

The background is a stylized illustration of a landscape. It features rolling hills in shades of brown and tan. Scattered across the hills are several dark blue, semi-circular shapes representing houses or dwellings. Some of these shapes have a teal-colored base. The landscape is decorated with various heart patterns: some are light purple and scattered, while others are larger and more prominent. The overall style is soft and artistic, with a focus on the theme of 'many hearts' mentioned in the title.

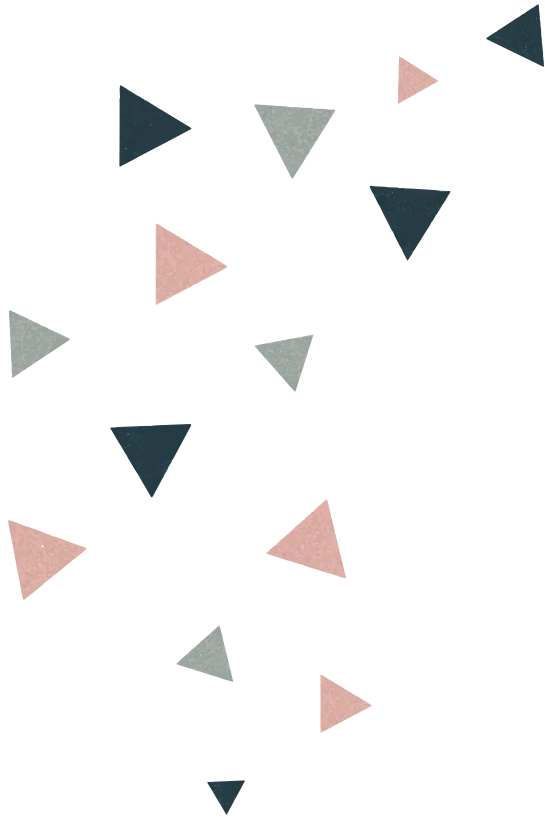
MANY HEARTS, NO HOMES

VOICES FROM THE FRONTLINE OF HOMELESSNESS

A photovoice project by
Dr. Maria Quinlan and Patrick Bolger

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Foreword

This report is the culmination of several months of engagement with a highly vulnerable group of families. Driven by the principle that our work should be evidence informed, and respond to identified need, South Dublin Children and Young Peoples Services Committee (CYPSC) committed to undertake consultation with families experiencing homelessness, knowing that this could be a difficult and ethically challenging process. Identifying families who were both willing and emotionally able to engage was indeed problematic. The criteria for such participation, agreed by the Project Advisory Committee (PAC), emphasised the importance of ongoing support, emotional stability and a degree of certainty regarding accommodation. We knew that excluding those who are 'self-accommodating', as the most isolated and vulnerable cohort, was the right thing to do but it also means that their voices are not directly reflected here. In reading this report it is therefore worth remembering that the families who participated in this process are the ones in better situations, more stable accommodation, and with greater supports, than many others who remain homeless.

The inclusion of service providers and frontline staff goes some way to addressing this gap, but it also offers a richness of insight which we had not anticipated. The extent to which the experiences and responses of the professionals mirrors that of the families - in terms of frustration, hopelessness, feeling disempowered – is striking. Their needs are examined here and we hope that this report goes some way to enabling the development of systematic, relevant and meaningful supports for those staff whose commitment, listening ear and empathy is often the only source of support to some of our most excluded citizens. We need to mind and nurture these staff, in order that they can deliver high quality services without undermining their own resilience.

The CYPSCs main concern is, of course, the children and yet they don't have a direct voice here either. Children and young people did not participate in the research for ethical considerations, but there are other, far more significant factors impacting on their silence. A number of young children attended workshops with their parents. During one of these, it was commented on their 'good behaviour' and how quiet the children were. 'Too quiet' noted one wise professional. Stories of silent corridors, with children playing quietly behind closed doors were repeated with chilling resonance by staff working in the sector. The lack of noise, the absence of laughter, the non-existence of children playing, boisterously running, chasing, playing kick the can or tag...these are deeply concerning images. Children experiencing homelessness are growing up having learnt to be silent, and this country knows how insidious silence can be; they understand that they must play quietly and that they only have the confines of the floor or their bed for their toys, books, clothes, so they learn not to become attached, to be willing to leave precious items behind; they recognise that adults in their life are under stress and determine not to add to this, so they don't share their own anxiety or concerns; they can't go to sleep when they are tired or eat when they need; they don't have access to a healthy diet, so their physical growth is challenged and their capacity to engage at school undermined.

We know all these things. This is not news. We also know the likely long-term consequences of growing up homeless, socially, emotionally, physically. We can guess at the impact on future relationships, ability to trust, willingness to open up and share. We will soon be able to assess how homelessness affects educational attainment. It will be some time yet before we can definitively say how these experiences shape long-term health outcomes, capacity to engage in productive employment or civic society. We can

wait for the evidence in years to come, or we can do the right thing now.

This report offers an important contribution to a policy area which struggles to find its way. It is entirely possible that the experiences of hopelessness, frustration and disempowerment are echoed beyond the families in homelessness, and beyond those working directly with them. It would not be surprising if our policy makers and politicians are also challenged to feel hopeful and assured about how to manage what is undoubtedly a social crisis. We offer here some relatively simple short-term solutions which would improve daily experiences and relationships. Very importantly, we also illustrate the necessity of, and capacity for inter agency collaboration to make things work, to think and act creatively and to refuse to be fettered by the seeming enormity of the issue. It is our responsibility to be hopeful, to act positively and to work beyond the bounds of our organisational roles in order to find solutions to homelessness, to minimise the negative impacts of these experiences on children and families, and to prevent others from losing the security of a family home. We hope this report in some way enables us all to fulfil these important responsibilities.

