drunk I hit her, she didn't have any bruises nor nothing, but I was

frightened of what else I might do if there were a next time. She went to live with my mother.' (Aileen, female, aged 39; hostel, long-term roofless)

Roofless parents were often eager to talk about their children, stating proudly, 'I'm a dad you know', or giving details of their children's age and gender, any news they heard and any hopes of meeting them again. Jason had even saved a gift to give his daughter on her eighteenth birthday:

> Jason was drunk tonight and looking ill. He told me about his daughter. He said he was only hanging on [to life] until she was 18. He has 18 months to go. He has a gold locket and chain that belonged to his mother and he wants to pass it on to his daughter on her 18th birthday. After that he says there is nothing left. His friends say he hasn't got very long to live now unless he stops his drinking. (He died two months later.) (observation diary)

The researcher's pregnancy opened up opportunities for people to reminisce about their own pregnancy or memories of their partners. This appeared to be cathartic, creating an opportunity to talk through some of the grief they felt at being shut out of their children's lives. They were keen to follow the progress of the researcher's pregnancy, feeling the bump and offering advice. The telling of birth horror stories was common practice in both the homeless culture and mainstream society. Not everyone coped with the researcher's pregnancy and the illusion of 'domestic bliss' and 'happy families' that the pregnancy seemed to represent. Some people moved away when conversations turned to pregnancy or babies. The most hostile response, however, was encountered after the baby was born and we visited the project:

> 'You come here with your fucking picture of happiness and your fucking domestic bliss on show. What about the rest of us fucking no-hopers, left behind on the shit heap, struggling to get a fag or a drink. We're fucked up and you bring a kid round to see it. You're fucking mad, fucking mental. Fuck you.' (Billy, male; observation diary)

It seemed that sometimes social services and some rehabilitation programmes used roofless women's children as 'carrots', rewards for achievement and good behaviour (they can have their children if they do 'well'). For some this tactic worked, they turned their lives around and under monitoring succeeded in getting their children back. However, for those with complex problems, 'treat and reward' simply increased feelings of guilt and failure. This tactic was used even when the chances of being given custody were remote. This appeared to be cruel, destructive and caused unnecessary pain.

Death on the Street[13]

Death is an ever-present part of the homeless culture; the long-term members knew of at least one roofless person's death, most knew of several. The longer a person remained in the culture or the more severe their substance abuse, the greater the chance that they had seen a close friend die of street-, drink- or drug-related diseases.

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13 Also Cockersell (2006).

The degree of impact from homeless deaths varied according to people's relationship to the dead person and the number of friends they had seen die. At times, feelings were so deep that they transcended words. During the observation period there were four deaths. The homeless culture (including daycentre or hostel staff) is very tight-knit and any death never fails to have an impact both in the immediate and, for some, the long term.

Experienced hostel or daycentre staff were prepared for the fallout from the death of a community member, and often grieved with their clients. St Martin's in the Field Social Centre hold annual memorial services for homeless people that die, allowing their peers time to grieve and remember, putting a little dignity back into their death – despite the frequent mismanagement of roofless deaths (UNLEASH 1998). One inexperienced staff member found the reaction of their clients to a death beyond comprehension: 'You would have thought that they'd have got used to it by now. It happens often enough' (Colin; observation diary)

Death within the homeless culture, at times, triggered the memory of previous deaths, which exacerbated grief. People appeared to re-experience the pain of all the deaths or pseudo-deaths (death of a relationship or job) experienced during their lifetime. The feelings were as raw as if these deaths had happened recently and were grieved for again. This appeared similar to PTSD (post-traumatic stress disorder) symptoms, with flashback memories making them relive events, pain and feelings of guilt that they survived:

> Jason died Tuesday. The mood was different tonight. Both hyper and sombre at the same time: very strange. Conversations seemed to be dominated by death. A-J related his father's death. He died when he was 8. He thinks he killed him. He was a tearaway and was naughty at school that day. He thinks this gave his dad a heart attack. Alec cried about his son's hit-and-run accident. Rich talked about his marriage, how it ended, how he missed his children and wife. (observation diary)

Such memories appeared to trigger severe depression or rage or they alternated between the two. This was both eased and exacerbated by substance abuse. Trauma was compounded by feelings of guilt that they had not been there or tried but could not save their friend. One man had given his best friend mouth-to-mouth resuscitation to keep him alive until the ambulance came, but he died two days later.

Surprisingly there were those who had a totally different reaction. Many long-term members of the homeless culture suffered physical, emotional and mental pain and torture daily; their closest friends were happy for them, even envious of them when they died: 'the lucky bugger'. Members of the homeless culture often knew who was dying. They recognized the signs, the physical and mental deterioration, the dangerous volumes of alcohol or drugs being consumed. Even though death was a welcome relief, it was important to their friends that they were remembered, that their name was known, that someone in their family wanted the body and that they were buried properly:

> 'He showed us his memorial wall. A huge picture made out of lots of photographs of all the people he has known. In some photographs people are quite well dressed, others he obviously met on the street. He pointed to face after face after face, saying he's dead, he's

dead now, she's gone, they're all dead now. Most of the people on that wall were dead. The rest were in a bad way or drinking somewhere. It was awful.' (Dorothy, staff; research diary)

The last two sections of this chapter discuss important aspects of the homeless culture, which are often disregarded or overlooked and somehow separated from the culture: namely the role of the homeless industry and the use of space and construction by the roofless. The first is part of the way the culture interacts with mainstream society; the homeless industry straddles the two cultures offering a gateway between them. The latter is part of self-expression, ingenuity and a practical demonstration of problem-solving skills.

Homeless Industry

The homeless industry, primarily involved in prevention and resolving rooflessness, is an inevitable part of the homeless culture and so is involved in constructing and shaping the culture. As established hostels and daycentres become meeting places, places to socialize, they create social networks and perpetuate the culture. Precarious housing (hostels) and resettlement are functions of the homeless industry yet facets of the homeless culture. This is not a failing of the homeless industry. It helps create a more stable unified subculture and facilitates the flow of useful information between members. It firmly links the subculture to mainstream society.

Structural facilities (hospitals, casualty, police, homeless persons' units) are part of the homeless industry and become institutions within the homeless culture. They create social networks, shape the culture's language and pass on useful knowledge. Similarly, the legislative process shapes the demographic profile of the homeless culture, opening and closing entry and exit routes in and out of the culture.

Constructions and Space

A feature of homeless culture is the use of and identification of physical space on the streets.[14] The concept of space is far deeper than simply a set of sleeping or begging patches. It is no accident that areas with public toilets, off-licences, overhanging roofs, recessed doorways and buildings with hot-air vents are frequented by the roofless and street users. They offer limited shelter and hygiene. Moreover, space and the ownership of space creates power, has definable purposes and can be political (Table 7.2).

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14 Also Doorn (2004a) – The Netherlands; Wardhaugh (2000) – England; Glaser and Bridgeman (1999) – America.

Table 7.2 The use of space and its purposes

Space can be used to …	Purpose
Create an obstacle on the pavement (or thoroughfare)	Draws attention to person(s) sitting on the street. Draws attention to homelessness itself (not necessarily their intention, but implicit in their actions).
Create a safe place to sleep	Location is key, especially for people sleeping on their own. Some locations increase safety, for example a loading bay – raised off the ground, walls to three sides, a roof, out of the way of pedestrians.
Define identity	For example, Cardboard city, Lincoln's Inn Fields and the Bullring near Waterloo Station, were full of cardboard and wooden constructions personalized by their owners. More recently, one elderly woman used polythene sheets and wood from construction sites to build a shack on a traffic island behind a church on The Strand. The shack included a park bench (bed), upturned tea chest (table) and a few crates stacked (chair). The table had a bottle with flowers in it and a tablecloth. She sat in her open doorway reading a paper and looking out on the traffic. She managed to keep the construction there for several weeks.
Create a home	'Home' is rarely about property and buildings, but a set of feelings and people, a set of defined actions. Thus a piece of carpet found on a skip during the building works on St Catherine's House, London, spread on the ground under the scaffolding and boarded areas at the corner of a busy junction, defined a physical space. Wooden pallets (table and chairs) created a living space. Friends living together, the invitation of others to join them for a drink, a party and/or a sleepover, created a sense of home. This group managed to keep their space for several weeks, rolling back the carpet during the daytime to avoid blocking the footpath and attracting police attention.

Photograph 7.5 Mattress included
Source: Megan Wilkinson, 1996.

> 'Once back in Wales, the ambulance was cramped so we built a tepee. We got tarpaulin
> sheets off the sides of lorries and cut down some trees. It was a fantastic construction.
> We were really proud of it. We got a proper wood burner, so it was really warm in there.'
> (Mark, male, aged 28; roofless 3 and a half years, housed 4 years)

It seemed that the occupation and ownership of space was a powerful part of identity,
self-preservation and to a certain extent self-worth. Space was strongly connected
with power. It gave the roofless the power to make people walk a different route,
to walk round them, to see them, to see their rooflessness, to see what rooflessness
had done to their bodies, their clothes. Space gave the roofless the power to alienate,
repulse and intimidate passers-by: even when sitting quietly they created a fear of
crime. Simply occupying doorways or a set of park benches created no-go areas.
Space gave the roofless the power to exclude the general public from their group,
from their culture and in doing so they took back some of the power stripped away
during the process of exclusion from mainstream society. One woman managed to
virtually close a set of public toilets in Merton as she set up home in the cubicles,
creating a sleeping and living area, using the sinks as her kitchen and her dog as a
defence. After being discharged from a psychiatric hospital with nowhere to live, the
local authority would not house her so she made herself a home and waited to be
arrested or sent back to hospital. She had the power to prevent or deter people from
using the toilets, to silently demand that something be done and to cause enough
public outcry for the local authority to take action.

Space was also used for retreat, to hide or to become anonymous. By finding a space away from public view (a rooftop, an underground car park or a graveyard), people retreated to their space and stored or hid possessions, creating a sense of safety. Alternatively, by changing their space (or geographic area) roofless people could blend in with the homeless culture, becoming anonymous – something they could not do on their own or in their home area. This created space away from people as well as an area. Space, therefore, was simultaneously a means of identity and anonymity, a way of standing out or disappearing and a means of power for the comparatively powerless.[15]

Conclusions

This chapter examined the homeless culture, its attractions, its mechanism for inclusion and acceptance, the fun and the heartache. In many ways, what happened to people in the past created the nature of the homeless culture. The culture was created out of need, for example the need for intense friendships and acceptance, pseudo-families and informal counselling and support. The absence or inaccessibility of these structures within mainstream society effectively drew and locked people into the homeless culture. People entered the homeless culture before becoming roofless; some members never become roofless. It would appear that the main pull factors that attracted people to the culture were (Table 7.3):

Table 7.3 Pull factors attracting people into the homeless culture

Pull factors in homeless culture	Push factors in housed culture
Friendship	Isolation and loneliness
Acceptance	Rejection, failure and exclusion
24-hour-a-day support/counselling	3–6 month waiting lists, (bi)weekly sessions
Acceptable drink/drug habit	Unacceptable drink/drug habit
Being a somebody	Being a nobody

The homeless culture, as will be demonstrated in the next chapter, is important for resettlement and exit routes from rooflessness. There are implications for policy intervention at several different levels, including prevention of rooflessness, crisis intervention and support services for people who are precariously housed. There are also implications for tenancy support and sustainment schemes, adequate access to personal social services and daycentre/befriender schemes that create positive social networks and friendships in mainstream society. Finally, there are also

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15 For discussions on space related to infrastructures and homelessness see May et al. (2007); Johnsen et al. (2005).

serious implications concerning the absence of meaningful daytime facilities and/or occupation for street users, who are often drawn into the homeless culture because no realistic alternatives exist.

Chapter 8

Exit Routes from Homelessness

Photograph 8.1 Lunch time
Source: Megan Wilkinson, 1996.

Chapter 6 established that routes into homelessness and triggers of homelessness are complex, multifaceted and not easily dealt with. Homelessness is far more than simply housing and support needs. Rooflessness occurs over a long period of time and ensnares and entrenches people into a way of life that ordinarily they would not have chosen for themselves. Once roofless, the very experience of rooflessness compounds the issues involved.

Those who are roofless for any length of time usually enter the homeless culture: a culture borne out of the needs of its members. It offers inclusion into a community, stability, support and friendship – elements they lacked and sometimes craved before they were roofless. Given the intense levels of support offered by the homeless culture, it is difficult to replicate these or create adequate structures to maintain people outside of it. This means that many trying to leave rooflessness become trapped in cycles of episodic rooflessness.

It is important to examine roofless people's exit routes from homelessness, their route into settled accommodation and housed society and the frailties of what is currently done to assist them to make this transition. Those who successfully made this transition had employment, settled accommodation, even mortgages, and their own families. Success and the degree to which people felt a part of housed society was defined by the individuals themselves. Central to ex-roofless people's definitions of a successful transition was the extent to which they were able to complete the home-making process (Rivlin and Moore 2001). Home is far more than a roof;[1] it is a physical, emotional and psychological place and state. It is vital to the ontological identity and security of the individual.

Exit routes involve a process that takes time. There are clear stages that are broadly common to all those following that process (Bevan 1998). This process is neither simple nor easy. It is fraught with hurdles that deter and block people's progress at all stages of resettlement: 85 per cent of rough sleepers are not first-timers (Randall and Brown 1999a). If we are serious about helping people to fully enter into housed society, these obstacles will need to be overcome. As established, rooflessness is the solution to roofless people's problems rather than the problem (Chapter 6). Thus, any serious attempt at ending rooflessness needs to focus on getting resettlement right. To exit, there are huge behavioural, psychological, emotional and practical changes that need to be made. Accommodation and support, though important, are just one small fragment of the resettlement process.

There has been little discussion in the literature on exit routes until recently. In the past focus tended to be on housing options and reasons for tenancy failure (Dane 1998). More recently, pathway analysis was used to plot exit trajectories (Rosengard 2002; Anderson and Tulloch 2000).[2] However, the focus remained on routes into housing, not the complete resettlement process; physical, emotional and psychological reintegration into housed society. There were also problems with the application of pathways to exit routes. They could not cover the whole gamut of circumstances. Thus there was no recognition that successful pathways could include people returning to the parental home, those entering relationships or house/flat

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1   Chapter 2.
2   For pathway analysis in relation to housing, see Clapham (2005).

shares, those offered temporary unsupported accommodation, those going through drink or drug rehabilitation programmes and those helping themselves by using the private-rented sector. Authors found it difficult to demonstrate the way some people alternated between different paths, moved up and down pathways or used different paths simultaneously (Fitzpatrick 2000). There was a tendency to oversimplify exit routes. The pathways used relatively short time-spans as a measure of successful reintegration (six months; Rosengard 2002). This is despite existing evidence to suggest that this stage of resettlement takes far longer (in excess of 18 months; Dane 1998). Pathway analysis is useful as a snapshot view of tenancy outcomes and routes into and through a variety of types of accommodation. However, it offers very little information about episodic rooflessness, time-scales, the struggle to resettle and the obstacles and hurdles faced by those attempting to rejoin housed society.

The language used in the literature to discuss and describe the resettlement process blurs and obscures many of the harsh realities. Long periods of time and difficult life experiences are condensed into single phrases and sentences, for example 'poor housing conditions'. This debases the resettlement process and makes it ambiguous. It detracts from the long struggle faced by those attempting to resettle. A more descriptive analysis will be used to leave the reader in no doubt about the realities of the resettlement process.

The exit process begins with the individual's decision that they want to leave the street and the realization that they can (Alexander and Ruggieri 1998). One of the biggest driving forces of success was the individual's motivation and determination to succeed. This was often highest amongst the newly roofless. The longer a person was roofless the more disaffected they became and the more difficult it was to help them. The first few nights or winter on the street was sometimes all that was needed to give them the determination to succeed. 'Then winter came. I thought I'm not going to survive. It's too cold. I can't live outdoors through the winter' (Roland, male, aged 52; roofless six months, housed 17 years). The picture is different for the long-term roofless. For them, a catalyst was often required to create the necessary motivation and self-determination.

Photograph 8.2 Victoria Street, London
Source: Megan Wilkinson, 1996.

Photograph 8.3 Space to relax and let the world go by
Source: Megan Wilkinson, 1996.

Catalysts

Four dominant catalysts began the exit process. At times, the decision was quick and decisive; they decided to change and did. Behind such decisions were the first two catalysts. First, they felt that they had reached the bottom and the only way from that point was up. Alternatively, they found that the lifestyle was getting too much for them to cope with; they needed to get life onto a more even keel:

> 'I thought it's time to get out of it. I was really underweight, emaciated. I had a bad, bad drug problem. I thought, if I don't get out, I'll die.' (Mark, male, aged 28; roofless three and a half years, housed four years)

'After about 7–8 months of feeling like this, I woke up one day and decided I wanted nothing more to do with drugs. I booked myself into a drugs centre and was put on a course of methadone.' (Gabriella, female, aged 35; episodic roofless seven years, housed three months)

At this point, motivation and determination were high. To succeed in the resettlement process, this needed to be supported and harnessed. Roofless people were vulnerable, accustomed to rejection; problems with self-esteem and confidence were common. Without support and guidance, many lacked the ability, or found it difficult, to assert themselves and proficiently use the help that was available. Motivation and determination often appeared to be crushed by the sheer complexity of the system, unmotivated staff and access problems.