This project was made possible through funding made available via the Quality and Capacity Building Initiative (QCBI). Through an open competitive tendering process, Dr Maria Quinlan and Patrick Bolger were selected to undertake the project using the photovoice methodology.

Marian Quinn,

On behalf of the CYPSC
Project Advisory Committee.

Acknowledgments

We would like to sincerely thank the nineteen women and men who participated in this project and generously shared their experiences with such openness, honesty and vulnerability. This project is fundamentally a participatory co-researched endeavour and would not have been possible without their generosity of time and spirit. Photovoice is a method that demands transparency and openness from participants with the aim of revealing truths. This group took that challenge head-on and trusted us with their experiences.

We would also like to thank the Childhood Development Initiative (CDI), and the South Dublin Children and Young Peoples Services Committee (CYPSC). We would like to extend particular thanks to Marian Quinn, CEO of the CDI, Jean Rafter, Regional Manager of Tusla Educational Welfare Services, and Jacqueline Austin, Assistant Director of Public Health Nursing in Dublin South West for getting fully behind the project from the outset and providing us and the participants with their full support. The project would not have been possible without the expert support and guidance of Maeve Doyle and Leanne Clooney who sat with us in each of our workshops and supported the parents in sharing their stories in a safe environment.

Finally, we acknowledge and are appreciative of the QCBI funding made available to enable this project, and the support and guidance of the Project Advisory Committee.

Dr. Maria Quinlan

Patrick Bolger

1. Introduction

The aim of this project is to explore and understand the needs and priorities of families experiencing homelessness within the South Dublin area. As of November 2018¹ there were 1,296 families, with 2,816 children experiencing homelessness in Ireland, up from 1,188 and 2,533 respectively year on year.² Families are the largest and fastest growing group of people experiencing homelessness in the country.³

Using a variety of innovative, person-centred methodologies, this project aims to give voice to the lived experience of both families who have experienced homelessness, and to the people who work on a day to day basis providing services to families who find themselves in this most vulnerable of situations. By using a method of participatory photography called photovoice, it aims to give voice to the stories behind the statistics, to explore them in a deeply nuanced manner which provides actionable insight in terms of how service quality can be improved for families.⁴ In total nineteen people participated in this project, submitting over 70 photographs to be included in this report.

The methodological approach used within this project draws on the field of human-centred design thinking (HCDDT). HCDDT embraces the idea that all problems, even the seemingly intractable ones like homelessness, are solvable. It is a philosophy that believes that the people who face those problems every day are the ones who hold the key to their answer.⁵

The approach aims to offer service providers with the ability to design with communities, to deeply understand the people they're looking to serve, and to create innovative solutions rooted in people's actual needs. This approach aligns with both the CDI

and CYPSC stated aims and ethos of connecting with young people and their families, on their own terms, as partners; ensuring and promoting community-based partnership; collaboration and shared learning amongst stakeholders.⁶

One of the key benefits of the approach used within this project is that it helps us to better understand and empathise with another person's experience. Those providing services can better understand the needs of those they serve, and those accessing services can better understand the challenges and frustrations of those working within the system. As one parent who participated within the project, and who is currently experiencing homelessness put it;

What I have learned from doing this is that although we are all in different hands, in different parts of homelessness, I think it affects us all. Although we don't really see how other people are helping because maybe the trouble is covering everything, I do see that it affects all of us and all of us do want to make it better.(this process) ...can help you perceive... they are trying to do their job, I know that the job has much more become a function of surviving as well for them, but we are still looking for the same outcome, to get us out of homelessness. (Eva)

The parents who participated in this project, who took photographs to describe their experiences express a strong sense of isolation and loneliness that comes with homelessness, and a deep sense of feeling unheard. This method aims to address that in some small way, by offering them a platform to share their stories.

This is just the beginning of the conversation, towards better understanding, towards a more empathetic, compassion-centred, trauma-informed response to supporting families who are experiencing homelessness.



1.1 Key Findings

Section 3 and Section 4 of this report outline the findings from consultation with families and consultation with service provider's respectively. The key findings from each group can be summarised as follows;

The Voices of the Families

When it comes to how homelessness has impacted, and continues to impact the families who participated within this project, and the areas where they feel improvement would be helpful, these can be roughly divided into three categories: the practical/logistical considerations; the impact on their emotional and mental health; and the issues which they feel particularly impact their children directly.

Practical and logistical challenges

- *Limited and constrained service provision*

The first point highlighted by the parents was the practical reality of trying to access the South Dublin County Council (SDCC) Homeless Service Unit (HSU) in Tallaght. The role of the Homeless Service Unit staff is to determine whether applicants are eligible for homeless accommodation and to facilitate them to access emergency accommodation either through 'self-accommodating' in private hotels/ Bed and Breakfasts (B&Bs) or through the provision of a homeless placement. With limited opening hours and a relatively limited remit in terms of the services they are tasked with providing, the families' experience of the HSU as one of the first ports of call during their personal homelessness crisis, was characterised by frustration and the receipt of limited support.