Sudden shock or trauma was the third catalyst. This may be an assault, rape, disabling accident, near-death experience or the death of a close street-friend. It would appear that such a catalyst created a rupture with their reality and threatened their ontological security. This formed a window of opportunity for people working with the homeless to intervene and help, offering counselling, support and a resettlement plan. One daycentre manager noted that this window of opportunity to really help an individual is a very narrow one. Opportunities were frequently missed because people had to apply and wait for their application to be processed. Or they had to wait for a place to become available. Thus, despite the Government's and homeless industry's best efforts, by the time help became available, people were discouraged or had given up:

'There are only so many brick walls you can bang your head against before you knock yourself out.' (Don, male; research diary)

The realization that someone cared was the fourth catalyst. Typically it was staff at homeless facilities or outreach workers who showed care. The sudden realization that they existed and mattered to people outside the homeless culture, increased self-esteem, created hope and motivation to begin resettlement. The person who showed care was not always the person who could help. Thus this catalyst relied heavily on the attitude and response of staff within the homeless industry. This was a strong trigger for the entrenched roofless. However, without additional motivation the catalyst alone was rarely enough to carry the individual over the first few hurdles.

Occasionally, it was friends or family who showed care:

'London was a turning point. A friend from college saw me and recognized me. They took a photograph and gave it to me to keep. I still have it. [The photograph was of a man with long matted hair and a beard full of dirt and food.] That photograph gave me a good look at myself. I hardly recognized myself. I still keep the photo as a reminder of where I've been and how low I sank. Just to make sure that I never go that low again.' (Michael, male, aged 32; episodic roofless five years, housed six years)

The sudden recognition of what he had become, the realization that this was not who he really was inside, ruptured his obsession with where the next drink and meal was coming from, long enough to think. This started a two-and-a-half-year struggle

to leave the streets, stop drinking and re-enter housed society. He now has stable employment, a good salary and a mortgage.

All too frequently catalysts failed. People became trapped in the revolving door between hostel and street. The key to success was harnessing motivation and determination and creating it throughout the resettlement process, a process that takes strength, courage and determination in the face of sometimes incredible opposition. A number of factors undermine and weaken catalysts. They include a mixture of structural, behavioural and psychological factors. These include waiting times, delays, access problems, confusion over benefits, institutionalization, fears over stigma, loneliness and depression. This was in addition to the problems that triggered their initial rooflessness and those acquired through the experience of rooflessness.

Access Problems

Access was the most significant issue throughout the entire resettlement process. It affected every aspect of resettlement. It caused huge delays (in some cases two or three years), clogged up the system, created an apparent shortage of hostel and temporary accommodation and triggered episodic rooflessness. A serious look at homelessness needs to include an examination of access problems at different levels of resettlement, beginning with good advice and assistance.

Access to Advice

Inability to access the necessary help, advice and facilities (hostels, benefits, social workers, support, even friends) is social exclusion. Precariously housed people found it difficult to know where to turn to for advice.[3] Lack of publicity about where to get advice or emergency accommodation actively caused homelessness. The most easily accessible sources of advice outside the daycentre and hostel systems were predominantly local authority run. This meant that advice was given in terms of the individual's priority need status. Those to whom the local authority had a statutory duty were found hostels or temporary accommodation. However, the accommodation rarely included support or assistance to resolve homelessness for the long term. Those with no statutory entitlement had only a right to advice, not accommodation. In practice, people were frequently fobbed off with outdated lists of full hostels and housing associations that were miles away, rather than being given useful assistance.

Non-statutory homeless people were frequently further disadvantaged as they were not redirected to local voluntary sector organizations that were better placed to advise or assist:

> 'So I went to social security. I said I need finance and I need somewhere to live, help me. They said if you're 18, have three kids and are pregnant come back and we'll help you.' (Roland, male, aged 52; roofless six months, housed 17 years)

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3 A problem for Dutch homeless people, too (Doorn 2004b).

'The council goes 'have a kid and you get emergency housing'. That wasn't helpful.' (Jenny, female, aged 23; hostel)

Voluntary sector organizations did attempt to refer clients to housing departments or homeless persons' units. However, instead of accepting the information provided and checking that, each claim had to be processed from scratch, thus delaying action. As a consequence some people moved from homelessness to rooflessness, spending considerably longer than necessary on the streets and became disaffected with the system:

'If I'd known where the hostels were or where to go to ask for advice, I could have been in one two years ago and wouldn't have had to spend so much time on the streets. I didn't go to the daycentres because I thought they were for old people.' (Chris, male, aged 30; roofless two years, housed five months)

Access to Information

The vulnerably or precariously housed often did not use the traditional statutory channels as their first port of call. Instead they preferred to seek advice from close friends and relatives first, then researching their local area or searching on the Internet.

The importance of the Internet in this 'information age' should not be underestimated; it is a source of non-stigmatizing, non-intrusive, free information. However, there is a paucity of adequate information on the Internet that leads people stage by stage through their options and helps them to avoid a housing crisis or homelessness or rooflessness.[4] This suggests that common, easily accessible knowledge is wanted, knowledge that offers guidance on how to avoid a housing crisis or tenancy failure – an anonymous, less embarrassing way of seeking help that offered more autonomy and self-respect to individuals wanting to feel in control of their situation. However, access to the Internet for people resettling is often limited, is costly and, once on the Internet, information was poor.

Access to Crisis Accommodation[5]

Those actively trying to resolve their own rooflessness often turned to hostels and housing associations for accommodation. The vast majority of available hostel beds were reserved and unavailable to direct access clients. The main route into most housing association properties was through the local authority housing waiting list. The shortage of available crisis accommodation meant that some people were advised to travel miles for possible places. Frequently, people were passed from town to city, between local authorities and between projects, before any real help began:

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4   Smith and Ravenhill 2007 explore this in more depth. Websites did exist in some states in the USA and Scotland, but it was difficult to determine how up-to-date and accurate that information was.

5   Night-shelters, hostels, bed & breakfast, other temporary accommodation and housing association tenancies.

'I tried to find a hostel to stay in, but I was told there were only four beds in the whole of London and these had been snapped up quickly.' [confirmed by staff] (Tommy, male, aged 35; rough sleeper)

Such policies made it difficult for people to leave the streets. Furthermore, making people move miles away from their local area to find accommodation destroyed their local connections and social networks. It helped to create hotspot areas centred around good or plentiful facilities (Matthewman and Read 2002). This increased pressure on hotspot local authorities and distorted the real picture by creating an illusion that their area was short of facilities or had a particularly bad rooflessness problem. In fact, roofless people migrated from areas with few or no facilities to areas with facilities (for example in Exeter and London).

Some roofless people had severe attitude and behavioural problems, sometimes triggered by substance abuse or mental ill-health. This resulted in exclusion from accommodation and resettlement programmes. Their behaviour was dangerous for staff and residents. However, some areas had policies that meant once excluded, an individual was excluded from all facilities in that area. This created anger, disillusionment and disaffection from the system. The projects most successful in dealing with such clients appeared to be those offering a sliding scale system of access to various stages of resettlement (Kings Arms Project, Bedford; Shilhay, Exeter). This enabled sanctions to be placed on bad behaviour (moving back a stage or two) without triggering rooflessness again.

Access to accommodation includes people's ability to avoid or delay their own rooflessness by sofa-surfing or staying with relatives or friends.

Table 8.1 shows where teenagers would seek help or advice if in a housing crisis. Like these young people, the homeless primarily wanted to help themselves to avoid a housing crisis, either before or after they had been roofless. For young people, the new generation of potentially homeless people, the mobile telephone was key. Smith and Ravenhill (2007) found that young people stored telephone numbers of friends and relatives with potential 'beds' for the night, organizations that could advise, assist or offer accommodation when there were vacancies. In this way, young people could avert rooflessness for months by ringing round each night or every few days for a different place to stay. Relatives could keep them in contact with services designed to help them via their mobile phones. Access to mobile phones was limited by parents ending the contract (viewing the phone as a treat, not a necessity), daycentres and hostels having no recharging facilities, and theft. An unintended outcome of the Smith et al. (2006) research showed that mobile phones are a vital part of successful resettlement, especially for young people – a factor that needs further investigation.

Table 8.1 Where 14–16-year-olds would seek help or advice if in a housing crisis

Where to get help	Who to ask	Look for …
Social networks	Friends (peers at school or older young people they know well)	Advice
	Family (absent parent or other relatives)	Help and advice, or even respite accommodation
	Parents of their friends or their parents' friends	Help, advice, informal mediation
Research tools	Internet	Advice, help or accommodation
	Telephone directories (phone numbers of organizations working with the homeless)	Advice, help or accommodation
Statutory networks	Local authority housing department	Advice and accommodation
	Social services	Accommodation and/or mediation
	Teacher (or person connected to school, for example Connexions worker)	Advice, help or mediation

Note: This table was developed from Smith and Ravenhill (2007).

Access to Resettlement Help

Access to good resettlement programmes was a lottery, both within London and nationally. Despite existing literature detailing the need to adequately prepare roof/homeless people before they were given tenancies (Dane 1998), they were often offered nothing. There were some excellent examples of resettlement work to be found, but organizations were not obliged to offer such assistance. Thus successful resettlement was often determined not by the individual's motivation to leave the streets, but on where they slept rough, which outreach team contacted them or which charity they contacted. There was a marked difference between those merely accommodated whilst waiting for rehousing and those undergoing resettlement help. The degree of support was fundamental to long-term success. Those accommodated but offered no help were left bewildered and vulnerable to making the wrong decision. They were far more likely to become roofless again:

> 'I get no help, no support, no planning etc. I literally just get accommodation. The manager says he doesn't have time to deal with the petty things you want to ask. Like, the housing benefit wrote and he said you have to sort it out yourself, when you leave here you'll have to sort it and he just left me to it.' (Anita, female, aged 20; hostel)

Furthermore, the lack of move-on accommodation and inadequate levels of appropriate support frequently negated good resettlement work.

Access to Women's Refuges

Women leaving violent partners sought or were directed to refuges designed to deal with accommodation plus the physical, emotional and psychological needs accompanying domestic violence.[6] Fleeing from violent partners often meant leaving in a hurry and in an unplanned way. This could be bewildering and confusing and meant women were not always thinking and acting rationally. Furthermore, refuges were often full, some distance away and difficult places to live in, especially if the individual was mentally vulnerable. The style of women's refuges meant that single women and families were often accommodated together, with shared bathroom and kitchen facilities. At times, this was difficult for women to cope with. So much so that there were vulnerable single women who spent hours on the streets in the daytime, entered the homeless culture, then moved into rooflessness.

Access to Drink/Drug Rehabilitation

Substance abuse problems are common amongst the roof/homeless. However, the existing hostel system was not geared to cope with chronic problems, so excluded the most chronic substance abusers.[7] The incidence of hostel managers being charged for allowing drugs on their premises exacerbated this problem (Weale 2000). Equally substance abusers found it difficult to live in hostels that had drug-free or dry-house (no alcohol) policies. Chronic alcoholics, for example, could not survive more than a couple of hours without a drink. This put an overnight stay in a 'dry' hostel out of the question. Where hostels tried to assist substance-abusing clients, they found it difficult to get people referred to and into appropriate rehabilitation programmes. Waiting lists were often several months long. Therefore they had to hold onto these clients, despite being ill-equipped to help. There were programmes that required that people had already 'detoxed' before they entered the programme, a policy that exacerbated problems for both hostels and roofless people. Drink or drug rehabilitation programmes do not necessarily offer accommodation help or advice as part of the programme; thus clients ended up roofless or homeless again on completion of the programme. Many returned to substance abuse as part of the homeless culture. This meant they became trapped in cycles of 'detox', rooflessness and substance abuse.

Access to Settled Accommodation

The non-statutory roofless can be trapped in hostels and crisis accommodation for two or three years, thus creating the very real danger of institutionalization:

> 'I'm on the council waiting list, but have been told that I have to wait another three years before I can be housed.' (Joan, female, aged 36; hostel six years)

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6   Also Williamson (2000).
7   Also Fountain and Howes (2002).

A spokesperson from the Foyer Federation noted that their clients became disillusioned, frustrated and disheartened when they could not find move-on accommodation, feeling their lives were put 'on hold' indefinitely. Being trapped in hostels made it difficult for people to gain employment or further education places, lead a 'normal' social life or leave the homeless culture behind them (e.g. Rosengard 2002; Ravenhill 2000a). People felt stigmatized:

> 'It really pisses me off that I have to be back by 11.30pm on an evening. People at work really take the piss out of me. I can't cover extra hours at work, stay on late or do overtime without worrying about having to get back in time.' (Shirin, female, aged 18; hostel)

> 'All hostels have a stigma attached to them. Most people think that if you have to live in a hostel, then you must be a psycho or mental patient. This is insulting.' (Jackie, female, aged 34; hostel)

> When you're in a hostel people stereotype you. They make a judgement about you. They think you must be dirty and smelly. Living in a hostel makes it hard to get a job. They don't believe you have qualifications. They just assume that you lie about them.' (Pam, female, aged 16; hostel)

A combination of feeling trapped and stigmatized meant that some people were prepared to take the risk of moving in with friends (even sofa-surfing) or a new partner to get out of the hostel. Many clients tried renting in the private-rented sector, but found that rents were too high or landlords did not accept people on benefits. Rent in advance was often a problem, despite numerous schemes existing to tackle this. Furthermore, moving out of the hostel into these types of accommodation meant, according to legislation, that people were housed. Thus they lost their place on the housing waiting list. This left people precariously housed and vulnerable to further rooflessness if rental contracts or relationships ended.

Access to Follow-on Support

Once in settled accommodation, many entrenched roofless people needed a significant amount of support and assistance regardless of the quality of the resettlement programme. Until recently there was a dearth of support and what existed was fragmented. There have been calls for increased support for rehoused people to maintain their tenancy (Dane 1998; Randall and Brown 1995, 1994b). Good practice guidelines have been published (DTLR 2001b; Bevan 1998; Macdonald and Jackson 1998). Despite this, support schemes, their quality, duration and the type of support available were frequently inadequate. Those receiving support were offered 6–18 months of tapering support. This was despite evidence to suggest that this would be far too short (Dane 1998) and despite some people needing support for the rest of their lives (Ravenhill 2000b; Jones 1999). Where support was offered, caseloads and clients' fear of asking for help, or ignorance about the support they could receive, meant few were receiving the help reportedly on offer. There was also confusion

over who was offering support. It was not unusual to find people with three to six keyworkers from a variety of organizations and each with overlapping remits.[8] At times, clients felt their privacy was invaded, they found too many visits or probing questions stifling and intimidating. Having too many keyworkers crossed the fine line between facilitating independence and creating clients overly dependent on charities and the Government (Randall and Brown 1995; Jencks 1994; Carlen 1994). Both overdependence and inadequate support contributed to further rooflessness.

Informal support outside the homeless culture was a vital part of some people's long-term resettlement. There were three main sources of support: family, probation officers and churches or other religious organizations. Those rehoused and in contact with their families appeared to find it easier to resettle and reintegrate into housed society. Family relationships offered stability and informal support. They enabled the individual to be more ontologically secure, facilitated positive self-perceptions and enabled them to meet other people.

Those with probation officers found it easier to resettle and gain access to the type of help and support they needed whenever they needed it. A natural by-product of being on probation meant that roofless and rehoused people had someone to co-ordinate assistance, regular compulsory sessions to attend, someone to facilitate access to hostels or drink or drug rehabilitation centres. More importantly, someone could act as a guarantor for accommodation and assist with finding employment or training schemes. Their knowledge and understanding of the individual's history meant that good probation officers could anticipate their needs and prepare them for each stage of resettlement. If things went wrong the individual always had someone to fall back on who would assist them.

Religious organizations played a significant part in some people's recovery. Churches were used as clubs or societies that they attended regularly. This enabled them to meet and make friends, even if these were relatively superficial (institutional friendships). There were those for whom, religious beliefs gave them hope, confidence and an anchor point within their lives. The counselling-type services offered by many churches were experienced as a form of cathartic inner healing:

> 'Lots of prayer helped too. I had prayer from the men's team at church. I got a lot of support that other people don't get. I spent hours at the front of the church just crying while they prayed for me. I was letting the pain and the anger out.' (Roland, male, aged 52; roofless six months, housed 17 years)

Although religion was not appropriate for everyone, the positive social networks, a place to make friends, a common interest, somewhere to go, something to do and for some a sense of belonging were important facets. Some or all of these facets could be replicated elsewhere within society.

Access to Inclusion in Housed Society

One of the biggest battles rehoused people faced was the fight against loneliness and isolation (Lemos 2000). This at times led to unwise decisions that triggered

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8   For example, CPN, drug resettlement keyworker, housing association keyworker, etc.

further rooflessness.[9] Those who had been entrenched in the homeless culture were accustomed to years of intense social support and company 24 hours a day. As with those leaving the armed forces, prisons and other institutions, withdrawal of this level of intense human contact appeared to cause distress, the onset of mental health problems (depression) and feelings of isolation and loneliness. Furthermore, for some people isolation and loneliness pre-dated their initial rooflessness, at times originating in childhood:

> 'I'm still afraid though, because I really have no one to turn to. One of my biggest fears is what happens if I get ill. If I get ill, I really am on my own. And when I get down I'm on my own. I have a good cry when I need to, but I am still on my own.' (Shirin, female, aged 18; hostel)

Rehoused people often lacked confidence, had rusty social skills and found it difficult to deal with everyday tasks. This made it difficult for them to meet and make friends. Conversations were difficult as there was little or no common ground to start with. Ex-servicemen, who had never been roofless, reported having similar relational problems. Making friends was an essential part of settling into an area. Friends were the basis for positive social networks that protected against rooflessness. However, fitting into housed society and making friends was often impeded by rehoused people's feelings of shame and dirtiness:

> 'Even when I moved in I felt that I was still homeless. The future is down to me now. It is hard to get back into mainstream society because when you've been homeless you lose a lot of self-esteem. After that it is hard to get back into feeling normal.' (Chris, male, aged 30; roofless two years, housed five months)

The rehoused had difficulty accessing places where they could meet people. For example, men tend to make friends through work, the pub, sport or at the gym. Women follow similar paths, with the addition of school-gate or toddler group friendships for mothers. Most of these cost money and are difficult to afford on a regular basis when on benefits. It can take up to two years for housed members of society moving to a new area to establish solid friendship networks. This may well be longer for the rehoused. With keyworker support often tapering within three months of being housed and most ending at 6–18 months, there is a huge gap between institutionalized social contact (keyworker) and social networks forming within the community. To deal with the boredom, isolation, loneliness and lack of support, many rehoused people (especially older men) returned to homeless daycentres for companionship. This then trapped them within the homeless culture, in some instances up to eight years, making it more difficult for them to enter housed society's culture. This increased their vulnerability to further rooflessness.