- *Housing Assistance Payment – practical difficulties in accessing the private rental market*

While in principle the Housing Assistance Payment (HAP) scheme may be a solution for some people experiencing homelessness, for the families within this project, the HAP scheme has not adequately met their needs. For the parents who participated in this project, the private rental market has been difficult to access for a variety of reasons including affordability; the logistical issues of arranging viewings when you do not have a car or childcare; and literacy

issues for those who have difficulty reading and writing in English.

- *Restricted access to basic services for cooking and laundry while in temporary accommodation*

At various periods in their journey through homelessness the parents within this project have had their access to both cooking and laundry facilities severely curtailed. The impact on them and their children is felt particularly acutely by the parents within this project. There are obvious health consequences from poor diet and lack of clean clothes, as well as embarrassment and potential stigma for both the children and the parents.

Impact on their emotional and mental health

Throughout their exploration and discussion of their experience of homelessness, the parents describe the impact, the deep toll it has taken, and continues to take, on their emotional and mental health and wellbeing. When asked to map out how they have felt at various stages during their journey through homelessness, the words that they use include; fear; frustration; sadness, stress, confusion, worry, depression, loneliness, isolation, anger, insecurity, helplessness, feeling ignored, broken, disappointed, lost and traumatised by the experience of homelessness.

Impact on their children

While both the aforementioned practical and emotional challenges are likely to impact on their children directly and indirectly, the parents highlighted some of what they felt were the children-specific concerns and challenges of experiencing homelessness. These include limited support for children's mental health; inadequate temporary hotel and B&B accommodation; having to spend full days on the streets between night-to-night accommodation; the impact on school, diet, and their physical and mental health.

Compassionate, supported housing for complex needs

While the families who participated within this project have experienced dark times in their journey through homelessness, there are also some positive

aspects to their stories which point to potential solutions. The experience of supported housing which provides wrap-around supports to families is extremely positive and perhaps points us in the direction of what services which are family-centred, holistically and compassionately providing for the often-complex needs of families who have experienced homelessness, might look like.

The Voices of the Service Providers

The experiences and thoughts of service providers on the key challenges facing children and their families in homelessness echoes that of the parents within this project. They share the parents' frustration and concern regarding both the short-term and the long-term impacts of homelessness on their children.

The impact of experiencing homelessness on children and their parents

The service providers highlight the mental and physical health impacts on children who are experiencing homelessness, especially those who have been homeless for a prolonged period of time. Their developmental milestones are negatively impacted, and their mental health is seen to deteriorate the longer they are in the system. Echoing the parents, the service providers highlight the fact that families who are experiencing homelessness lack access to their basic requirements such as food and laundry facilities.

Several of the service providers believe that becoming homeless should be considered an Adverse Childhood Experience (ACE) in and of itself. The participants would like to see homelessness policies and service provision infused with more trauma-informed policy, and with a more ACE-aware approach to providing care to children and their families.⁷ It is noted by participants that Tusla does attempt to provide a response to children who are impacted by their experiences of homelessness through the Prevention Partnership and Family Support programme (PPFS).⁸

Barriers to accessing timely and appropriate services

The second key theme which emerges from the service providers is the idea that families experiencing homelessness face significant barriers to accessing services. Bureaucracy is highlighted as a barrier to getting the right supports to the right people at the right time. The first hurdle each family must jump is to 'prove' that they are homeless. This can be a difficult process for people who are in distress, experiencing trauma, that have literacy issues and so forth. Proving homelessness is not always a straightforward task, especially for those who are most vulnerable – for example people attempting to escape domestic violence.

The fragmented and often confusing nature of homelessness services

Another issue highlighted by service providers within the project is the often confusing and fragmented nature of homelessness services. It can be difficult even for those who work within the system to navigate it or understand who is entitled to what service.

The impact of policy

Service Providers express feeling constrained by their defined roles in terms of the interventions that they are allowed to make to support families experiencing homelessness. Each service provider, be they family support, education welfare officers, childcare providers, social workers, public health nurses, can step in and support families to a point, at a specific time, under specific circumstances. However, according to the participants in this project, often what a family needs is a holistic set of responses which are outside of the remit of any one service provider.

Throughout the discussions with the service providers, there is a deep and palpable frustration that they cannot do more to help families and children experiencing homelessness, allied with a deep sense of compassion and empathy for families who are at their most vulnerable, without a permanent roof over their heads, or access to their most basic of needs.

2. Project Design

Methods

For the purposes of this project, we brought together methods from the worlds of visual sociology, ethnography, and feminist qualitative research on the one hand, and visual art, documentary and creative expression through images on the other. The aim was to adapt these methodologies to design an innovative approach with which to provide people with the space and tools to express and share their experiences in a safe and creative way.

The base methodology we have used for this project is photovoice, and we have adapted it with the addition of a more in-depth ethnographically-informed approach to capturing narratives, the inclusion of journey mapping; and drawing on the philosophical underpinnings of experience-based co-design. As with all participatory research methods, there is an organic flow to how we have adapted the photovoice methodology and to how each of the groups have engaged with it and made it their own.

The methodology fits within the Participatory Action Research (PAR) tradition. PAR focuses on research which is a means and an end – in other words it is real-world applied research which leads to direct, practical action and change, while at the same time engaging and empowering the people taking part in the project. The specific PAR methods which we employed within this project are photovoice; and an adapted form of experience-based co-design (EBCD), which draws on human-centred design-thinking (HCDD) methods such as empathy-mapping.⁹ This kind of PAR/HCDD approach has been used recently by groups such as Crisis in the UK to gather deep actionable insight from people experiencing homelessness.¹⁰

Photovoice

Photovoice is both a research method, an advocacy tool, and a narrative therapeutic technique which uses photographs, coupled with facilitated group dialogue and photo-captioning to give voice to people's lived experience of a particular issue. Photovoice as a research method has its roots in social activism and aims to provide a platform for people who are often silenced or marginalised in society to share their experiences. In doing so it has been found to be a powerful tool in empowering people who have often found their voices excluded in society.¹¹ Photovoice enables people to identify, represent, and enhance their community.

Photovoice has been used with people to explore their experiences across a range of topics, including homelessness.¹² It has, for example, been employed in the area of mental health to empower children and their families to be actively involved in directing their own care (2017).¹³ It has been found to be a powerful tool in delivering person-driven interventions, allowing children and their families to explore and express what matters to them.¹⁴ As Greco et al (2017) outline, in a method such as photovoice, families are co-researchers in this participatory approach, creating photographs of what matters to them.

Visual images and accompanying stories serve to create a space where marginalised voices can be shared. Grounded in theories that shift the locus of control from those in positions of power to those whose standpoints are less often heard, the process of photovoice attempts to dismantle the traditional research relationship by equalising the distribution of power between researchers and participants. More traditional research methods tend to preference the researcher's voice - the researcher gathers stories and overlays them with their own analysis. Photovoice preferences the voice and knowledge of those them to tell their stories directly. In the tradition of inclusive,

participatory knowledge-creation, it is research by and with people rather than 'on' people. Using photographs to give voice to people who often feel unheard and unseen is a person-centred and co-created methodology that aims to be both a powerful and positive experience for the participants while also being an impactful way of providing deep insight into an issue for policy-makers and the wider society. Photovoice is a gentle, person-centred approach which gives participants control of what and how they wish to share elements of their experience.

Experience-based co-design (EBCD)

EBCD is a user-centred design technique developed by the National Health Service (NHS) in the UK to develop simple solutions that offer patients a better experience of treatment and care.¹⁵ It involves gathering experiences from patients and staff through in-depth interviewing, observations and group discussions, identifying key 'touch points' (emotionally significant points) and assigning positive or negative feelings. The patient experiences are conveyed to staff using creative methods, to illustrate in an impactful way how patients experience the service. Staff and patients are then brought together to explore the findings and to work to identify and implement activities that will improve the service or the care pathway. While budget and time limitations did not allow for full use of the EBCD methodology, the underlying philosophy of gathering and sharing service user and service provider lived-experience, using creative methods such as photovoice, and journey-mapping have been utilised within this project. These methodological approaches are evidence-based, drawing on national and international research in the area of person-centred and user-informed service transformation and design.¹⁶

Participants and process

For the purposes of this project, drawing on the underlying philosophical approach of experience-based co-design, we wanted to gather the experiences of both families experiencing homelessness and people working within the area of homeless service provision. This allows us to get a holistic view of the needs and priorities of families experiencing homelessness, and a deeply nuanced exploration of the impacts, challenges and potential for service improvement. A purposive sampling approach was employed to recruit participants.

Families experiencing homelessness

Three two-hour workshops were conducted with three parents who are currently, or have in the recent past, experienced homelessness. All three parents were mothers, with thirteen children between them. Their children ranged in age from fourteen to one. The parents were recruited via the CYPSC service provider membership group. The three parents who participated were recruited via the HSE, Tusla, and Barnardos. While the sample size of parents is small, we believe that through significant engagement with these parents via the methodologies outlined, a nuanced and rich perspective regarding how homelessness experienced is provided.

The workshops were conducted over a three-week period and used a combination of photovoice, and journey-mapping to explore the families lived experience of homelessness.

Journey maps were used as a method of exploring and understanding what each parent felt were the important milestones in their journey into and through homelessness. Journey maps draw on the area of human centred design-thinking and are often used within healthcare to map the patient experience of a service. The parents were asked to map their journey from the time they became homeless to date, and were asked to both map the important milestones in terms of their movement through

various forms of accommodation and their interactions with service providers. They were also asked to identify how they felt at various points during their journey by writing those feelings on heart-shaped post-it notes and overlaying their timelines with these to show visually how they felt at key junctures.

Each parent was guided and supported through this process on a one-to-one basis with one of the workshop facilitators. By mapping out their journey's visually and by responding to guidance and facilitation by a third-party observer, participants were able to unpack the key points of progression, key barriers and facilitators, and to draw out the emotion experienced through their journey.

These maps provide us with a high-level picture of how each family came to be homeless, the services they have been provided with, the assistance they have received and the challenges they have faced in having their needs met.

People working within homeless service provision

Two three-hour workshops were conducted over a two-week period with sixteen people working within the area of homeless service provision. The participants were recruited from across the CYPSC membership group, and included participants from Tusla (including Educational Welfare Officers, Senior Social Work Practitioners; Family Support Practitioners; and National Homelessness Liaison Officers), the HSE (including representatives from Public Health Nursing, Health-Link and the Child and Adolescent Mental Health Services (CAHMS)), Family Hubs, Barnardos, Saoirse Housing, Sophia Housing, South Dublin County Council, local church leaders and local childcare providers.

For both groups, the workshop process incorporated four key elements;

- Creation of 'safe-space'
Space where people feel comfortable to share their feelings and experiences.
- Introduction to visual literacy
Creative exercises to get people comfortable using the method.
- Facilitated group discussion
Participants decide / agree on themes to guide their photo-taking.
- Sharing of photos
Each week the group share and explain selected photos.