The more innovative rehoused people found a way around problems of loneliness and meeting people. One man helped at a local furniture project (Clive, male, aged 44; hostel resident for two and a half years). Another applied not for a befriender, but to be one. This set up a reciprocal relationship that benefited both people:

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9   See Ian's route-map, Chapter 6.

'I'm befriending a man whose just left Broadmoor prison. That's a prison where mental cases have to go when they break the law. I see him once a week. I go round to his house and then take him down to the pub for a drink. The man is finding it hard to settle in, the same way I did. We both find it difficult to make friends, but we are getting on fine. My time befriending him is coming to an end, but I'm hoping to get a new person to befriend and then keep seeing this man.' (John, male, aged 52; roof/homeless 20 years, housed 12 years)

Loneliness and isolation is not unusual within housed society. We already provide both formal and informal facilities for a number of groups, including the elderly, new mothers, people with learning difficulties or mental health problems. Therefore it should not be surprising that newly housed people, especially the long-term and vulnerable roofless, should need such facilities too. Although meaningful daytime activity is now being provided in some areas, the quality and availability varies widely from area to area.

Benefit Problems

Benefit problems caused difficulties with sustaining access to accommodation throughout the resettlement process, starting with hostels. In exchange for a bed in a hostel, roofless people must be prepared to register for housing benefit. Registering for benefits requires proof of identity. A combination of the way people leave home, the roofless lifestyle and the frequent loss of possessions means that many find themselves without identification. Waiting for identification delays processing the claim. This causes hostels to have cash-flow problems, especially if the resident leaves before their claim is processed. This also encourages hostels to hold onto clients until they are assured of payment, even if they should have been referred to more appropriate facilities. Furthermore, most hostels levied surcharges not covered by housing benefit. This meant that delays in income support benefits caused arrears. Although hostels were willing to work with clients to pay off arrears, roofless people found it difficult to cope.

People were frequently transferred between, for example, hostels and resettlement programmes. Each time they needed to make a new benefit claim. Then they had to wait for the claim to be processed before regular benefit payments were re-established. At times this could be two to three months and could cause fear, anxiety and confusion. It was common for benefits to be stopped or suspended because people did not understand that they had to reclaim every time their circumstances changed. Vulnerable clients became roofless again as a result.

The substantial delays in processing benefit claims actively discouraged landlords from accepting benefit claimants, especially in areas with high demand for rental properties, such as London, Reigate and Exeter. Similarly, once in settled accommodation, benefit delays resulted in local authorities and housing associations issuing notices to quit as part of their automated processing systems. There were systems to ensure delays in processing benefits did not cause rooflessness. However, not all rehoused people knew of these or were embarrassed to ask for help. At times the fear and anxiety over the notices to quit caused or made it easier for people to

return to a previous stage in the resettlement process that was less pressurized; this often meant rooflessness.

The relationship between benefits and paid employment confused many people. Short-term roofless adults felt that work was the best way out of homelessness. Thus once in hostels they sought employment. However, there was confusion over the amount that could be earned before benefits were affected. There was little understanding of just how much hostel places cost (usually a lot more than the average rent). Thus with little advice available, some homeless people took employment, lost benefit entitlement and then lost their accommodation through rent arrears:

> 'I was offered a place in a hotel [B&B], housing benefit paid the rent. I stayed there for three months. Then I started a job two days a week. They cut my housing benefit so the hotel needed an extra £45 a week, which I couldn't afford. In the end they asked me to leave. I ended up back on the streets.' (Andy, male, aged 51; staying with friends)

Work and Training Courses

Not only did work offer a way out of rooflessness, it was also seen as a way of alleviating social isolation and loneliness, especially where people already had experience of employment. However, many were not physically or mentally fit enough for work in the short term. Poor diets, malnourishment, painful street-related ailments (such as arthritis, foot or back problems), substance-abuse-related disorders (liver sclerosis, hepatitis) made them physically weak and ontologically unstable. This was exacerbated by problems with sleeping, relaxing, depression and general day-to-day functioning. For rehoused people, the solution was simple: most wanted to ease back into work, starting with voluntary, then part-time work, gradually building their stamina and taking on more responsibility. However, the benefits system made this difficult:

> 'Without this voluntary work that the probation officer is setting up, I will go mad with loneliness. Not everyone who has been homeless and is housed is up to doing any work, even voluntary work. They need help with finding something to do with their time, if they are to make a real go of things and get better.' (Chris, male, aged 30; roofless two years, housed five months)

Those capable of working and wanting to often experienced problems and discrimination because they had been roofless. Moreover, CVs were outdated or people had little or no work experience. No recent employment record meant employers could not easily assess their suitability for a post. Access to employment was further exacerbated for those with a prison or mental health record. Those eligible to use the New Deal preparation-for-work programme found it easier to get back into employment. However, this was predominantly the younger, short-term roofless. Furthermore, there were penalties if they started a New Deal programme then found they were unable to work. Benefit sanctions directly threatened their ability to sustain their tenancy. Those not qualifying for employment preparation programmes (New Deal, Foyer programmes) and without a current CV had to be innovative to gain employment:

'I went for a dozen interviews. To get a job I made up a CV. I knew what I could do, so I made up some lies to fit the job and cover up my time in prison. Those jobs that took references didn't give me a job because they found out they were lies. One company offered me a job. They didn't take up references. I got on very well there for six years.' (Roland, male, aged 52; roofless six months, housed 17 years)

It was common for rehoused people to seek and find employment, voluntarily or salaried, with homeless charities. This took some of the stress away from entering work. They had expertise and were familiar with the job. Although this could be a positive move, there were dangers. Some people were locked back into the homeless culture with the ever-present temptation to return to substance abuse and street life. For example, one alcoholic man had been dry for nearly five years when he decided to use his experiences to help out three young alcoholic roofless men. He took them into his home, but found it difficult to cope with the smell of alcohol, finding alcohol hidden on the premises and the constant temptation. After a few months he started drinking heavily again, got into debt and was in danger of losing his partner and home (Stan, male; observation diary).

Training courses and further education were perceived both as an exit route from rooflessness and a way of combating social isolation. This was especially so for those under age 25. However, the preferred course of action was to ease into study and training gradually. Furthermore, many worried about education and training affecting their benefits and making it impossible for them to remain in a hostel or tenancy.

Access and benefit problems were not the only obstacles faced by roofless people trying to re-enter housed society. The standard of accommodation offered was a source of considerable hardship, anxiety and distress.

Standards of Accommodation

A commonly held view is that a roof, any roof, is better than none. However, in practice, the state of hostels, temporary accommodation and social housing actually deterred some people from leaving the streets.

Hostel Standards

Hostel conditions were an essential part of the resettlement process. They offer a pedagogical dimension, a way of learning by example a number of the life skills required for independent living. There were some excellent examples of hostels and the number has been steadily increasing. However, it might take only one bad experience to alienate people from hostels and resettlement. This explains why despite improvements in facilities over recent years, some entrenched roofless people were still fearful of hostels and preferred the streets:

'Hostels are alive with lice and all sorts of diseases. It's cleaner living in a cardboard box on the street than in hostels. In a hostel you get eight people or so to a room and all you have is a curtain between your beds. I tell you it's not a good place to be. It's much cleaner

and safer on the streets.' (Tessa, female, aged 36; episodic roofless 20 years, temporary accommodation two years)[10]

'There was just one big room with five people sleeping in it; like a hospital. There were lots of mentally ill people there, people with drink problems and prostitutes. You had to lock everything in your wardrobe; but people could still nick your stuff. Each key opened all the wardrobes. You'd hear people screaming and shouting, but you can't lock your room door for fire and safety.' (Anita, female, aged 20; roof/homeless two years, hostel)[11]

There were real fears about health and safety. Fear of crime such as theft, threatening behaviour, assault and sexual harassment was prevalent. There were also fears over contracting infectious diseases; in fact, there was a high incidence of hepatitis among the roofless or homeless, especially those on drugs and alcoholics. Hepatitis is contagious and some strains are only passed on through bodily fluids. Hepatitis B is highly infectious and hygiene of plates and cutlery needs to be observed closely. It is both easier to catch and a bigger killer than Aids. Evidence suggested that some facilities had few or no measures in place to protect clients (Ravenhill 2000a).

People's desperation seemed to be used as the measure of their need: if people were desperate enough, they would take anything. Existing research found that people were satisfied with substandard accommodation (Pleace 1995; Thomas and Niner 1989; Kemp and Rhodes 1994). However, their satisfaction was based on their low expectations. In fact, roofless people were not happy with being accommodated in dirty, squalid and potentially dangerous hostels, either sleeping rough instead or so desperate that they would accept anything:

'The first accommodation they gave me was awful. It was an old borstal. You can tell, because it has A block and N block and A wing and that. They call it Parkhurst, it's not really called Parkhurst, but you may as well call it that. It's a disgusting place. People of all ages go there, people from 16 right through to, well to OAPs by the looks of some of them. It's awful. People pee under your door. And there is stealing from the rooms. The showers and loos are disgusting. You can't clean yourself there. One person seems to die every fortnight; some are suicides though. You are surrounded by winos. People, staff, you see putting on rubber gloves to drag them off to a separate room to strip wash them. They've got nits and things. You see bad things in these sorts of places.' (Ashwani, male, aged 23; hostel two years)

Most members of the general public would find such conditions intolerable. It is understandable, therefore, that some homeless people became depressed within the hostel system and others preferred the streets. Furthermore, the constant shortage of hostel places meant that people were often accommodated in inappropriate hostels. For example, 'The hostel I'm in now has 64 families in three houses that are all connected' (Sandra, female, aged 16; hostel). A different 16-year-old girl left home to get into a YMCA hostel, then found that there was a three-month waiting list. Her estranged mother managed to find her a hostel that did accept her straight away, with several chronic drug addicts and dealers as residents (Ravenhill 2000a). Conversely,

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10 See Tessa's route-map, Chapter 6.
11 See Anita's route-map, Chapter 6.

good hostels had a major positive impact on roofless people's lives. They offered a realistic alternative to the streets and instilled confidence and self-worth.

Boredom was a major problem. Not all hostels allowed residents on the premises during the day. This forced residents to use homeless daycentres or pass the time in libraries, cafes or with street users. Boredom on the streets tended to increase drinking, drugs and unruly behaviour and demoralized and depressed a number of people:[12]

> 'They kick you out at 9am and you're not allowed back until 5pm. It's horrible if you've no friends to sit with or go to because you've no money.' (Anita, female, aged 20; hostel)

> 'You're on the streets from 9am to 7.30pm. There's a daycentre open 12.30 to 1.15 but that's not open on a Saturday and Sunday. When you're on the streets you get hassled by the police to move on; but where to?' (Andy, male, aged 51; staying with friends)

Bed and Breakfast (B&B) Conditions

The pressure on crisis accommodation, especially in London, meant that some single roofless people were placed in B&Bs alongside families. Once there, they rarely received any support or access to resettlement programmes. The standards of such establishments were far below that of holiday-let standards:

> 'The toilets are horrible. There is always lots of stuff in them. People who stay there don't care. They don't care about themselves, their room or the place. It is safe-ish, but a few months ago, when I was trying to make friends, I was warned that a man keeps going into my room, they told me I must lock the door.' (Halina, female, aged 32; B&B six months)

Photograph 8.4 Run down bed and breakfast hotels
Source: Megan Wilkinson, 1996.

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12 Also Homelessness Training Unit (2000); Danczuk (2000).

Temporary Accommodation Conditions

Those placed directly into temporary accommodation were seen as privileged within the homeless community and homeless industry. The condition of such accommodation was a lottery. There were roofless people who felt the standards were designed to be punitive, by testing their desperation and punishing them for being roofless. For example, this 55-year-old woman[13] had been roofless for seven years, then used the private-rented sector for 20 years. Although on the housing waiting list, she had changed areas approximately every five years, so had to keep reapplying. After 20 years, a mixture of failing health, a sharp increase in rent and a ceiling placed on housing benefit left her homeless and unable to afford anywhere else to live:

> 'The accommodation I have is a bit of a health hazard. Housing pays for me to live in a place with cockroaches, flies and spiders. I have a phobia of spiders. It's a shit heap. It was filthy dirty with sticking dust that was about a centimetre thick. The carpets were stained. It looked like the place had been used by drunks. There were holes in the furniture. What I wanted was my own bed. I told them I couldn't sleep in theirs; it was stained and dirty. But they said I would have to pay for them to keep it in storage. I put it in the garden. They promised to repair the bathroom and sort out the cockroaches, but they didn't. The lino etc is really bad, it's got holes in it and there's water dripping somewhere it smells of damp. They still haven't done anything. They got rid of the carpets, I persuaded them to do that. I had new ones put in. But even that was a lot of trouble. They said that I could have a choice of colours and asked what colour I would like. So I told them that I'm not fussy, I like bright colours so any bright colour would do just as long as it cheers the place up. Do you know what colour I got? Brown. It's depressing. Brown is depressing.' (Mary, female, aged 55; temporary housing)

This was not an isolated incident. Interviews with housing personnel suggested that housing officers rarely visited properties before letting them. They perceived these conditions to be temporary, meeting crisis need before more permanent accommodation could be secured. 'Temporary' was usually a minimum of two years. Furthermore, implicit in a number of discussions was the suggestion that deserving and undeserving homeless people still existed.

Social Housing Conditions[14]

The condition of social housing – the secure settled accommodation offered to roofless people – was also a lottery. Properties in substandard, uninhabitable conditions were often let with no real plans for repair or making them fit for habitation:

> 'I eventually got offered the place I am in now. When I moved in all there was, was one light bulb and a kitchen cupboard. The place is very damp. There is a lot of glass, which means it steams up and goes mouldy.' (Peter, male, aged 38; roof/homeless 19 months, housed nine months)

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13 See Mary's route-map, Chapter 6.
14 Local authority, housing association and Registered Social Landlord properties.

'The flat was damp, always getting broken into. It took eight months to get a door and then I got three. It took two weeks for the housing association to sort things out when the ceiling fell in.' (Foxy, male, aged 32; housed eight years)

The disappointment after waiting often for several years for accommodation should not be underestimated. One of the biggest motivations for leaving the streets and going through resettlement was getting a home. This one factor spurred people to achieve great changes in behaviour and lifestyle. For example, one woman (Tessa's route-map, Chapter 6), with an 18-year history of drug addiction, prostitution and rooflessness, motivated by ill-health and a serious operation, decided to change. She was placed in furnished temporary accommodation. She paid her rent regularly, started a methadone programme and came off the game. After two years she was offered this permanent accommodation:

'I've been offered a studio flat and I've got to take it. They offered me a dump. The temporary accommodation is better. At least there I've a one-bed flat that has furniture. The bedsit has no furniture and the walls are bad it needs decorating. I received a letter on Monday, viewed the place Wednesday and I have to move in by Monday. It takes three days to get gas and three days to get electric, so that won't be there on Monday. It takes four weeks to get a community grant or a loan, so I've no bedding, no bed, no nothing. They told me I've got to start the tenancy on Monday regardless. I was given a £45 voucher for a DIY place to decorate the bathroom, because they didn't have time. That's not going to get a bed, is it? I have to move regardless, because my benefits stop on this one and start on the other. Nearly two years I waited and I get a place with no bedroom. They said I could appeal, but I was told that my chances of winning are very slim. You only get one offer and you've got to take it. I was told that's where I've got to live unless I'm evicted. They said this is my last chance, if I'm evicted they won't help again.' (Tessa, female, aged 36; temporary accommodation)

From interviews conducted in homes, there was evidence of people being housed in properties in serious disrepair. Grants for paint, etc., merely enabled people to cover up the worst problems. Evidence based on viewings of comparable ex-council properties (via estate agents) on the open market suggested that renovations costing in excess of £30,000 were needed to make such properties habitable. Vulnerable people were asked to live in tenancies that most of us would struggle to live in, decorate and maintain. Most people housed in such conditions felt that they had simply moved from roofless to homeless, housed but not settled.[15] Such conditions created ontological and self-identity problems that left people vulnerable to further rooflessness. Furthermore, as roofless people felt ashamed and embarrassed about their past and their accommodation, this made it difficult for them to invite people to visit, thus reducing the likelihood of full integration into housed society.

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15 Also Rivlin and Moore (2001).

Photograph 8.5 Home sweet home
Source: Megan Wilkinson, 1996.

Conversely, good furnished accommodation strongly influenced successful reintegration into society and the ability to create distance from the homeless culture. For example, against all the odds a successful businessman, who became roofless after a relationship breakdown, time in prison and time in a psychiatric hospital, was given good-quality furnished accommodation. This had a direct impact on the potential long-term outcome:

> 'I had been sleeping rough and drinking heavily. I ended up in a one-bed flat. It was tiny, but it had furniture and at least I'd got into the system. I knew I needed to play the system. I needed to clean up, I needed finance and I needed to get a job. When I first moved in I went to [a charity], I said I need help with going to job interviews, they gave me a suit and some other clothes. Getting the job was a big help. I didn't have enough money on the dole to get back into the mainstream. That was the hardest part, not enough money.