Data Analysis

A thematic analysis, drawing on the data-analysis process outlined by Glasser and Strauss in their grounded theory approach, was used within this project. This included an iterative process of data-immersion, reduction, description and interpretation.¹⁷

All of the research workshops were audio recorded, and the explanation given by each participant to describe their photographs, including why they chose it, and what it meant to them in the context of exploring the themes within this project, was transcribed verbatim. Apart from minor edits to make the narrative comprehensible, each participants' verbatim narrative is outlined within this report.

Both researchers co-facilitated all five workshops, took separate notes, and shared the process of transcription. Analytic codes and categories were constructed from the data, with both researchers following a separate process of coding in the first instance. This allowed for a process of code-

comparison, reflection and interpretation which aims to ensure a level of inter-researcher reliability across the analysis process.¹⁸

While the aim of qualitative research is not to generalise the findings to the wider population, the sample of parents within this project is relatively small, thus by including workshops with a relatively wide variety of service providers, we were able to validate the data through a process of triangulation.

Ethical considerations and approach

The use of photovoice, and the other PAR approaches outlined herein, as a methodology brings with it particular ethical considerations in terms of participant safety, data protection, control, ownership and dissemination/sharing. Working with people who are experiencing the dislocation of homelessness, also brings with it particular ethical considerations regarding their safety, wellbeing and ability to provide informed consent. The researchers were guided by research ethics best-practice in this area – adhering to the University College Dublin (UCD) guidelines for working with vulnerable groups.¹⁹ Research ethics approval was received from UCD for this study. The researchers have received specialist training in the photovoice methodology from the PhotoVoice Organisation and also adhere to the organisations statement of ethical practice.²⁰

Participants' safety and emotional wellbeing is the number one consideration of this project. Throughout each stage of the project participants were given the option of sharing their photographs, thoughts, experiences or of choosing not to. The primary aim of this project was to create a safe space where people could express themselves via photography to the degree that they wished to do so, without any requirement to share that with the other members of the group.

The relationship between the relatively private and more public aspects of a project is a dynamic and delicate one, which requires careful balancing. When working with individuals who have experienced distressing, and potentially traumatic situations such as homelessness, caution is exercised to ensure participants are emotionally protected, particularly if they are producing work based on personal experiences. To ensure that the group was supported Maeve Doyle, Public Health Nurse and Leanne Clooney, Project Manager at Sophia Housing sat in on all of the workshops with the parents to provide assistance to the group throughout the project.

Recruitment of the participants was done via gatekeepers who agreed to support the parents through the process; and specific inclusion and exclusion criteria to guide the gatekeepers was developed in conjunction with the CDI/CYPSC advisory committee.

In order to protect the anonymity of participants, pseudonyms have been used throughout for all participants.

CYPSC Oversight

Given that the project was an initiative of South Dublin CYPSC, an Advisory Group was established to inform and guide the work. Members were drawn from a range of organisations, and representatives aimed at enabling ready access to families in homelessness, and that the project would be underpinned by an understanding of this group. A list of members and Terms of Reference for the Advisory Group are in Appendix I.

3. The Voices of the Families

In this section, the experience of the parents who participated in this project will be outlined. As discussed earlier, a key aim of this methodological approach is to allow the participants to speak for themselves, to allow their voices to be heard, and a conversation to be started regarding how their experiences might illuminate challenges within the provision of homelessness services to families, and how these services could potentially be improved upon. With that end in mind, this section includes the findings from two methods which the parents used to explore, discuss and share their, and their children's, experiences of homelessness – photographs and an accompanying explanatory narrative; and journey maps wherein they track their journey from the time they became homeless to date, capturing both the key practical and emotional touch-points along the way.

The parents submitted over 30 photographs which describe for them the experience of being homeless with their children. Through a series of powerful and moving images, they use the visual to explore a variety of themes relating to the experience and impact of homelessness. The overall aim of this project is to let the photographs and narratives speak for themselves, however there are a consistent set of themes which we feel it is worthwhile to highlight.

A high-level thematic analysis was conducted on the data to draw out the shared experiences, needs and priorities which are common amongst the families. When it comes to how homelessness has impacted, and continues to impact these families, and the areas where they feel improvement would be helpful, these can be roughly divided into three categories: the practical/logistical considerations; the impact on their emotional and mental health; and the issues which they feel particularly impact their children directly.



3.1 Practical and logistical challenges

Homeless Service Unit – limited opening hours, limited support.

The first point highlighted by the parents was the practical reality of trying to access the South Dublin County Council (SDCC) Homeless Service Unit (HSU) in Tallaght. The public counter is open from 10:00am to 12:00pm Monday to Friday, people who have already presented as homeless can be seen by appointment between 2:00pm and 4:00pm, Monday–Friday. Due to the volume of people attending during the morning hours, the parents found that even if they get there before 12:00pm the doors can already be shut due to the numbers already inside waiting to be seen. During their time in temporary homeless accommodation, the parents have not always been based in the Tallaght area. At one stage or another, all have been accommodated in hotels, hostels or B&Bs in Dublin city centre. This means that the parents have had to travel to Tallaght, potentially with all of their children, to speak to someone face to face within the HSU. They all found this challenging and frustrating.