Moving from sleeping rough into accommodation that was furnished also helped. The local authority rented it to me. I don't know how they did it. I don't know what I would have done without that place; back in prison probably.' (Roland, male, aged 52; roofless six months, housed 17 years; has a mortgage, wife, son and runs his own successful business)

Providing people with a tenancy is not resettlement, but rehousing. The transition from rooflessness to integration into housed society is far more than a route into adequate accommodation and support to keep that accommodation.[16] There are a series of physical, emotional and psychological changes that need to take place. These form the rehabilitation process. A serious look at resettling people into housed society needs to understand the draw of the homeless culture and work out ways of counterbalancing its impact. Over time, situations need to be created that allow individuals to learn to survive and thrive without it.

The Resettlement Process

The literature identifies 14 stages of resettlement: referral, introduction, assessment, options, resettlement plan/care plan, referral to specialized help, preparation for the move, preparation for change, moving in, settling in, post move-on support, living alone, evaluation, safety net (Bevan 1998). These stages are supposedly flexible, allowing each individual to progress at their own pace. As the resettlement process takes time, Bevan (1998) proposed that support started before a tenancy was offered and then continued through four stages after they moved in. This was designed to prevent tenancy failure and episodic rooflessness. Frequently roofless people did not receive adequate resettlement help. Many were forced, by default, to skip from Bevan's referral stage to flying solo with no assistance or safety net if things went wrong. The resulting tenancy failures were often dismissed as the personal failings of the homeless person. Furthermore, there was often little recognition that as people progressed through the reintegration process, their needs and problems would change over time. Thus levels and types of support needed to be flexible and capable of adapting through the transitions people made. Gary's route-map demonstrates the impact of a flexible system on resettlement.

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16 Also Rivlin and Moore (2001); Depres (1991); Horwitz and Tognoli (1982).

Gary's route-map: Age 38, born 1963

Age 0 / 1963: Never seen dad

Age 5-14 / 1968-77: At school → Constantly bullied; Expected to be class clown → Scapegoat for any trouble; Psychologist called in; Becomes very disruptive

Age 14 / 1977: Behaviour worsens → Expelled from school → Starts drinking heavily

Age 15 / 1978: New school → Prepares for O'levels

Age 16 / 1979: Goes to college → Passes City and Guilds course

Age 17 / 1980: Started work → Steals from home, can't face family → Sleeps rough in sheds and toilets → Work find out

Age 21 / 1984: Thrown out → Goes through a series of jobs → Lives with friend → Loses job; Continues to drink and not pay rent

Age 22-4 / 1985-7: Moves often, slept rough between → Moves in with mother → Can't cope with drinking, stealing → Thrown out after 2 days; Moves in with friend → Doesn't pay rent → Thrown out after 6 months; Moves in with acquaintance → Only allowed to stay 1 week; Moves in with other acquaintance → Doesn't pay rent → Thrown out

Behaviour bizarre → Sectioned, hospitalized → Diagnosed manic depressive → In and out of hospital

Released → Bail hostel → Arrested → Drinking continues

Age 25 / 1988: Goes to hostel → Bullied and made fun of → Can't cope in hostel → Depression and drinking increase; Benefit problems

Gary's route-map: continued

Age 26 **1989**	His things get stolen	Sleeps rough in sheds and parks	Leaves hostel	Benefits sorted and back-dated
Age 27 **1990**	Can't cope, depressed	Back to hostel, bullying re-starts	Very depressed, hospitalized	Discharged to same hostel

Age 28
1991

Given HA flat → People intimidate him in the streets / Flat repeatedly broken into / Bullied, lends money

He's scared and doesn't feel safe

Not paid back, starts stealing

Leaves

Age 29
1992

Visits project → Makes friend, joins local hostel → Goes to a church in another town

Age 30
1993

Moves into night-shelter → Walked streets all day / Drinks heavily → Stays there pays rent consistently

Age 31-5
1994-98

Moves back to hostel → Evicted, back to night-shelter → Broke rules, smoked in room / Didn't pay rent / Broke rules → Moved to hostel

Cuts down drinking

Age 35-7
1998-2000

Stops drinking → Stays in hostel 3 years → Controls manic depression → Depressed, hospitalized

Age 38
2001

The future → Wants to move to 4th stage house / Wants to live with a family → Own key, buy own food, own washing / Pays rent

Chaotic entrenched roofless people, especially substance abusers, repeatedly started the resettlement process then left. Programmes in Exeter and Bedford factored this pattern into their programmes and gradually, over time, roofless people progressed further before leaving, as different issues surfaced, or if they regressed they moved back down the process to an easier stage. Such programmes built in both flexibility and room for setbacks:

> 'I've been here and in the night shelter and back ever since. I've been to stage 3 and back a few times too. I've now been stable since 1998. I'm quite happy here, but I want to move into 4th stage house. Stage 4 is more flexible, you get your own key, buy your own food, cook your own food and do your own washing up, etc. You have to pay towards the running of the house though.' (Gary, male, aged 38; hostel resident two years)

In contrast, a London project washed its hands of clients returning to drink after being helped into alcoholic rehabilitation programmes. Intolerant attitudes and ignorance about the issues facing roofless people did not help recovery or resettlement. Projects unable to tolerate, manage or allow for failure triggered further roofless episodes.

Roofless people, when looking at move-on accommodation, often felt certain that they could cope on their own in a flat or bedsit (also Dane 1998). However, on moving in, they often found that the loneliness and isolation was far worse than they imagined or that they simply could not cope. In the absence of a system that allowed them to directly re-enter hostels or move into shared or supported accommodation, they gave up on the tenancy and became roofless. Those offered trial flats, allowing them to learn independence in a protected environment, were more likely to choose the best housing option for themselves and successfully resettle:

> 'I went on a scheme to rehouse me. I spent several months in a hostel where you had your own cubicle, but not much privacy. After proving that I could look after the cubicle I was promoted to my own room, which had cooking facilities in it. I had all the same back-up, people to talk to and advise me, but I also had a private life in my own room. Once I could cope in my own room they moved me on when I was ready. That was important, it has to be when you think you're ready and not before.' (John, male, aged 52; roof/homeless 20 years, housed 12 years)

The ethos behind particular resettlement strategies appeared to follow three dominant perspectives: medicalization, normalization and the battle for the mind. These perspectives influenced the way roofless people were viewed and the way resettlement was approached.

Medicalization

Medicalization is a view that homelessness is a problem that requires treatment, care plans, recovery periods, counselling and rehabilitation (Cockersell 2006). Medical jargon has become an established part of homelessness discourse, thus it is difficult to analyse the resettlement process without using it. The strong association of mental illness and drink/drug addiction with rooflessness reinforces this view, as addiction is often treated in psychiatric hospitals. Medicalization appears to come from the overemphasis of policy on crisis management rather than prevention. This focuses

attention primarily on the characteristics of roofless people, rather than broader structural factors. Similarly, by viewing rooflessness as the problem, attention is diverted away from the biographical and structural factors that triggered it.

Normalization

Normalization is a view that the behaviour, clothing and lifestyle of roofless people needed to be modified in order to enable them to appear to fit into housed society. This viewpoint is strongly associated with medicalization. The original concept stems from the psychiatric tradition.[17] Normalization appears to be derived from the expectations of those providing resettlement. They expect to be able to teach roofless people how to live in housed society, regardless of the reasons for their rooflessness or its duration. The emphasis is on behaviour modification rather than helping people deal with the root causes of their rooflessness. Rooflessness is viewed as dysfunctional behaviour rather than a product of interwoven complex biographical and structural problems.

Battle for the mind

From this viewpoint, rooflessness needs to be viewed in terms of an individual's biographical history, their coping strategies and self-perceptions. The battle for the mind comes from the idea that it is people's mindset that needs to change. Over time, individuals learn poor coping strategies and develop misconceptions about themselves that lead to, for example, poor self-esteem. People could be helped to reintegrate into housed society by receiving help to deal with past events, learn new ways to cope with everyday and complex issues (both structural and personal) and gain an understanding of and confidence in their own abilities. Thus, they were not merely rehoused and taught to cope, but enabled to thrive and lead meaningful and fulfilling lives.

This latter approach appeared to be the most holistic. It allowed the individual to develop by enabling them to cope with their own past and events that subsequently happened. This is an important concept within resettlement. Many roofless people felt disconnected from reality and housed society. Disconnection was caused by a number of interconnected factors, stemming both from their route into and experience of rooflessness. The intensity of such experiences had a deep psychological impact. Resettlement that did not tackle this frequently resulted in further rooflessness.

As the nature of street life meant that individuals were obsessed with the here and now, a sense of future was often lost. With it went the hopes and dreams that future brings. Indeed, some people felt doomed, that the future did not exist. Others were depressed, feeling that they would not survive long enough to think of a future:

> 'The problem for me at that age was that I never really believed that I would get old. I could not imagine it and did not want to. That's why life continued the way it did. I had no thoughts for the consequences or the future. As far as I was concerned, the future simply did not exist.' (John, male, aged 52; housed 12 years, roof/homeless 20 years)

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17 Discussed in more detail in Chapter 3.

Those attempting to resettle after years being roofless experienced culture shock. A combination of ending (or drastically curbing) substance abuse and moving into some form of accommodation could be psychologically unsettling. A similar form of culture shock may be observed in missionaries returning to Western society from Third World countries: interviews with returning missionaries suggested that they experienced reverse culture shock more powerfully than initial culture shock. This was true of roofless people too. A number felt the shock of returning to housed society more acutely than their first experience of rooflessness. One man, now a nurse and married with a son, noted his experiences when he went home after three and a half years of rooflessness:

> 'I was happy but things were hard to come to terms with. Things like hot water coming out of taps, toilets that flushed. I was used to digging a hole with a spade. It wasn't bad though. It was surreal. That whole time getting used to things again was just surreal. But it was claustrophobic after not having to worry about much, having no responsibilities. Had I gone straight from the tepee to the flat, I wouldn't have made it. I couldn't have done it.' (Mark, male, aged 28; housed four years)

There were a lot of adjustments to be made, especially for the entrenched roofless. People had to relearn how to live in accommodation, how to live in close proximity to other people, personal hygiene, budgeting and later on cooking, cleaning and planning ahead. Those who left home at or before age 16 may never have acquired these skills and needed to start from scratch. Learning such skills was made more difficult by low self-esteem, befuddled brains from years of substance abuse and raw emotions.

In addition to the practical things that needed to be learned were coping strategies. Individuals needed to change the way they dealt with things or had coped in the past. For example, using drink or drugs to avoid thinking or feeling, opting for the 'fright and flight' (running away from problems) or 'ostrich' (pretending it's not happening) coping strategies. These negative coping strategies had contributed to their rooflessness and its continuance. To avoid people repeatedly making the same mistakes, old coping strategies needed to be unlearned and replaced with new, more effective ones.
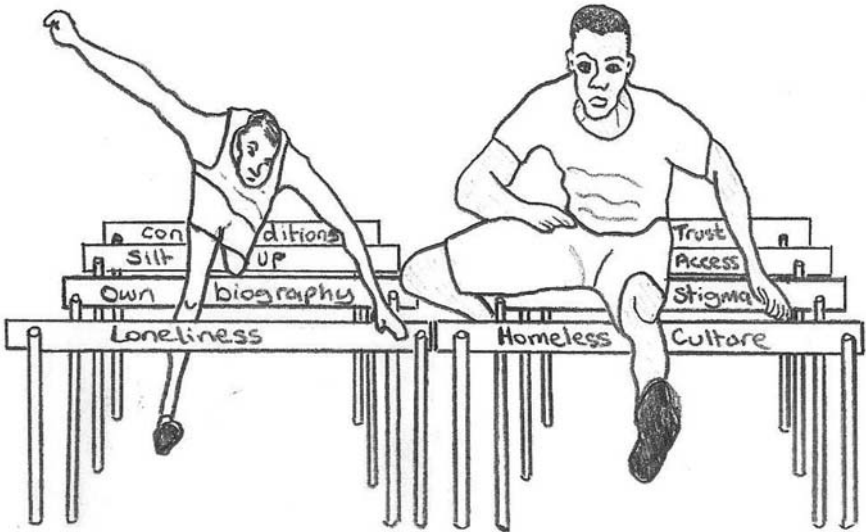
Illustration 8.1 The obstacles and hurdles faced by roofless people resettling

One of the biggest psychological hurdles that needed overcoming was the fear of failure. Some of these feelings were deep-rooted, stemming from childhood. Feeling of failure eroded self-confidence and crippled and inhibited success, however good the resettlement programme. Failure is a natural part of everyday life, people needed to learn how to cope with and manage failure without being completely crushed by it.

> 'When I leave [hostel] I want to feel secure and safe with my new place. I don't want to live in fear of being evicted or of losing the place once I have it. I want help now to prepare for that.' (Shirin, female aged 18; hostel)

Despite wanting help, roofless people found it difficult to accept or receive help. A combination of the fierce independence and fear of trusting people needed for survival thus far inhibited their ability to ask for and accept help. Those with mental health problems, learning difficulties or substance abusers found it difficult to understand the information, instructions or advice given. At times help was imposed on people with little or no explanation of what was being offered and why. Thus help was, at times, perceived as invasive, intrusive or inappropriate. All this meant that, on occasions, help was available, but individuals were unable to receive it or use the resources available to them. For example, this man's housing officer was also his keyworker; he did not understand this, so opposed assistance:

> 'I'm a little confused about the housing association that I rent from. [Harry] from the housing association is my landlord. I've received a letter saying I've been here for over two months now and he wants to visit me to see how things are going. This is none of my landlord's business. I feel as though I've to justify myself to my landlord. In the past I've

never had to speak to landlords about personal stuff and I don't understand why I have to now.' (Chris, male, aged 30; roofless two years, housed five months)

Lack of knowledge played a large part in episodic rooflessness, including not understanding entitlements or simply that they could ask for help. Some found it difficult to identify the type of help they needed. Unable to ask for specific help, they received none. Thus it was not their inability to receive help that was the problem, but their lack of knowledge or inability to perceive that there would be help available:

'I didn't know what to expect, so I didn't really expect much. They answered my questions. I don't really know what to ask for or what help I need, or if I need help. They do answer my queries and that's it. I assume that's all I get.' (Chaloka, male, aged 30; housed one month)

'People keep asking me what kind of help I needs, but I don't know, I just knows I needs help because I'm not coping and don't know how to cope.' (Tommy, aged 35; rough sleeper)

A major factor that influenced the success of tenancies appeared to be the individual's perspective on the resettlement process. There were those who had been housed for months, even years, who viewed their tenancy as a matter of luck. They felt lucky to have accommodation, unlike their roofless friends. Their continued success in maintaining that tenancy was not perceived as hard work and their motivation to succeed, but because they stayed lucky. When things went wrong (for example with benefits or bills), they often failed to seek help. This left them vulnerable to further rooflessness. Those who had experienced episodic rooflessness over a number of years felt that repeated tenancy failure proved their theory; they were unlucky. This was despite their ability to identify budgeting, debt, substance abuse, lack of knowledge or understanding of the support on offer as contributory factors to their episodic rooflessness:

'The next challenge is to buy clothes and things like that, to be normal. This is hard, because you don't want to buy new clothes or a chair or something, just in case things don't work out and you're thrown out.' (Chris, male, aged 30; roofless two years, housed five months)

Another danger with believing that successful rehousing was due to good luck was the natural desire to want to share that luck. This often meant inviting roofless friends to stay with them. This frequently resulted in tenancy failure and rooflessness. Additionally, the intense isolation and loneliness experienced by those rehoused enticed them into inviting roofless friends to live with them. Those determined to make rehousing a success and reintegrate back into mainstream society realized that such success relied on them severing all links with the homeless culture. Self-isolation or self-exclusion from the homeless culture was a painful and difficult process:

'What I really need is help to meet people. I go to probation once a week, but they are the only people I really meet. The hardest thing was giving up seeing my drinking friends, meeting with them and chatting. Now I only know one person in the block, but I don't

speak to him much. I'm scared to meet my old friends because I know that it wouldn't work, because I'd just start drinking again. The hardest thing was starting afresh not knowing anyone.' (Chris, male, aged 30; roofless two years, housed five months)

The intense sense of loneliness and isolation experienced by some led to depression, which inhibited their ability to make new friends within housed society. Additionally, some found that they were sharing a tenancy with their worst enemy, the person they despised the most, had the least respect for and simply did not get on with: themselves. For those, recovery was literally a matter of willpower as they battled for survival.

A serious look at resettlement would need to consider ex-roofless people's perceptions of how it could or should work, any gaps in existing provision, and what does not work. In practice, roofless people wanted programmes that had several stages to progress through. They wanted time to deal with the issues that triggered their rooflessness within a safe environment. They expressed a need for preparation for moving into a flat, what to expect, how to get fuel supplies connected, information on card meters and other ways of paying bills, how to set up a home, where and how to get furniture and basics such as bedding, pans, etc. The overriding concern was for help with and practice to budget before having a tenancy, rather than a booklet to lose in packing or read when able:

'I needed to be able to progress through different schemes. You know, like you spend three months here then you go onto the next step and the next step and the next and back into society. You could feel confident at being homeless then and move forward.' (Jenny, female, aged 23; hostel)

'I'm not sure how to get things like getting the electricity on. One friend phoned her mum to find out how to get gas.' (Anita, female, aged 20; hostel)

Difficulties often set in once the novelty of trying to furnish their place and juggle finances wore off. Most felt ill-prepared for the long term. The hardest time appeared to be at the end of the first year. By then, most had their basic furniture and their finances were under control. However, most still had no friends and were not in employment or were unable to work. At this stage some found that the isolation became unbearable. The drudgery of constantly counting every penny and never being able to afford luxuries, such as new clothes, made it difficult for them to be optimistic about the future. The next 12 months appeared crucial. Those who managed to make it past two years in housing were the most likely to remain housed for sustained periods. After being rehoused for two years they still appeared vulnerable to further episodes of roof/homelessness, especially those who had to move frequently when tenancy leases ended (those housed in the private-rented sector or, in some cases, with housing associations):

'I have to move out of this place. I hope the new place will be permanent. The owner of this place wants it back off the housing association. We all have to move out, I had a letter about it. They are moving us to a place down the street. It's a brand new place. I've seen it. I hope it's going to be okay. The worst thing is I've just decorated this room.' (Samir, male, aged 26; housed one year)

New Horizon Youth Centre (homeless charity) noted that when their clients' tenancies failed, it was most likely to be around six months or 18 months after moving in. Losing tenancies at six months was triggered predominantly by debts and substance-abuse-related problems. However, the tenancies that broke down at 18 months were different. At 18 months support had either ended or was about to end. New Horizon noted that those who hit problems at this point appeared to be embarrassed or reluctant to return to homeless agencies for help if difficulties set in. They were outside the system. Rehoused roofless people also had not asked for help when they hit crisis point, mainly because they felt that it was 'down to them now to make things work'. Those with resettlement support did not discuss all their problems with keyworkers; they did not want to 'cause too much trouble' or worry the keyworker. Thus, those who could have been in a position to spot danger signs were unable to pre-empt situations or assist.