Allied to the limited opening hours, the families' experience of the HSU as one of the first ports of call during their personal homelessness crisis, was characterised by the receipt of limited support. Commonly, the parents describe a feeling of not being listened to; of being offered a list of potential emergency accommodation to ring directly themselves to secure somewhere for them and their children to stay on a night-to-night basis. This is what is generally termed 'self-accommodating' or 'one-night-only' accommodation. The parents describe their frustration with this system:

I became homeless in Tallaght, I gave my documents and everything here, I said I'm homeless what can I do? Then they gave me a list to ring the hotels, I explained that I have five children, but they said you need to ring the hotels, we're not going to do any more than that. So I tried ringing the hotels, ...it's not available, it's fully-booked... and when they were telling me, there's too many people, you have to look yourself, I felt like crying. (Ana)

Following the breakdown of her marriage and an eviction from her long-term B&B accommodation, Eva describes going back to the HSU seeking additional support;

I went back to the HSU because I didn't have any place to go. They didn't look at my application, they didn't look at the needs-assessment, at that time my husband and me, we were in the middle of separating. I told them but they didn't look at anything, all they did was hand me a new list of hotels that I needed to ring myself. (Eva)

Following a sustained period of two months self-accommodating on a night-by-night basis, Ana also returned to the HSU in an attempt to receive further support;

I was crying and I said [to the council worker] – I might get into a depression and they said, go to the doctor, go to the GP. I'm on the streets for two months, so please help me, every night, every night staying in a hotel and every day I have to be outside. So for seven, eight, ten hours you're on the streets, and sometimes it's raining, cold, freezing. They don't listen, I'm meant to try to find emergency accommodation each night, and how many hands do I have? I have five children. (Ana)

The staff at the HSU appear to be very constrained in terms of the assistance which they were able to provide to the families within this study. The role of the Homeless Service Unit staff is to determine whether applicants are eligible for homeless accommodation and to facilitate them to access emergency accommodation either through 'self-accommodating' in private hotels/ B&Bs or through

the provision of a homeless placement. As will be outlined later in Section 4, the service providers also highlight that the staff working within the HSU regularly see families who are in significant distress, often traumatised by their experiences of homelessness, and yet the staff within the HSU appear to lack the necessary training and support required to provide the services required by these families.

Sarah describes her experience of the HSU as characterised by frustration and a feeling of being 'degraded' by the system:

You walk in there and it's like, 'and who are you here to see and what's your name and how many kids have you got, what hostel are you in?' – 'I haven't got a hostel I had to come in here to book it' – 'and who did you book in with yesterday?' – so you have to remember that person's name, with all your distress that's going on the day before, you've to still remember that person's name, and if she's not there it's like 'well go in there and we'll see if you can be facilitated by someone else'. Sure I'm after telling her yesterday all my information and now I'm going to have to give all my information to someone else - nothing's changes! (Sarah)

The retelling of their story, retelling of their situation to strangers can be both frustrating and upsetting for parents in the midst of homelessness.

The issue of needs-assessment is highlighted by Eva, and suggests that while families receive an initial needs-assessment, this is not conducted again except in circumstances where the family are believed to be at risk of a child protection issue. Eva describes how her circumstances have changed significantly since her initial needs-assessment which was conducted almost a year and a half ago. In the intervening period, she has separated from her husband, and therefore is now parenting four children alone, and her eldest child has been diagnosed with Autism Spectrum Disorder (ASD). Despite this, neither she nor her children's changing circumstances appear to have been taken into account in terms of the support the family is entitled to receive:

From the time I became homeless to now, a year and a half later, loads of things have changed in my life...I feel that if the needs-assessment was reviewed every six months, then the homeless unit would be able to provide a better service...but it's not reviewed, so they probably think that I am still in the

situation that I was but no...when I came into the homeless services first I was married with a supporting partner. Today I no longer have a partner, so I'm homeless and also a lone parent, that's one of the biggest supports that's gone. When I came into homelessness I didn't have any other issues with my children. One of my children has now been diagnosed with mental health issues, she's also been diagnosed with Autistic Spectrum Disorder. So with that diagnosis I need to build up a routine around her so that she can feel safe, but being homeless I'm not able to do that. Especially being homeless and living in Wicklow and bringing them to school in Tallaght every single morning. I am alone and doing all this. (Eva)

Housing Assistance Payment – practical difficulties in accessing the private rental market

The Housing Assistance Payment (HAP) is a form of social housing support provided by local authorities. For households who qualify for social housing support, under the HAP scheme local authorities will make a monthly payment to a landlord, subject to terms and conditions including rent limits, on a HAP tenant's behalf. In return, the HAP tenant pays a weekly contribution towards the rent to the local authority. This 'rent contribution' is based on the household income and is calculated in the same way as the rent paid by a tenant of a local authority owned property.²¹

For the parents who participated in this project, the private rental market has been difficult to access for a variety of reasons including affordability; the logistical issues of arranging viewings when you do not have a car or childcare; and literacy issues for those who have difficulty reading and writing in English. While in principle the HAP scheme may be a solution for some people experiencing homelessness, for the families within this project, the HAP scheme has not adequately met their needs. For Eva, when she initially became homeless in mid 2017, she could not secure a HAP property in Dublin, Portlaoise or Longford due to the lack of available properties within her budget.

For Ana, a combination of literacy issues, the childcare demands of being a single parent, and lack of private transportation, make competing in the competitive private rental market very challenging.