Rules were an important part of successful resettlement. It was important to understand how rules were set and how hidden rules were learned. Rules were discussed as a sore point at the outset of resettlement, deterring people from entering night shelters or hostels. However, once in a resettlement programme, people wanted to know how to change. The most successful resettlement programmes appeared to be those beginning with light, broad rules that were then added to as and when individuals could cope with the next phase of resettlement. For most, rules needed to exist to create a sense of security. Rules that were too slack were counterproductive, leaving people feeling unsafe both physically and ontologically. Equally rules that were too rigid made it impossible for the individual to achieve, feel valued and learn how to decipher right from wrong behaviour for themselves. In some senses this aspect of resettlement can be compared with toddler training (Green 1995). Many of the same principles apply. Rules were part of discipline, but also part of a Goffman-style game that needed to be learned. Fitting in, belonging to any society requires that we learn the rules and know how to play the game to be able to fully participate. If we are serious about reintegrating the roofless into housed society, we need, at the very least, to teach them how to play the game and give them the skills and the means with which to participate:

> 'A basic set of rules I was given to follow. I knew that if I didn't follow the rules I would be out. The rules applied to everyone, it was disciplining people so they didn't misbehave. Everyone felt equal and that felt safe. The hostel prepared me for life on my own. I didn't know anything so I wanted to learn. The hostel even learned me the way around Sainsbury's.' (Samir, male, age 26; roof/homeless six years, housed one year)

Finally, feeling respected, heard, equal and valued were important aspects of resettlement. This instilled confidence and the desire to continue with the programme. Similarly, programmes that created a sense of achievement created a positive learning environment and attitude to life. Positive attitudes and self-perceptions appeared vital to both long-term success and in coping with the initial inertia of moving into a tenancy.

Table 8.2 Summary of resettlement triggers: Obstacles during the first phase of resettlement

Triggers of resettlement	Encourages resettlement	Biggest barriers to resettlement	Biggest obstacles to overcome	Counterbalancing supports and pillars
Catalysts	Reached the bottom Lifestyle getting too much Sudden shock/trauma Someone cared	Gaps in information and knowledge Substance abuse Depression Anti-social behaviour	Homeless culture Loneliness Staying motivated/determined to succeed	Feeling respected, heard, equal and valued Progressing at client's pace
Crisis intervention	Adequate assistance Accommodation as soon as they become roofless	Not statutorily homeless Gate-keeping strategies preventing access to hostels and empty beds	Placed in inappropriate hostels /temporary accommodation	Roofless prevention measures Daycentre-based support
Hostels	Good-quality hostel	Accommodation only (no support) Multi-room occupancy-style hostels	Hostel regime Stigma Hostel conditions Fear of crime	Flexible, open hostel regime Single rooms Clean environment
Keyworker	Enthusiastic keyworker	No access to support networks No safety net of support in place	Overloaded keyworkers Frequently changing keyworker or no designated individual Mistrust	A designated point of regular contact Creative, flexible keyworker approach
Resettlement programme	Good, flexible resettlement programme	No resettlement work on offer	Hostel or move-on accommodation silts up Institutionalization in hostel system	Staggered or staged resettlement programme Careful management of failure

Table 8.2 continued

Triggers of resettlement	Encourages resettlement	Biggest barriers to resettlement	Biggest obstacles to overcome	Counterbalancing supports and pillars
Housing	Good quality housing	Poor state of property repair Lack of furniture and basics	Temporary housing Own biography/history Budgeting and finance	Preparation for moving in, help settling in, being given the basics
Employment	Employment	No home, no work – no work, no home	No current CV Lack of qualifications Boredom Isolation and loneliness	Further education Vocational training Voluntary work Meaningful daytime activity
Informal support networks	Family/friends: Still in contact and interested in their well-being Prepared to take them in	Family disowned them Proximity to negative social networks	Disagreements within the family Making new friends	Family mediation Access to clubs, societies and places to meet/make friends

Table 8.2 summarizes the main factors involved in the first phase of resettlement, plus the barriers, obstacles and hurdles encountered by roofless people trying to resettle. The last column suggests counterbalancing supports and pillars that could make the process easier.

Moving In and Budgeting

Moving house is renowned for being one of the most stressful activities. There is every reason to suggest that this would be even more stressful for rehoused roof/homeless people taking on their first secure tenancy. That aside, there were a number of obstacles that needed to be navigated as part of the moving in process. If we are serious about ending episodic rooflessness, then we need to examine carefully these obstacles with a view to making them easier to overcome.

Most rehoused roofless people appeared to be ill-prepared. They did not know what to expect in terms of the type or condition of the property they were likely to receive. Most had no plans or savings for removal costs, furniture or basic supplies, such as cleaning or cooking utensils. Permanent or secure tenures were almost always unfurnished, thus such preparation was vital. Few roofless people received even the most basic of advice when moving in, for instance about existing projects in their area (for example furniture schemes), getting utilities connected or the different payment methods (card meters). Interviews with accommodation providers indicated that some projects and hostels felt that it was not their duty to assist in this way and so offered no guidance or information. In terms of the projects, they felt that clients could not take in that amount of information. Just getting the keys and benefits sorted out was stressful enough. This appears to be illogical. People so vulnerable that they could not cope with information about the moving-in process were moved in without any information or assistance and expected to cope:

> 'Gas and electric you have to connect it all. I moved in in December, with no gas and had to wait three days to have it connected. There was no card meter. I had no water for 30 hours because I couldn't find the tap. It was dark and I had no electric to see with.' (Samir, male, aged 26; roof/homeless six years, housed one year)

> 'I had problems sorting out the gas, electricity and water when I moved in. I made appointments for them to turn their services on, but they didn't turn up and I'd be waiting in for hours in case they arrived. No telephone caused problems because I couldn't chase them up until the next day, and then I could only rebook the appointment. This was very stressful and I found it difficult to cope with sorting everything out.' (Gabriella, female, aged 35; episodic roofless seven years, housed three months)

There were some excellent examples of good preparation for rehousing, although the extent to which homeless people were able to save for and amass possessions ready for moving into accommodation was dependent on structural factors, such as the degree of security within hostels (own lockable room) and staff willingness or ability to accommodate an individual's needs or plans. For example, Keychange in Reigate encouraged those tenants accepted on the housing waiting list to save money, plan colour schemes for their new accommodation, buy in basics such as tea

towels, tin-openers, kitchen and bathroom accessories. Ontologically this was very effective as it gave those waiting to be housed something to aim towards, taught them budgeting skills and gave them a sense of pride and self-respect. Saving and planning, sometimes two years in advance, made it less likely that tenants would default on their tenancy:

> 'I have a lot more pride in myself now. I take care of myself. I am budgeting my money better. I've been gradually buying things in for when I move. I've got all my kitchen stuff, now I'm working on my bathroom. I've chosen the colour schemes and everything. I've spent a lot of money.' (Heather, female, aged 19; hostel)

Many tenants struggled to resolve problems left behind by the previous resident, including arrears on bills, damage done to the property or the hostility of neighbours. At times, ex-homeless people had to spend weeks and months trying to get fuel suppliers to recognize that a tenancy had changed hands. Others took months to pay off other people's arrears, running the risk of getting into serious debt themselves:

> 'When I moved in I had no heating. It took 3½ months to get [gas supplier] to clear the bill for the house which the last tenant had arrears on. So I was without electricity and gas all that time. They kept losing the letters and saying that they couldn't find any record of the property changing hands.' (Peter, male, aged 38; roof/homeless 19 months, housed nine months)

> 'I keep getting sent a reminder bill for the previous person's gas, so I have to keep contacting the gas board to ask them not to cut me off because I'm a new tenant. The gas board seem slow to respond. I have seen the size of the gas bill and am worried if my bill is the same amount I will not be able to afford to pay it. So I sit in the dark and don't have the heating on to cut down on gas and electric.' (Gabriella, female, aged 35; episodic roofless seven years, housed three months)

> 'At 7am someone was banging on my door, threatening to break the 'fucking door down'. They thought I was someone else, the person that used to live there. The council changed the locks and said I had to be reasonable about this, they don't usually change the locks for people.' (Valerie, female, aged 24; housed six months)

It took an average of three to six days for those rehoused to get some form of lighting and heating sorted out. However, frequently they had no cooking facilities, so home-cooked meals were out of the question. It took months before they could afford cooking facilities, such as microwaves or two-ring hotplates; they often didn't have the basics of cutlery and pans. Setting up home is far more expensive than normal week-to-week living, requiring a substantial outlay to buy, for example, toilet rolls, washing-up liquid, salt, sugar and other everyday things that we normally replace periodically. Thus most people either ran up rent arrears soon after moving in, stole what they needed or had to return to daycentres for meals, laundry and personal hygiene. Resulting tenancy failures were recorded not as structural problems, but as the individual's personal failings: failure to budget, set up home or pay their rent:

'I now understand why some people sell the Big Issue even when they have a place. They have to sell it to survive. There are a lot of bills to pay, and a lot of expenses, especially when you're first moving in.' (Mrigesh, male, 49; housed two years)

Not surprisingly, then, the majority of rehoused people experienced real difficulty in getting furniture for their accommodation.[18] Those using furniture projects had to wait for donations of items they needed. Financing the acquisition of furniture was also problematic: some were entitled to a furniture grant or loan from the social fund, but applications took approximately four weeks to be processed. Loans meant that people started their new lives in debt. Some would not take a loan for fear of losing their tenancy:

'It took eight months just to get the basics in furniture. There's a charity where you can get a three-piece suite for £20 and delivered. I had to save up for two months for a cooker. I was lucky someone gave me a second-hand microwave.' (Andy, male, aged 51; roof/homeless 18 months, housed two and a half years)

'Eventually I was given a flat, I put into the social for a loan but they refused. I only got enough money to pay for a cooker and a bed. Nothing else. I'd a roof, but nothing to put in it.' (Foxy, male, aged 32; roof/homeless nine years, housed eight years)

These difficulties with furniture and fuel supplies meant that people could easily feel that they rented a squat or were sleeping rough indoors. They struggled to feel positive about their situation, feeling that the only thing that separated them from rooflessness were bills and a few bricks and mortar. One man who moved into an unfurnished housing association property, noted: 'I've constructed a hive inside the flat, to keep myself warm and to stop people being able to look in' (Peter, male, aged 38; roof/homeless 19 months, housed nine months).

Budgeting was perhaps the biggest concern for the vast majority of those rehoused. They experienced sleeplessness, constant worry, stress and depression. Many missed meals to pay bills or went into arrears to buy food or essential clothing. Those with substance abuse problems struggled to budget and support their addiction. In an attempt to budget and control expenditure, most rehoused people preferred to pay bills on a weekly or fortnightly basis to match benefit payments (before the changes). Most companies actively deterred this, preferring payments that followed company payroll systems (monthly payments):

'One of my biggest problems is budgeting, if anything will cause me to lose my flat that will. I made sure my gas is on a card meter and the electric is on a key meter, because I simply wouldn't cope with receiving bills once a quarter. I would be constantly worried about having to save up that much money.' (Chris, male, aged 30; roofless two years, housed five months)

'When they housed me they housed me in a housing trust and the rules were that you could only be in two weeks' arrears on your rent before they processed you for eviction.

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18 Also Rosengard (2002); Alexander and Ruggieri (1998); Randall and Brown (1994b, 1995).

I had to learn to budget then and that was hard. At first I'd get into arrears, then when the next giro came through I would go down to the office, pay all the rent arrears off, but have no money to live on for the next fortnight. This happened several times.' (John, male, aged 52; roof/homeless 20 years, housed 12 years)

Low-income budgeting is common practice for individuals and families surviving on benefits and they find it difficult. However, not all roofless people had experience of budgeting before they became roofless. Furthermore, as has been shown, roofless people may have come from middle-class backgrounds. Thus they were unused to this degree of restricted expenditure. Those used to middle-class lifestyles were used to a better diet, better clothing and a different general standard of living, all of which was impossible to achieve on benefits. Furthermore, most were financially worse off in accommodation than in hostels. They resented the restrictions that low income placed on their social lives. Thus, in addition to budgeting, rehoused people had to battle with preconceived ideas and expectations:

'My main concern is how I'm going to cope with the expenses, paying for the heating and water. I have to be very cautious when shopping, because I don't have a lot of money and it's easy to overspend. I can't always have foods I like or that's good for me because I can't afford them.' (Gabriella, female, aged 35; housed three months)

A number of roofless people (especially the young) naively thought that it did not matter if they did not pay their bills or ran up arrears. They appeared surprised to have been evicted. The young assumed that allowances would be made for their age:

'I didn't know anything about rent and food so I said I'd pay next week. I kept saying next week so I got evicted.' (Anita, female, aged 20; mother and baby unit)

'It's just bugging me about getting some money. I don't understand budgeting. It is really hard, I live off £41.50 a week. I can't work because they will stop my money. It's hard paying your rent and all that. It's like £20 per week. Plus I am still paying off for my TV and video. I have no money for myself.' (Sandra, female, aged 16; hostel)

Many of those rehoused struggled with budgeting and finding a routine or creating some form of financial plan. Those that succeeded not only were likely to keep their tenancy, but had a better quality of life. There were examples of innovative ideas:

'I've sorted out my bills problem. I have my giro paid directly into a bank account and now everything is taken out by direct debit. I think it's great because the bank does all my budgeting for me.' (John, male, aged 52; housed 12 years)

'I got a loan from the DSS, about £100. I'm on my third £100 now. I get a loan to buy something and when I've paid it back I get another. I bought stuff from a catalogue; you have weekly terms. I buy one thing at a time and pay it off bit by bit. I already had my TV and some furniture at the hostel. I bought those from the catalogue and paid them off every week.' (Samir, male, aged 26; housed one year)

Table 8.3 Summary of resettlement triggers: Obstacles during the second phase of resettlement

Factors promoting resettlement	Barriers to resettlement	Obstacles to overcome	Counterbalancing supports and pillars
Good-quality resettlement programme	Inadequate preparation for moving in No resettlement programme	Finding alternative sources of advice/help Frequently moved between projects	Proper resettlement programme Flexible – room for failure
Access to move-on accommodation when they are ready	No move-on accommodation Not statutorily homeless Inappropriate accommodation System too rigid, does not manage failure	Institutionalization within hostel system Staggered resettlement	Keyworker (probation officer) with power to broker access to accommodation and other resettlement help
Condition of accommodation offered	Poor state of property repair Difficulty getting fuel supplies connected Difficulty obtaining furniture and household basics	Access to grants/finance to set up home Access to knowledge of projects that can help Coping with bureaucracy	Home starter packs Access to furniture Easy-to-follow picture booklet explaining fuel supply options
Finance	Rejected for community care grant/social fund loan Benefit delays/cancellation Lack of knowledge of entitlements	Poverty Budgeting Benefit system Work-based benefits	Preparation for moving in Learning budgeting strategies Access to good-quality advice Gaining employment
Adequate support	Access to support services or supported accommodation Duration of support No designated individual to contact Keyworker frequently changes	Willingness and ability to access, recognize and receive help when needed	Help to prevent rooflessness Support to settle Keyworker known and trusted by client

Table 8.3 continued

Factors promoting resettlement	Barriers to resettlement	Obstacles to overcome	Counterbalancing supports and pillars
Friends and local connections	Housed away from family, friends and local connections Isolation, loneliness and depression	Finding other sources of friendship/social networks Social isolation Boredom, no meaningful daytime activity	Joining club, society, church with regular activities Employment, voluntary work or further education
Coping strategies	None or weak coping strategies	Learning new coping strategies Confronting their problems	Feeling respected, heard, equal and valued Advice/counselling
Personal characteristics	Inability to use or play the system Depression	Own attitude/behaviour Onset of depression, return to substance abuse	Innovation, self-motivation, determination, self-confidence Vision/plans for future
Social inclusion in mainstream society	Depression, mental illness, substance abuse Still connected to homeless culture Finances	Quality/standard of accommodation, no furniture Social exclusion Access to employment/ daytime activities	Employment/voluntary work, further education or daytime activity Joining societies/clubs, churches Family/friends close by
No safety net	Access to advice, help/support Access to supported accommodation Duration of support offered	Willingness and ability to access, recognise and receive help when needed Not knowing what help they need	Safety net after being housed and intensive support ends

There were examples of rehoused people turning budgeting into an art form, even using it to curb or stop their substance abuse. They ensured that they never had spare cash to spend on drink or drugs. Others opted for the treat and reward method, using the money they saved from not buying drink or drugs to buy something else they wanted. However, this required great self-discipline and determination:

> 'One of my biggest problems is budgeting. At present I've managed to get everything planned, but my focus is on stopping myself from drinking. So when I gets benefits I spends all the money straight away. I puts the electric on a key, the gas on a card, pays the rent and then buys all my food and the dog's food for the next two weeks. I planned it this way so that I'm so skint for the fortnight that I can't afford a drink even if I wanted one. This way I've no bills and nothing to keep worrying about. All of this is taking some getting used to because I'm used to having money everyday, but spending it on drink.' (Chris, male, aged 30; roofless two years, housed five months)

> 'I've slowed down on the booze. The good thing about this is I've actually got a bit of money now, so I can go out and buy clothes and things. I bought some clothes the other day and it made me feel good.' (Sandy, female, aged 27; hostel)

Hopes and Dreams for the Future

Those in hostels and temporary accommodation appeared to see the future in terms of accommodation, a relationship or a job. Most could not imagine anything existing beyond getting a tenancy, or could not imagine ever living in a tenancy despite wanting one.

> 'I don't know what is going to happen in the future, but I think I can face it a bit better now. I've stopped drinking altogether. I still have to take things one step at a time and that's probably going to last for quite some time.' (Colin, male, aged 47; sleeping rough and on friends' floors)

> 'I would like to settle down, have a girlfriend. But no one would have me with these scars [from self-mutilation], no one half decent anyway. I'd like somewhere of my own that I can afford. But that's a long way off.' (Alex, male, aged 35; rough sleeper)

More disturbing, many rehoused people had no real ambitions for the future. Those in tenancies often still lived one day at a time even after four years in housing. With the exception of those in full-time employment, they found it difficult to talk in terms of the future, even those rehoused for ten years or more. Those who did speak about finding college courses, employment or counselling did not talk in terms of long-term career prospects, but getting themselves sorted out. They could only look a short distance into the future. They appeared to be afraid of hoping for a brighter future, with an almost religious fear that if they hoped too much they would 'curse' the present:

> 'My goal is to stay off drinking for one year. I now want to start going to a gym, to get my strength back and to help me feel healthier.' (Chris, male, aged 30; roofless two years, housed five months)

'I am having cognitive therapy and next year we are going to go through therapy from my childhood onwards. I am trying to organize to go back on a degree course and I am going on assertiveness and confidence-building courses.' (Valerie, female, aged 24; housed six months)

Those failing to be able to see any form of future appeared to be those still entrenched in the homeless culture and those still vulnerable to rooflessness. Similarly, those only able to look a short distance into the future seemed to be those still afraid of becoming roofless again, those struggling to cope with their tenancy or struggling with life in general. This struggle kept their focus on day-to-day survival and left them vulnerable to stress, depression and failure to thrive in housed society.

Those with the most hope were the people with careers in full-time employment, such as nursing or accounting. They expressed the future in terms of promotion, partners or spouses, plans for their family. They could see the next ten years and were happy to view the future. This group were the most integrated back into mainstream society. Even the language used to describe the future was different. They viewed rooflessness as a past experience never to be repeated, and spoke in terms of the problems they had overcome, beaten or conquered:

'I get my nursing degree this year and figure that if I work hard I could get promoted to sister within four years and then financially we should be much better off.' (Mark, male, aged 28; housed four years)

Conclusion

There are immense, complex, multidimensional difficulties to be faced by those exiting rooflessness. These difficulties arise from complex structural, behavioural and emotional factors that are inextricably entwined and, at times, negate positive influences or exacerbate existing problems. Difficulties appear to increase with the duration of rooflessness and the intensity of involvement with the homeless culture. Although deserving versus undeserving is supposedly an outdated concept within social policy, there are clear indications that value judgements concerning roofless people in general and drink/drug addicts in particular have shaped and defined existing resettlement policies. These have then become entrenched within the homeless industry and local and national government provisions. This has, by and large, created an unco-ordinated approach to resettlement that actively discourages or prevents people from moving into tenancies and fully reintegrating back into housed society.

There are clear indications that a number of changes could be made to make resettlement easier and more sustainable. These will be discussed along with the main findings and recommendations in the next chapter.

Chapter 9

Conclusions and Recommendations: Prevention and Intervention

In summary, the way homelessness is defined impacts on policy, funding and the general public's perceptions of rooflessness. The sociological theory held affects the way rooflessness is treated as a topic and subsequently influences social policy. No single theory proved adequate to completely explain rooflessness, though structuration perhaps came the closest. Social policies, including housing, economic, employment and homelessness policy, can both prevent and trigger vulnerability to rooflessness. Those on the streets are a product of current and past social policies, with much of the existing policy developed by default rather than systematic design. The resulting consequence has been a legacy of disjointed, unco-ordinated projects and pieces of legislation, despite several attempts to unite them. Successful assistance for the roofless appears to be a lottery dependent on geographical location, government and voluntary sector policies and funding sources.

Rooflessness is complex in nature. People's routes into, through and out of rooflessness and its triggers are many and varied, often stemming from childhood. Once roofless, people's experiences can be compared internationally. Rooflessness appears to be the solution to longstanding problems rather than the problem itself. People spend considerable time trying to avoid rooflessness before it actually occurs. Services to prevent rooflessness are predominantly limited to crisis management, intervening after or when rooflessness is about to occur. Thus, the lack of available help and information, and the lack of access to accommodation, eventually leaves people with few alternatives.

A homeless culture develops on the street and is borne out of the needs of roofless people. This culture both ensures survival and acts as a deterrent, locking individuals into an often destructive alternative way of life, which prolongs rooflessness. Despite the homeless industry's detailed knowledge of the homeless culture, little is done to counter it and make it easier for people to reintegrate into mainstream society. The lack of a cohesive, united response to all aspects of rooflessness has resulted in many policies diluting or negating the impact of others, resulting in palimpsest. Thus roofless episodes are created or lengthened by some of the homeless industry's attempts to assist and by central and local government policies.

The process of reintegration back into mainstream society and achieving social inclusion is littered with many identifiable and varied obstacles and hurdles that need to be navigated and overcome by roofless people. Many are unnecessary and simple to demolish. However, the homeless industry, policy-makers and wider society's perception of rooflessness creates a reluctance to make exit routes from rooflessness

systematic or easier – for fear that this would increase rather than reduce rooflessness or episodic rooflessness.

Serious attempts to stop rooflessness occurring need a two-pronged approach, starting at policy level. Firstly, a preventative approach: policy aimed at crisis point to divert people away from rooflessness, action should be multifaceted, aimed at structural (including access to information), biographical and behavioural problems. Secondly, an intervention approach: policy aimed much earlier, a strategy to catch people vulnerable to homelessness, minimizing the impact of the triggers of rooflessness as they occur – thereby averting homelessness and, therefore, rooflessness. Triggers of rooflessness occur throughout the life-course and across the social classes; therefore the most effective intervention would need to mirror that. There is a need for more innovative ways of tackling homelessness and rooflessness through a combination of prevention and intervention. This has already begun but still has a long way to go (nfpSynergy 2003).

Before any discussion of prevention and intervention strategies must come a consideration of Carlen (1994) and Jencks' (1994) argument. Easier access and good-quality facilities have been shown to increase the number of people willing to take a chance at declaring themselves homeless (or roofless) in order to access better provision. This inflates homeless figures, clogs up the system and places vulnerable people in danger. This occurs because there is no diversion point, no easy access or good-quality facilities aimed at people who are precariously housed and trying to avoid homelessness. The art of any effective social policy towards prevention or resettlement is finding the right balance between offering people a fast-track into accommodation and making it so difficult to get accommodation that it is virtually impossible to avoid rooflessness or escape from it. Prevention, intervention and crisis management of rooflessness needs to find that balance.

Prevention – Crisis Management

For prevention to be successful, there needs to be a consideration of both initial rooflessness and episodic or rooflessness after resettlement. We need to look again at the way rooflessness is crisis-managed. The focus needs to shift from the current reactive response to a more proactive one. With this in mind, it is important to look at what can be done immediately before homelessness or rooflessness occurs in order to prevent it. Isolated triggers rarely result in rooflessness. It is the accumulation of triggers over time (seven to nine years) and their occurrence in quick succession that makes them so potent. The length of time between triggers starting and rooflessness occurring suggests that there ought to be ample time for prevention (and even intervention) to take place.

People rarely became roofless by choice, spending months, even years, avoiding it (even young people). Rooflessness often occurred by default, due to the lack of alternative options available. People rarely became homeless and roofless at the same time; there was usually a gap of one to two years. Thus rooflessness was the last resort, only occurring when all other options had been exhausted. It is important to examine how people avoided rooflessness, as this gives an indication of where

policies to prevent imminent rooflessness should be aimed. By responding to people's needs rather than perceived needs, it is possible to be more innovative in terms of the response to those needs.

Homeless People's Methods of Prevention

The following were the most common methods used to avoid rooflessness.[1]

Sofa-surfing or sleeping at friends/relatives

The most common first port of call and a successful way of avoiding rooflessness. Those experiencing triggers but who did not become roofless used one, maybe two friends to sofa-surf. Those who became roofless moved frequently around a series of friends until they ran out of people to stay with. Mobile phones were used by young people to secure a 'sofa' for the night. The longer a person sofa-surfed, the more likely it was that they would experience diminishing standards of accommodation and alienation from friends and family. Sofa-surfing was also used as part of people's long-term housing strategies for avoiding repeat episodes of rooflessness or as alleviation from time on the streets or in hostels. There is a natural assumption that sofa-surfing would mean cleanliness, warmth and comfort. However, those on the verge of rooflessness or seeking respite from the streets were more likely to sofa-surf in squat-style accommodation. Some people ended up sleeping between cigarette ends, ash and dried-up vomit patches. Others slept on floors, in baths or walk-in wardrobes.

Photograph 9.1 Sofa surfing
Source: Megan Wilkinson, 1996.

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1   For a detailed look at the ways young people avoid rooflessness, see Smith and Ravenhill (2007).

House-hunting

Those who became roofless as adults (for example aged 22+) often tried to resolve their own problem by finding accommodation. They used local newspapers and estate agents to try and find low-rent properties. However, in areas like London and the South-east, few low-rent properties were available.[2]

Statutory and voluntary advice agencies or departments

People spent considerable time before becoming roofless trying to find help or assistance with their housing problems from Citizens' Advice Bureaux, police stations, law centres, their own solicitor/lawyer, local libraries, Connexions services, housing advice centres, benefits office (or DSS) and (usually as the last resort) the homeless persons' unit or housing department. Too many people found that these places had either outdated or no information. Most were simply told to go to the homeless persons' unit, regardless of statutory entitlement.

When looking at prevention it is important to look at what roofless people themselves felt would have prevented their rooflessness. The general feeling was that rooflessness eventually became inevitable and at that stage nothing could have been done (see also Waller 2000). However, they did have views on what might have prevented rooflessness and homelessness (Table 9.1).

People's route into homelessness and the triggers of their rooflessness often began in childhood, or certainly years before rooflessness occurred. By the time rooflessness was imminent, people either did not recognize that they were about to be roofless or felt that their situation was beyond hope. They could no longer imagine anything that could have stopped the roller coaster of events that resulted in their rooflessness. By this time prevention would have needed to be compulsory for it to work. For prevention to work, something needed to be done before they reached crisis point, or before they had given up trying to avoid rooflessness.

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2   Matthewman and Read (2002) demonstrate this.

Table 9.1 Roofless people's views on what would prevent rooflessness

Type of prevention	What it helps with or prevents
A help centre	Local, with someone specialist in homelessness that acts as an advocate and directs people to the help needed. Gives proper advice, not just a list of full hostels. A centre that supports you, but doesn't stop working with you until all your problems are sorted out.
Access	Immediate access to a night shelter and/or a regular bed.
Publicized information	Step-by-step advice about what to do and where to get help.
Education in school	Compulsory education on the 'real world'. Teaching you what to do in a crisis and how and where to get help. Explaining how to leave home properly and how to rent a place.
Rent regulation	To stop the high rents and enable people on benefits or low incomes to enter the private-rented sector. Benefits that cover the rent.
Referring on	Agencies and departments that refer you to someone who really can help if they cannot.
Adequate preparation	Budgeting skills, understanding benefits and filling in forms. Being told what to expect when you move into a hostel place or a flat. Having the responsibilities of a tenancy impressed on you before you move in, including behaviour towards the rest of the tenants, rules on visitors, etc.
More help for the over-25s	More hostels, rehabilitation programmes etc for those over the age of 25. Especially in out-of-London areas.
Counselling and advice	Someone to talk to when things start going wrong in a new tenancy, not after a three-month wait. Counselling when needed throughout your life and especially before leaving prison.
A relationship	A relationship, someone to belong to and love. Someone that cares about you and you care about them. Someone to settle down with and start a home or even a family.

Access to Help, Advice and Knowledge

People wanted somewhere that offered adequate help, advice and assistance, easily accessible, easy to find, that everyone knows about. A place that continued to assist the client until they are stable and in accommodation, that took into account psychological and ontological needs. Although many advice centres existed, not all were known to people before they were roofless; most offered crisis advice only. At times this was out of date or woefully inadequate. Some form of 'one-stop-shop' service was recommended by roofless people. One that used a keyworker advice

and advocacy-style system and that spanned a number of existing local authority departments (including social service, health and housing) and voluntary sector organizations. This idea was tested on young people in Smith and Ravenhill (2007); they found that young people wanted advice that covered all the options open to them (from mediation to rooflessness) and the consequences of opting for specific routes.

There is a need for a new and radical approach to the prevention of rooflessness. Thus the 'one-stop-shop' would need the authority to conduct housing need assessments, register people on the housing waiting list, organize benefits, counselling or substance abuse treatment. Housing, social service, social security and health departments plus voluntary sector organizations would need to trust the service to such an extent that they would allow one comprehensive piece of paperwork to be filled in by the adviser that was accepted by all the other organizations. This kind of co-operation is in its embryonic stages in some areas in England, though there is plenty of room for improvement (Randall and Brown 2006). Higher levels of trust and co-operation would end the problem of having to fill in a new set of forms for every department or service required. It would make a clear, easy-to-access system that did not exclude people who could not cope with mountains of red tape and paperwork. This type of advocacy system already exists for parts of the population, for example the probation service. This type of facility would need to differ from the probation model, being open to both self-referral and referrals from the statutory and voluntary sectors as well as lay people (for example family and friends).

Such a facility would not help those in denial about their potential rooflessness or those unable to ask for assistance. Thus, it would need to be available to their friends or relatives for advice or for referral by people capable of spotting vulnerability to rooflessness before it was imminent. The facility would also need to be linked into existing facilities or stimulate the creation of new facilities and schemes that promoted the creation of positive social networks and other protecting factors.

This type of facility would need to incorporate the ability to tackle a wide range of issues that needed counselling or long-term advice and help, such as debt counselling, anger management, family mediation, assertiveness training and chronic depression. Counselling would need to be easily and immediately accessible, instead of the current three- to six-month waiting lists. The facility ought to be able to broker quick and easy access to services aimed at other, more complex problems, including substance abuse. Such a counselling service needed to be flexible and designed not to make users feel stigmatized or inferior because they needed help. In fact, better access to counselling across the life-course was needed.

Housing Access and Standards

There is also a need for genuinely direct access[3] to emergency hostel or night-shelter beds and housing association places. Access to most emergency and temporary accommodation requires rooflessness to have already occurred. There are currently few or no provisions for those trying to prevent their own rooflessness. This suggests

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3   Self-referral.

that we need to rethink the types of accommodation available to the general public (those not roofless). Looking back over British housing history (Chapter 4), in the past we have had solutions, but somehow through policy development and other changes we lost a lot of good ideas. There is a need for some form of working persons' accommodation. Historically we had working men's hostels and digs. Nowadays executives use hotels and high-class bed and breakfast accommodation in the same manner. However, there is little provision for lower-paid workers and members of the public sector services (for example teachers).

Accommodation needs to be of good quality, clean and a pleasant environment to live in. Nationwide 'halls of residence' style accommodation for single people on benefits and low incomes could be one solution that also fits into the Government's mixed communities agenda.[4] This may reduce the stigma of hostel living, create cheap affordable housing for young workers, the upwardly mobile and Clark's (2002) white-collar nomads. Stigma would only be reduced if this form of housing became fashionable for young singles and possibly childless couples. Many recent graduates are already familiar with this style of accommodation. In hotspot areas such as central London this could prevent youth homelessness (and therefore rooflesness) and skill shortages, as young people gained work experience, stayed near their social networks and lived in affordable accommodation.

Historically the creation of social housing ended the creation of good-quality housing in factory villages. Although tied accommodation coupled with the end of jobs for life has been cited as a cause of homelessness, there is every indication that it may prevent and delay a lot of homelessness too. There is a need for employers to become more involved with the housing of their workers, especially when they require a high degree of social mobility, including young people leaving their home areas to find work or people living and working in areas with expensive housing. Similar schemes already exist in the form of the Key Worker Living Strategy (for teachers, emergency service workers). Creating a scheme accessible to single workers would prevent people from using the key worker scheme to get accommodation and then changing jobs. There is also a need to stimulate work away from London and the South-east and in areas where there is more available cheaper housing. These areas would need adequate infrastructures available to assist and prevent people in danger of becoming roofless from doing so.

To free up hostel access, housing also needs to be reconsidered as part of the resettlement process. Keeping people within the hostel system while they wait for some form of social housing or supported housing to become available is counterproductive and in some cases damaging. Rather than calls for more hostels, there needs to be a faster movement of people from hostels to independent living training or 'probationary' accommodation. This would ensure that those placed in secure tenancies are adequately prepared for independence and that hostel places were freed up for those on the streets or facing imminent rooflessness. Although this

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4 See also Hope VI project www.pwc.com/uk/housing; Berube (2005); www.commonground.org – Times Square supportive housing project; The Urban Village www.crisis.org.uk.

will never be an easy option to put in practice in areas of high demand on properties, this should not be dismissed as an option.

As part of preventing crisis due to tenancy failure and repeat episodes of rooflessness, there is an urgent need to reconsider the way properties are let and the condition of the properties let. The condition of many properties was demoralizing, unhealthy and at times dangerous. These were let to some of the most vulnerable people in our society. Properties are rarely thoroughly checked before being let to rehoused people, a problem justified by value judgements arguing that this is what roofless people should be prepared to accept. This is part of a current policy that views the solution to rooflessness as accommodating and containing roofless people away from the general public's view rather than helping them by removing the need to sleep rough.[5] There ought to be a detailed survey of the standard and condition of accommodation before it is offered to homeless people (including hostels, bed and breakfast, temporary accommodation, registered social landlords and housing association secure tenancies). This should include recommendations for improving standards. There needs to be a duty on all social landlords to check that the property is up to standard and essential repairs are carried out before each re-let.

Resettlement Programmes

To prevent crises that trigger repeat episodes of rooflessness, all establishments dealing with roofless people (public, private and voluntary) throughout the UK need to think in terms of long-term resettlement programmes. These ought to be mandatory (especially if funding sources come directly or indirectly from government sources). All hostels and temporary accommodation providers should either provide or be linked in with resettlement schemes. These need to be regulated to ensure clients get the help, support and assistance they need. There is a need for proper assessments of people's problems, needs and capabilities on entering the hostel system. By assessing people's problems and needs, a robust resettlement programme can be tailored to suit them. These assessments need to be at a multi-agency level and include housing, health and social service type needs as well as the immediate needs within the hostel system. Such assessments could then be revised as the individual progresses to allow for both fast-track and slow movers. Far too often providers focus on what they can afford to provide rather than on what is actually needed.

Resettlement should be a rehabilitation process (starting in the hostel) that is holistic and takes into account all the individual's needs and aspirations and leaves them with a sense of confidence and self-worth. There is a strong argument for a flexible, easy-to-use resettlement programme that is not overloaded and that can act quickly and effectively in a crisis situation, yet can adapt and move according to the individual's progress or regression. Such a programme would require clear, identifiable pathways or exit routes for people to follow that do not end simply with a bed in a hostel or a tenancy with little or no long-term support. Resettlement should be staged, with individuals achieving each stage before moving on to the next stage and finally into a secure tenancy. This should be flexible enough to allow those not

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5   Also Johnsen and Fitzpatrick (2007).

able to cope to move onto some form of supported or shared accommodation where appropriate. Completing a resettlement programme ought to be a prerequisite for being offered a permanent tenancy. This would also encourage a change in attitude towards tenancies: instead of people seeing them as a product of good fortune and luck, they could be encouraged to view the tenancy as something they deserved, had earned and were capable of sustaining.

There are a number of policies and practices already in existence that promote successful rehabilitation, including some good-quality resettlement programmes, tenancy support schemes and befriender schemes (see Randall and Brown 2006; Rosengard 2002). However, there is a great deal of room for improvement nationally, both in actual provision and the quality of that provision. Harnessing and improving existing provision could make a real difference; it could also reduce migration and pressure on hotspot areas.

Harnessing sporting initiatives could also improve resettlement provision. Little-known schemes such as the 'Homeless World Cup'[6] could engage with the roofless (especially the younger end). Such a scheme could become a subsection of the government-funded Kickz scheme.[7] Social and meaningful activities are known to reduce individuals' substance abuse (Randall and Brown 2006). There are organizations that are being innovative, but this really does depend on local authority, area and available facilities.[8]

If we are serious about ending and preventing repeat episodes of rooflessness, there needs to be a serious look at resettlement. This needs to be on several fronts, including the way the physical, emotional and psychological aspects are tackled. It would require a cross-structural approach that moves beyond the homeless industry and social-service-type provision to include the commercial sector.

There are clearly definable barriers that act as disincentives or block people's progression through the resettlement process (Chapter 8). These were reinforced by a series of definable, less rigid obstacles and hurdles that needed to be negotiated and overcome. Resettlement was divided into two phases: factors that trigger and promote the desire to resettle; and factors that promote and drive resettlement once the process has begun (see Tables 8.2 and 8.3 – Chapter 8).

Support Schemes

To prevent episodic rooflessness after resettlement, all accommodation providers need to ensure that adequate preparation and support is provided before, during and after being offered a secure tenancy. This ought to be for all roofless people,

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6   An international football tournament. Internationally they boast that 77 per cent of players change their lives after participating (www.homelessworldcup.org). Some countries have leagues between hostels, for example to find a winning team to take part.

7   www.footballfoundation.org.uk/social-inclusion-initiatives/kickz-project, also see information on the 2007 Homeless Link Conference: A Sporting Chance – www.homeless.org.uk.

8   nfpSynergy (2003) and Randall and Brown (2006) discuss potential activities in more detail.

regardless of the duration of the episode of their rooflessness and regardless of their apparent ability to cope with a tenancy. Preparation and support needs to include probationary-type periods of preparation for independent living already mentioned, plus time to learn coping strategies. Support after moving into a tenancy needs to be for a minimum of two years that tapers after that point (rather than the current average of three to six months). Careful co-ordination of support needs should be considered, preferably with one allocated support worker that has the authority and ability to deal with all the person's needs (substance abuse, mental health and life-skill problems).[9] There needs to be a package of support that accompanies any acceptance of a tenancy. This needs to include: checking tenancies are habitable before the client moves in; notifying utility suppliers of a change of tenant; connection of utility services; access to furnishings, basic household and food supplies.

In addition, there are identifiable predictor factors that indicate when resettlement or a tenancy is most likely to fail. These include:

- the lack of self-motivation or determination to succeed
- feeling trapped or stuck within the system
- refusing to accept the advice of keyworkers
- an inability to receive or use the intervention offered
- an unwillingness or inability to accept hostel or tenancy rules
- arrears
- falling behind with bills
- debts
- failure to set up home.

It is difficult to define clear counterbalances for these predictors of failure. These triggers are, in part, caused or incurred because people are rushed or pushed into tenancies without adequate preparation. Successful resettlement programmes will anticipate failure and put in place support mechanisms, find creative new ways of engaging with clients to motivate them, be patient but persistent in maintaining contact with disaffected people and find a level or speed of progression through the resettlement process that the client can actually cope with.

Social Inclusion

If we are serious about ensuring that those rehoused are able to fully reintegrate into mainstream society, live meaningful lives with ontological security and stability, the problem of social inclusion needs to be addressed. A realistic programme of resettlement needs to start before the individual is rehoused and need to work on the establishment of positive social networks outside the homeless culture and homeless industry. Currently this is difficult as people, especially in London, are frequently rehoused miles away from hostels and temporary accommodation – often not even within the same borough. This suggests a need to look at the way roofless people

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9   Better support and even counselling (or debriefing) for support workers would ensure that staff turnover slowed, creating the possibility of longer-term continuity of care.

are exported to other boroughs or areas and the negative impact this can have. A practical solution would be to offer the probationary accommodation in an area that can offer move-on accommodation. Alternatively, probationary accommodation could be offered that enabled them to remain in that accommodation at the end of the probationary period. Thus efforts to form social networks as part of resettlement would not be undermined or negated by moving to a different area when rehoused – palimpsest. Those unable to cope with sustaining a tenancy could be moved to a supported housing environment.

It is vital that creative ways of engaging with people and assisting them to form friendships and strong positive social networks within mainstream society are developed. People need to be able to move on from the intense support of the homeless culture and find adequate alternatives within mainstream society. Employment and befriender schemes are beginning to be used by the homeless industry; however, there is a need for more support and for support to be available regardless of geographical location. Joining clubs, societies and other social groups can be daunting for some. It may be that they need help to bridge the void, perhaps through a keyworker or designated trusted person accompanying them to an appropriate venue for the first few weeks.

Therefore, support needs to be co-ordinated from the time roofless people enter the hostel or temporary accommodation system, not simply when they receive a tenancy. All social landlords should have a designated follow-on or link worker that co-ordinates and monitors each tenant's continuing support needs (as a prerequisite for registered social landlords receiving funding). This should form part of local authorities' strategies on the prevention of homelessness. There should be more accurate monitoring and appraisal of rehousing outcomes in every local authority, with a view to addressing gaps and shortfalls in provision and creating a sustainable service that meets actual (not perceived) needs.

Intervention

Crisis management of rooflessness can be effective, but it is far better to prevent the crisis. In addition to the prevention agenda, there needs to be a realistic intervention agenda. Too often funding cannot be secured for intervention strategies because results take longer and it is more difficult to prove the outcomes. Where such projects have existed, they are usually the first to go when funding cuts occur.

Before any government intervention policies are set, there needs to be further research to review the way British policies are set and outcomes generated. All too often we have sticky plaster or makeshift solutions imposed that cause as much damage as they alleviate. To give just one example:

> The two-year rule under the homeless legislation: Local authorities only had a duty to house homeless people for two years while they waited on the housing waiting list or searched for alternative accommodation. This meant that families could be moved several times in a two-year period as temporary tenancies in the private sector ran out. This places enormous stress and strain on family life. Homelessness, frequent changes of address, parents' separation, family stress in childhood are all triggers of future homelessness.

Thus the broader repercussions of policies need careful consideration before implementation if we are to prevent side effects like rooflessness or homelessness occurring further down the line.

Furthermore, intervention without changes to crisis management policies will not work, primarily because a system of help needs to exist that people can be referred into. At present referral usually means referring people to the homeless persons' unit as the primary response (secondary response being referral to hostels). Intervening at an early age means that most people would not be eligible under the homeless legislation (as they are pre-crisis) and in many cases too young to receive help from the homeless persons' unit. More importantly, careful consideration needs to be given as to what to call intervention services, as people vulnerable to homelessness in the long term are rarely aware of this and do not want to be labelled as such until they reach crisis point.

Knowing What to Look For

Chapter 6 established that there are known triggers of rooflessness observable for some time, many during childhood. Considerable time elapses between the triggers beginning and rooflessness occurring. This implies that we can identify where and when we need to intervene and that there is ample time to do so. Intervening at a point long before the crisis point is reached could divert significant numbers of people away from rooflessness. Early targeting combined with the introduction of protecting factors and careful monitoring of the individual's circumstances could avoid vulnerability to and rooflessness from ever occurring.

As it is extremely difficult to predict rare events with a high degree of accuracy, it is difficult for policy-makers to define a social problem and estimate the risk of future harm (Munro 1999). Thus, methods of assessing the risk of future rooflessness occurring need to be considered before intervention is implemented. 'Future harm' includes the evaluation of what happens if action is and is not taken – factors that are diametrically opposed. Over the years, rooflessness (and its aftermath) has been a visible sign that no intervention strategy can cause considerable harm. The main concern for policy-makers is the highly contentious issue of assessing risk of future rooflessness for specific individuals: the main fears being labelling people wrongly or spending millions of pounds unnecessarily on preventing something that may never happen. This is not a new dilemma; Munro (1999) demonstrates this in her discussion of the way public opinion and risk assessment practices in child abuse cases defined and shaped social policy and social work practices. There were direct consequences for the way risk assessment was perceived and undertaken. Many other social issues are interconnected with rooflessness, for example truancy, young runaways, substance abuse, self-harming or depression. A by-product of intervention based on the triggers of rooflessness may also have an impact on these. Thus money aimed at intervening to prevent potential future rooflessness would not be wasted, but broader measurable outcomes may need setting.

Cost-effective intervention would need to be targeted predominantly at those who are the most likely to become roofless (those with the most triggers). These triggers and combinations of triggers could be developed into predictor factors. Predictor

factors can occur within childhood or adulthood. (Predictors of rooflessness are only useful if they are spotted in advance of a housing crisis occurring.) Technology exists to create effective algorithms that can predict, among other things, the chances of a person becoming roofless or homeless in the future.[10] Done correctly these can be 80–90 per cent accurate. Technology also exists that could create a 'warning' system from these algorithms, triggered when individuals have several triggers in their biographies. A similar system exists in GP surgeries where a list of symptoms are entered and this can trigger checklists for GPs to use to rule out disease or illness.

There are a number of professionals and lay people involved at some stage in people's lives. They are potentially in a position to spot or be told about predictors of rooflessness (both initial and episodic).

Table 9.2 People in a position to spot the predictors of rooflessness

Types of people	Predictors of rooflessness
Friends and family	Run away from home, leaving home early, family conflict, self-harm. Sudden change in behaviour (angry/violent or quiet/withdrawn). Domestic violence, relationship breakdown, bullying, child abuse, time in care, leaving institutions, increased substance abuse. Depression, onset of mental illness, accumulation of triggers. Never left parental home (for example by 35+).
School/education staff (for example lecturers/teachers, headteachers, students' unions)	Run away from home, leaving home early, family conflict, bullying. Child abuse, time in care, leaving institutions, inability to cope. Frequently moving house/changing school, social isolation, self-harm. Depression, increased substance abuse, sudden change in behaviour. Personal accounts of traumatic events, accumulation of triggers.
Youth workers (for example youth group leaders, Connexions staff)	Leaving home early, family conflict, increased substance abuse. Child abuse, personal accounts of traumatic events, bullying. Sudden change in behaviour, socially isolated (no friends). Accumulation of triggers, self-harm.
Social services (for example social workers, care workers)	Run away from home, leaving home early, sudden change in behaviour. Family conflict, domestic violence, relationship breakdown. Child abuse, time in care, leaving institutions, self-harm, social isolation. Depression, onset of mental illness, increased substance abuse. Frequently moving house/changing school, inability to cope. Long-term precarious housing, accumulating debts. Personal accounts of traumatic events, accumulation of triggers.
Professionals (for example banks, solicitors, DSS/ income support)	Relationship breakdown, domestic violence, accumulation of triggers. Leaving institutions, long-term precarious housing. Inability to cope (with life/budgeting, etc), accumulating debts.

10 For example Ayres (2007).

Table 9.2 continued

Types of people	Predictors of rooflessness
The homeless industry (for example housing departments/advisory services, housing association staff/key workers, estate, managers, hostel managers/staff)	Depression, onset of mental illness, increased substance abuse. Leaving home early, leaving institutions, self-harm, socially isolated. Relationship breakdown, serial domestic violence relationships. Long-term precarious housing, accumulating debts, inability to cope. Personal accounts of traumatic events, accumulation of triggers.
Church leader/pastor, counsellors (including New Deal, Connexions)	Leaving home early, child abuse, family conflict, socially isolated. Depression, onset of mental illness, inability to cope, self-harm. Relationship breakdown, accumulating debts, domestic violence. Never left parental home (35+ years), accumulation of triggers. Personal accounts of traumatic events.
Criminal justice service staff (for example police, prison staff, youth offender teams, probation officers)	Leaving home early, child abuse, care, leaving institutions. Depression, onset of mental illness, increased substance abuse. Relationship breakdown, family conflict, inability to cope. Long-term precarious housing, personal accounts of traumatic events. Accumulation of triggers.
Military discharge units	Leaving institutions, relationship breakdown, no family/kin to return to. Depression, onset of mental illness, increased substance abuse. Inability to cope, socially isolated, self-harm, accumulation of triggers. Accumulating debts.
Medical professionals (for example doctors, GPs, hospital consultants, psychiatrists, nurses, practice nurses, CPNs)	Run away from home, left home early, child abuse, self-harm. Family conflict, time in care, leaving institutions, socially isolated. Depression, onset of mental illness, increased substance abuse. Relationship breakdown, domestic violence, inability to cope. Personal accounts of traumatic events, accumulation of triggers.

Table 9.2 demonstrates the type of people who could potentially spot the predictors of rooflessness and the types of predictors they could look for. This is a broad and general list of people. Many are not directly linked to homeless services. It is easy to overlook them and dismiss using them to prevent homelessness because it is such a varied group and, in some cases, they have heavy caseloads or are difficult to engage within a social policy remit. At present, the majority are unlikely to get involved with looming homelessness. Nonetheless, whether we like it or not, these are the people in a position to spot predictor factors. They are also the people identified by parents and young people as places or people they would think to contact for help if they had a housing crisis.[11]

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11 Smith and Ravenhill (2007).

The triggers identified in Chapter 6 could be interpreted as indicators or predictors of potential rooflessness for other people (Table 6.1 and 14).[12] Although it may be possible to identify predictors of rooflessness, dealing with them will be difficult. Other bodies of knowledge on social problems (child abuse, Munro 1999; crime, Farrington 1996) indicate that identifying and knowing the risk factors is perhaps the easiest part. Designing a sustainable, viable intervention programme that lasts, perhaps for years, is far more complex (Farrington 1996).

When Should Intervention Begin?

Intervention needs to be part of an ongoing process that develops and adapts to the individual's changing needs and circumstances. The fact that triggers occur for between seven and nine years before an individual becomes roofless suggests that monitoring and assistance may need to last that long. For those with mental health needs or severe learning difficulties, this provision may need to be in place for life. Many triggers of rooflessness began in childhood at some point before the age of 14. Intervention would need to begin before that age, perhaps even as young as 11, especially for boys (Smith and Ravenhill 2007). By this age, young people have formed their self-identity and are more reluctant to change.

Family Policy

As triggers of rooflessness begin predominantly in childhood, there is a need to challenge people's ideological expectations of fundamental practices within a number of social policy paradigms (including social services, Connexions, education and housing). Primarily, there needs to be a shift in ideology concerning the way families in general, and particularly struggling parents, are supported. This has begun with the Government assigning 'super nannies'[13] and parenting classes as part of the 'Every Child Matters'[14] and 'Respect' agendas.[15] This was tested by Smith and Ravenhill (2007); they found that 14–16-year-olds would prefer the less formal interventions that do not imply blame and fault. Instead they preferred more programmes on TV that they could watch in private, but which are supported by helplines. Parents wanted access to the same information as their children and to have the same rights (to knowledge) as their children. They preferred help and advice accessible via the Internet so that they could research, learn for themselves and take action before a crisis triggered government intervention (Smith and Ravenhill 2007). All too often the current practice criminalizes or blames parents, placing them under suspicion rather than drawing alongside them and supporting them to find alternative ways of coping and dealing with difficult situations.

There are currently few structures in place that enable families to understand the dynamics of social interaction, problem-solving or conflict management within

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12 Also Smith and Ravenhill (2007); Bruegal and Smith (1999); Koegal et al. (1995).

13 http://news.bbc.co.uk/1/hi/uk_politics/6167472.stm, DfES (2006a).

14 DfES (2003); DfES (2005); DfES (2006b).

15 www.respect.gov.uk.

the home. There are family mediation programmes developing, but again these are dependent on area, voluntary groups and advertising. Were mediation services accessible before family breakdown became inevitable, intervention could be aimed at the misunderstandings and different interpretations of family situations that can lead to conflict (Smith and Ravenhill 2007).[16] Young people go to great lengths to avoid serious conflict within the home. For some this involves strategies of staying away (with friends and relatives) to create cool-down periods or to indicate to parents that they have a problem. For others this involves emotional shutdown. Young people wanted a safe way of finding out if their feelings are 'normal', how to talk to parents, how to resolve conflict in the home and what to do if things escalate and they find they have nowhere to live. A number of mediums for offering help already exist, but need adapting. For example, Smith and Ravenhill (2007) found that as resolving conflict is part of schools' anti-bullying strategies, these could easily be extended to include all pupils, offering negotiation and conflict resolution skills that would be useful in the home and workplace.

Childhood Services

Given the importance of childhood, a reappraisal of the way we deliver childhood services ought to be considered. Currently, British family policy means that in order to get help the family must prove their child is 'in need' and 'at risk'. Policy appears overly concerned with discouraging dependency by restricting access to assistance. The disparity seems to arise from the individualistic philosophy that it is better not to need help and needing help is a sign of weakness (Hetherington et al. 1997). Current social services and childcare facilities tend to be focused on crisis management, with the vast majority of resources focused on facilities for child protection. This means that children who could not be classified as at risk, or who are not known about by the authorities, are not eligible for assistance. This has not always been the case in England. Historically social services were much more active and were involved in many other aspects of family life. Current practice has evolved over time in response to government policy and spending cuts. Time constraints, heavy caseloads and low morale have diluted the effectiveness of social workers (in terms of broader family policy). Similarly, the concentration on child protection and those at risk of abuse has meant that the service has become stigmatized and less approachable or accessible by the rest of the population.

There needs to be a shift in focus here to a more holistic view of childcare and social service type provision,[17] with its initial emphasis on a universally accessible system by all parents and children, and where children at risk is a small subsection. This would reduce the stigma assigned to using such services and ensure that people of all walks of life have access to help as and when they need it. A good example of this type of service is the health visitor service offered to mothers of under-2s. The service is open to all mothers of any social or racial background. It offers advice and

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16 Issues such as 'safe arguments', the importance of 'respect' and young person and parental expectations.

17 Though it would now need to be renamed to remove stigma.

assistance and has the power to recommend other services, make referrals[18] or offer teaching and training. However, by the time a child reaches the age of 4 we expect parents to be able to cope and know what to do in every situation; children suddenly become model citizens and only have problems that schools can deal with. By the time children reach the teenage years little or no advice is readily accessible by the general population. Smith and Ravenhill (2007) found that parents want readily available advice and assistance and for it to be advertised widely so that all parents know of its existence.

Schools-based

There were a number of factors that pointed to the necessity for some form of school-based intervention, including the need to contact young people before the age of 14 when reactions to family and childhood triggers accelerate. Roofless people felt that had they been taught about what to do or where to go for help during a housing crisis whilst at school, they would have recognized what was happening to them sooner. Had such courses been taught alongside other issues such as drugs awareness, they may not have become roofless or the duration of their rooflessness could have been significantly curtailed.

Information ought to include details about housing options (including the advantages of staying in the parental home for longer), understanding tenancy agreements (ideal for university students), how to find a flat or bedsit, how to leave home in a planned way, costs relative to income and expenditure and, as an appendix, what to do when faced with a housing crisis and how to avoid rooflessness.[19] The importance of this is demonstrated in Smith and Ravenhill (2007). The unrealistic expectations of 14–16-year-olds as to cost of living, rents, the types of employment open to them and the level of salaries they could expect hastened homelessness and rooflessness. Giving young people enough information, applicable to the area where they live, would enable them to make informed choices and take action against possible rooflessness. However, realistic, well-publicized interventions need to be easily accessible in the local area for school-based interventions to succeed. Tools already exist for use in school-based education programmes; these could be easily updated or adapted.[20]

Connexions is a school-based vehicle through which intervention could be channelled. At present Connexions is limited by the specialisms of its advisers (not all are conversant with housing and homeless policies) and the lack of schemes or programmes available in the local areas. Schools-based education is important because it ought to have a triple impact:

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18 To a variety of different types of statutory and voluntary sector clubs and groups that young mums can go to for friendship, new social networks, peer education and advice.

19 It is important that the aim of such teaching is not the exploration of homelessness, because that is not the norm and should not be glamourized or augmented.

20 Shelter's classroom kit and Chamberlayne et al. (2005) video Connecting Lives.

1. It should have a direct impact on rooflessness in the immediate future.
2. It should impact those with latent triggers, preventing their subsequent vulnerability to rooflessness for the next ten or more years.
3. Future friends and relatives would also be more informed (these are the first place most people would go to for help and advice.

Schools-based education programmes only impact those in mainstream school. A significant proportion of the most vulnerable client group may be playing truant or be in pupil referral units and therefore miss out on the information. This suggests that information needs to be taken to pupil referral units, out-of-school projects, youth-offending teams and be aimed at pupils in school under the age of 11 to reduce this risk.

Young people in the process of resettling after being homeless were encouraged to get back into education. A by-product of this was evident for those who opted to take the childcare courses. These were value-added benefits. The classes were cathartic in that they enabled them to come to terms with their own childhoods – it contextualized their 'shit'. They better understood their parents' past responses to them. They also felt more confident about becoming parents and appeared less likely to rush into motherhood. This needs further investigation, but these types of courses could easily become part of intervention strategies, either by running them in schools or pupil referral units, or by referring appropriate young people onto such a course.

Peer-education programmes already exist in some areas. They focus on preventing rooflessness, rather than housing crises. These programmes tend to predominantly target people in poor areas or those from poor, working-class families. As established in Chapter 6, such a scheme ought to be universal, as long-term rooflessness is not class-based and possibly more the prerogative of the middle classes. It is possible that current peer-education programmes (where they exist), targeted at 'problem' pupils, miss half the people that need educating. Thus peer education needs to tackle issues such as running away or staying away from home. The target pupils need to be broadened to include all young people.

Access to Information

A lack of knowledge played a large part in both young and older people's routes into homelessness. This included their own lack of knowledge leading to bad or ill-informed decisions; their friends' and family's (the first port of call) lack of knowledge leading to unnecessarily long spells of precarious housing; and misunderstandings. To combat this lack of knowledge, people wanted the general public to be aware of the available options and what to do in the case of an emergency (Smith and Ravenhill 2007). A website is one solution; they also suggested 'in your face' advertising campaigns[21] that spelled out entitlement (for example with regard to access to social housing). As British society is multicultural and with the advent of satellite TV, people often watch channels made by or in the language of their home country, suggesting that some information needs to be disseminated on non-British

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21 For example, television adverts and billboard posters.

networks. Further research into where and how the general public gain information and how they interpret it is needed. There also needs to be research into the lag between policy changing and the general populous understanding or accepting that change:

> For example, in 2005/6 some parents still believed that homeless young people would receive a council flat – a home for life – despite this being abolished in the 1980s. This meant that parents were willing to make their young person homeless (especially in London) if it meant setting them up with secure accommodation and giving them a better start in life (research diary from Smith and Ravenhill (2007)).

Young people wanted a website designed for them that spelled out exactly what to do if they needed to leave home. They wanted the truth, 'warts and all'. They wanted to know their options, the consequences of taking specific actions (good and bad), useful alternatives and information that was regionally specific. Such websites already exist for Scottish and American youth. However, such websites would need advertising to mainstream society.

Mobile Phones

As established in Chapter 8, there is a need to explore the use of relatively new technologies in conjunction with intervention to prevent rooflessness. Mobile phones and telephone technology has become a part of this generation's teen culture, in a way that has not been possible until now. Research shows that 51 per cent of 10-year-olds and 91 per cent of 12-year-olds have telephones (Sorenson 2006). The use of mobile phones as a prevention of homelessness is only just beginning to be covered in the literature (Smith and Ravenhill 2007). A precursor to a lot of youth homelessness is running away from home. The most common age for running away for the first time was 14 (30 per cent).[22] Mobile phones appear to be very significant to young people when they run away, leave home before 16 or become roofless. Although mobile phone use is beginning to be researched, the use of mobile phones in the prevention of risk for young people in danger of running away or becoming roofless has never been formally investigated. Nor has there been an investigation of the role of mobile phones in maintaining contact with and minimizing risk for roofless people.

Mobile phones, through texting, facilitate non-invasive, non-instrusive contact with estranged family (parents, spouses, children), thereby keeping social networks connected. Existing research shows that those roofless people trying to resettle back into mainstream society are far more likely to do so successfully if they have supportive social networks and, especially so, if they are still in contact with their families.[23] Until now this has meant people living near relatives. It is possible that with the increased popularity of mobile phones, geographical location becomes less important, at least in terms of social contact.

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22 Rees and Lee (2005).

23 Ravenhill (2003) – research into people's routes into, through and out of homelessness.

Smith et al. (2006) tracked young people for two years using predominantly mobile phones. Regardless of the transient nature of their lifestyle, roofless people kept the same number and therefore could still be contacted. Although not an overt finding of this research, this is potentially very important. This suggests a need for projects in crisis management to include access to battery rechargers and encouraging families to 'keep the lines open' by paying the telephone rental or top-up payments. It also suggests a need for resettlement packages (and therefore intervention to prevent repeated episodes of rooflessness) to include a mobile phone scheme, to ensure those resettling have a lifeline. This also suggests that lost or stolen phones could be potentially devastating. Discussions with Carphone Warehouse suggest that technology exists to store SIM card details, enabling people to transfer precious contact details to new phones. Though currently marketed at corporate businesses, this technology could be developed and implemented to help homeless and roofless people.

Furthermore, technology also exists that enables parents to put money on phones, which could then be withdrawn as cash by their young people. More research is needed into the use of and importance of mobile phones, exploring the practicalities and dangers of implementing schemes based on mobile phones.

Conclusion

Although long-term rooflessness is triggered and sustained by many complex, interlinked problems and circumstances, people can and do manage to avoid rooflessness or, once roofless, manage to leave and lead settled lives. Factors have been identified that prevent people from doing so. These ranged from practical to structural, from ideological to behavioural. However, prevention of rooflessness and recovery could be made much easier for people.

If there is to be a serious attempt at ending rooflessness, then there needs to be a number of changes that enable people to seek and receive assistance, both before, during and after rooflessness has occurred. This assistance needs to be easily available to people regardless of their geographical location or ability to ask for and/ or receive that help. A number of alternative and innovative suggestions have been outlined, for both prevention and intervention to divert people away from becoming roofless. These vary in complexity and range from the need for structural and policy changes to practical initiatives.

The fact that rooflessness is so complex means that solutions need to be client-centred, flexible and layered or administered in stages that reflect the individuals' changing needs. The current system as it stands has historically proved unable to stem the tide of newly homeless and tackle entrenched rooflessness. Without serious ideological changes, starting at government policy level and moving down through to voluntary sectors or even the general public's views, the stagnation of current policy will continue. Similarly, without adequate alternatives to rooflessness being created along with access routes to those alternatives, rooflessness will remain to the detriment of us all.

Appendix

Table A.1 Research timetable

Dates data collected	Method of collection	No.	Other information
Oct. 1997–Sept. 1999	Observations	520 hours	Central London: Covent Garden, Embankment, Leicester Square, Lincoln's Inn Fields, Strand, Victoria Street and King's Cross, Victoria and Waterloo stations and surrounding area. Plus Mitcham and Wimbledon town centres.
Jan.–Aug. 1998	Documentary analysis	75 documents	Annual reports, promotional and fundraising materials from 152 voluntary sector organizations working with homeless people.
Sept. 1998–Feb. 1999	Participant observation	4 meetings	Visitor on the Westminster Police 'Consultative Forum on Homelessness'.
	Depth interviews	5	Police and chairpersons of residents' committees.
Sept.–Nov. 1998	Life-story interviews	12	Riverpoint.
	Participant observation	15 hours	As a researcher at the Riverpoint daycentre.
	Depth interviews	14	With staff, management and daycentre users.
	Observations	12 hours	Shepherds Bush Area
Nov. 1998–Mar. 1999	Life-story Interviews	5	Keychange: Esther Community, Exeter.
	Depth interviews	7	Hostel staff, management and residents.
	Telephone interviews	5	With organizations working with homeless people in the area.
	Participant observation	16 hours	As a researcher spending time at the hostel.
	Observations	20 hours	Exeter town centre.

Table A.1 continued

Dates data collected	Method of collection	No.	Other information
Feb. 1999	Life-story interviews	5	Keychange: Wayside, Reigate.
	Depth interviews	5	Hostel staff, management and residents.
	Telephone interviews	4	With organizations working with homeless people in the area.
	Observations	12 hours	Reigate and Redhill town centres and Reigate Park.
Feb.–Oct. 1999	Participant observation	225 hours	Volunteer worker at Merton Anchorage Trust; Thursday drop-in session, plus Sunday evenings in and around the church.
	Informal interviews/long conversations	41	With staff, management and clients. Plus informal interviews with church members concerning the informal use of the church on Sundays.
	Life-story interviews	3	Merton Anchorage Trust.
	Depth interviews	4	With organizations working with homeless people in the area.
April 1999–July 2001	Life-story interviews	7	Independent sources, conferences, seminars, or via personal acquaintances.
	Depth interviews	14	
	Informal interviews/long conversations	10	
Oct. 1999–Mar. 2000	Maternity leave		
Mar. 2000–July 2001	Observations	200 hours	Central London: as above, plus Slough and Wimbledon town centres.
May–June 2000	Life-story interviews	9	L.B. Camden's Homeless Persons' unit.
	Depth interviews	7	Staff, management and organizations working with homeless people nationally and within the area.
	Telephone interviews	8	With organizations working with homeless people in the area
July 2000–July 2002	Participant observation	18 meetings	As an adviser to the committee for Merton Faith in Action on home-lessness.

Table A.1 continued

Dates data collected	Method of collection	No.	Other information
Jan.–Mar. 2001	Life-story interviews	7	Kings Arms Project – Bedford
	Depth interviews	6	With staff, management and hostel residents.
	Telephone interviews	3	With organizations working with homeless people in the area.
July 2001–Mar. 2002	Participant observation	9 meetings	As research adviser to SEEDA and RAISE Regional Homeless Action Team (RHAT).

Note: In addition, in subsequent research 256 young people aged 14–16 were interviewed in 31 focus groups in schools, out-of-school projects and pupil referral units in four London boroughs. Forty-three parents of 14–16-year-olds were interviewed in ten groups. Twenty-four individual young people were interviewed, who had run away before the age of 16. This research lasted two and a half years (Smith and Ravenhill 2007).

Life-Story Interviewee Characteristics

Table A.2 Gender breakdown

Gender	No.
Men	26
Women	22
Total	48

Table A.3 Racial mix

Racial mix	No.
White – born in England	32
White – Irish	1
White – Scottish	7
White – not born in UK	4
Asian – born in England	3
African – born in England	1
Total	48

Table A.4 Age range

Age range	Male	Female	Total
16–17	0	3	3
18–19	0	3	3
20–29	4	7	11
30–39	9	7	16
40–49	6	1	7
50–59	7	1	8
60+	0	0	0
Total	26	22	48

Table A.5 Stage along homeless process

Stage along homeless process	No.
Rough sleeper	5
Hostel	15
B&B	1
Temporary flat/bedsit	2
Housed 1–6 months	4
Housed 7–11 months	2
Housed 1year	3
Housed 2 years	7
Housed 3–4 years	2
Housed 5–6 years	2
Housed 7–9 years	2
Housed 10+ years	3
Total	48

Table A.7 Formal depth interviews

Dates data collected	No.	Who	Contact organization
Sept. 1998–Feb. 1999	5	3 x police sergeants; 1 x police constable	Members of Westminster Police Consultative Forum
		3 x chairpersons of residents' committees	
Sept.–Nov. 1998	4	Staff	Riverpoint Daycentre
	2	Management	
	8	Drop-in centre users	
Nov. 1998–Mar. 1999	1	Staff	Keychange: Esher Community hostel, Exeter
	2	Management	
	4	Residents	
Feb. 1999	1	Staff	Keychange: Wayside Hostel, Reigate
	2	Management	
	2	Residents	
Feb.–Oct. 1999	4	Organizations working with homeless people in the area	Merton
April 1999–July 2001	14	Various people – had experienced triggers of rooflessness but never become roofless	Independent contacts
May–June 2000	2	Management	L.B. Camden's homeless persons' unit
	4	Organizations working with homeless people nationally and locally	
Jan.–Mar. 2001	2	Staff	Kings Arms Project, Bedford (hostel, outreach team and drop-in)
	2	Management	
	3	Residents	
Total	62		

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