She has six months remaining in an apartment in Tallaght – this apartment is managed by Tuath Housing on behalf of South Dublin County Council and support is provided to residents from Focus Ireland. Once her time is up in this apartment she must move on to a HAP property. This is stressful both practically and emotionally for Ana and her children:

It's hardI only have six months left to stay in my place, so I have to look for another place. So my key worker said, you still need to look for a place yourself – a HAP place – and I say yes I want to look but I have to collect my children at 1:00; 1:30 and 2:00, so I have no time, and I don't know how to read and write. I'm not driving, how am I meant to get there [to view properties]. I don't have anyone to mind the children...so to go anywhere if I have appointments.... then the children don't go to school. They have to miss a day, they're not going to school. That's the thing, your hands are full and you can't look for a place...and when you try to explain to people, they can't understand you, they don't listen to you, they don't care.... I'm single I've nobody to help me, I don't drive..I speak to the landlord and say I'd like to see a house and then he tells me that the interviews for it are at 1:00, then I have to get the children at 1:00, how am I supposed to do that?" (Ana)

Reactive rather than a proactive system

Overall the parents' experience of the homelessness system in Dublin is one of reactivity rather than proactivity. For example, In Ana's case, her children moved from a school in Dublin city centre to one in Tallaght when she was housed in temporary apartment accommodation just over a year ago. She is due to leave her current home in six months, but is finding it challenging to secure a property via the HAP scheme in the area. Should she return to homelessness, or find a HAP property in a location far away from her children's school, they risk having their school, and lives, being disrupted once again. From a school perspective, the supports appear to only kick in (e.g. assistance from an Educational Welfare Officer) once the child's schooling has already been disrupted. While Ana's children attend a DEIS school which may have a Home School Liaison Officer who could offer some support, she is currently not receiving any assistance in securing a HAP scheme property, and is not aware of any support available to her in this regard. As Sarah says

the complexity of the system can make it hard to know what support is available to you:

...there's help out there but there's no information about how to get to the help – you have to go and self-absorb the information and get the help yourself. (Sarah)

From Sarah's perspective, rather than receiving any help for her drug addiction it was also something which seemed only to ever warrant support reactively when she was in a state of severe crisis:

You have to have a needle in your arm in order to get help. ... once you're in addiction they do not help you in the homeless services unless you're in a really bad way on the heroin (Sarah)

In Eva's case, the deterioration in both her own and her children's emotional and mental health over the past year and a half of living in precarious temporary homeless accommodation is frustrating. As she says, "...why can't they help me when I am strong?". There is a sense within the group of parents that people who are strong enough to withstand the homelessness system are left to fend for themselves, and thus must be brought to crisis point before the system can step in to support them. This attitude is echoed by the service providers, as discussed further in Section 4, as one Public Health Nurse puts it: "...everything has to be a crisis" (May)

Restricted access to basic services for cooking and laundry while in temporary accommodation

Another key issue raised by the parents in terms of the challenging practicalities of being homeless, is access to cooking and laundry facilities. At various periods in their journey through homelessness the parents within this project have had their access to both of these facilities severely curtailed. The impact on them and their children is felt particularly acutely by the parents within this project. There are obvious health consequences from poor diet and lack of clean clothes, as well as embarrassment and potential stigma for both the children and the parents.

They experience challenges accessing affordable, healthy food while homeless, particularly when moving from one place to another during phases when they had to self-accommodate on a night-by-night basis. There is a clear deterioration in the quality of food that they can give their children while they are experiencing homelessness. For example, in her current accommodation, Eva only has access to a microwave oven. She also has to leave her temporary accommodation in Wicklow just after 6:00am each week-day morning in order to bring her older children to school in Tallaght, thus they must eat their breakfast in the car on the run:

Their diet has suffered very much obviously – what can you make in a microwave? Already they don't have proper breakfast, when we come back (after school) we don't have proper meals, really I rely on the meals that they eat in school. It's not even a meal either, it's still a sandwich. So I'm trying to do my best but there's not really much that I can do. (Eva)

Before moving to her current accommodation in Wicklow Eva was in hostel/B&B style homeless accommodation with her family for over a year. Eva was evicted from this accommodation for beginning to cook in her room for her children:

I was evicted from a hostel in town. I was evicted because of my own issue to be honest, because I started to cook in the room. After being one year and a half homeless, you don't want to be going all the time to other people to cook. So I started to cook in my room, and what happened was, I didn't know about all the fire and smoke alarms. So the fire/smoke alarm it didn't go off, but it was signalling at reception that something was going on in my room, so the person from reception came up ... and the smoke went into the corridor and that's how the alarm actually went off. So they decided to evict me. (Eva)

While self-accommodating on a night-by-night basis, Ana says she struggled to feed her children anything but fast food – they often arrived late to their emergency accommodation, having had to wait to be assigned somewhere and then potentially having to travel across the city to get there:

Then when I'd get there (to the hotel) I'd buy them something to eat, sometimes I had no time to get them something to eat because walking there, trying to get there... I can't get them to eat, where to wash the clothes... all the time thinking of what to get them to eat... McDonalds, Burger King, KFC, something like that. (Ana)

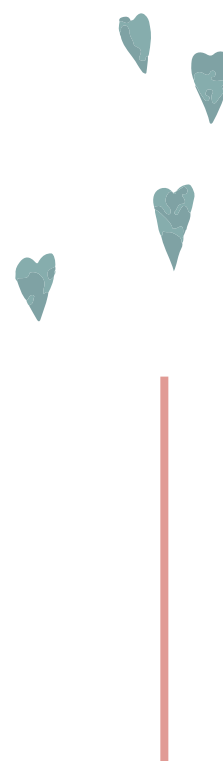
In terms of recommendations for potentially improving her current situation, Eva says that she would benefit from access to a community space to cook, and the use of laundry facilities:

In terms of services that we might need, I thought that it would be nice to have some community space to cook. Maybe in the community centre, to just open to kitchens for even an hour or half an hour because I could cook a decent meal without having to rely on other people. An open service, or even like a space where you could just come in and do your laundry or something like that. That would be something that would be really helpful. Loads of time I spend for example around here doing nothing ..but in this time if I could even cook a meal or something. (Eva)

With regard to laundry facilities, the families have experienced similar restrictions on their ability to clean their clothes:

I have two little kids and I can still only do laundry once a week and I should be doing laundry every single night really. (Eva)

So that was one thing in homelessness that everybody needs – it's an essential thing when you're homeless, to wash your clothes, to have a shower... it contributes to the stigmatising, not being able to wash, smelling. (Sarah)



3.2 Impact on their emotional and mental health

Throughout their exploration and discussion of their experience of homelessness, the parents describe the impact, the deep toll it has taken, and continues to take, on their emotional and mental health and wellbeing. When asked to map out how they have felt at various stages during their journey through homelessness, the words that they use include; fear; frustration; sadness, stress, confusion, worry, depression, loneliness, isolation, anger, insecurity, helplessness, feeling ignored, broken, disappointed, lost and traumatised by the experience of homelessness:

...there was days when I was feeling very low, for three months, every day, every day in the street. I would just ask them please can you just give me some place to stay.... because for my children it was very scary. At night-time if you're looking for a place, pushing the pram and taking the three other children walking with you in the street...so night-time is dangerous.so then Focus Ireland sent me to the Council...I explained to them, please do something – but they say no, you can ring...and I explained to them that I do ring, but they don't give me any help....they say there's too many people homeless,I get very angry, sad, crying...the children get tired, and sometimes they start fighting and you just feel despair you know. (Ana)

You kind of make space to kind of dream a little bit, and then our hopes become broken again. (Eva)

Parents and their children spend their time waiting, life passes by while they wait, and within that waiting is a level of uncertainty about their future. Hopes are raised and then dashed, a certain amount of security is obtained, but then that comes to an end and they must face an uncertain future for themselves and their children once again:

Wicklow was the only place where they could give me something for like every two weeks that I could renew. In two weeks' time they could say to me we no longer have a place and we start going again. The fact that you don't know anything, not knowing is what kicks you as well. (Eva)

You know, buses coming and going and the Luas just waiting patiently. It's like everything else is moving and I'm the Luas just waiting patiently to go. (Sarah)

...most of the time I use the public space to wait, wait. That's what I do, wait. Today I'm here in Tallaght, I'm waiting. There's a lot of time spent waiting. At the moment I am looking out the window and hoping for something new. You kind of make space to kind of dream a little bit, and then our hopes become broken again. (Eva)

They give me this apartment for eighteen months. After eighteen months I don't know where I might go. I don't know where I'll go. ... You're sad, the children...they need things, you can't have it. It makes you depressed....you're feeling as if everything is over. (Ana)

I learned to be on my own. (Sarah)

The parents express a sense of isolation and loneliness that comes with the experience of homelessness, a deep sense of not being listened to.

..I was alone, still going from one place to one place with four children...this is a scream of helpand unfortunately nobody is listening. That's really what I feel at the moment. Nobody is listening. At this stage I'm at a stage of confusion in my heart and even in my mind, lack of clarity, lack of certainty, I don't know when this is going to stop. If I was told in two weeks' time, or in one month, I don't know, a timeframe, that all of this would be finished, at least you can start the count down. (Eva)

They have very limited support networks and so must rely on themselves and the State for assistance. As Ana puts it, "when you're homeless, you're on your own".

It's mental torture. (Sarah)

Two of the parents who participated in this project have received professional help for the treatment and support of mental health conditions. Sarah has had a long and difficult battle with drugs for over a decade, and she feels the inter-play of homelessness and drug-addiction exacerbated her inability to get out of both situations. Following an attempted heroin

overdose, she finally received the level of supported housing which she feels she required in order to stop taking drugs and achieve more stability in terms of being able to learn the life skills necessary to look after herself and her children:

When you're going through homelessness, you're putting your hand out....it's all one hurdle after another ...it's constant ticking boxes, it's mental torture, to the point where I couldn't get up and do what they were asking me to do without a drug in my system....you're constantly looking over your shoulder, you're constantly feeling under threat. I think my mindset back then was cut it off, do yourself in before the system does you in, that type of thing. That's the mentality I was walking around with. I was 23 when I tried to end it all, I'm 29 now and when I look at it, I've come a long way, I really have....if it wasn't for the supported housing, if it wasn't for Sophia Housing, I would have done myself in, that's the truth. With having the support of Sophia, having the support of knowing now if I use I know how to get the help...how to stop it before it progresses. (Sarah)

While Ana has sought and received help for depression, both she and her GP had a shared understanding that the only way to relieve her depression is to move out of homelessness, and to have the security and emotional comfort of a home for herself and her five children:

That was very hard, and my children they looked at me like they knew I wasn't well. ...It was very stressful for them and for me as well. When I was homeless I was in depression. When I got depression I went to my GP – I went with my children because they were sick, and I had a cough and the doctor looked at me and saw that I was very tired, crying and they asked what's going on with you and I explained, and then she looked at me and said ok you need to get some tablets for depression, and I got some tablets and I took them for a couple of months and ...she told me...until you fix the situation with the housing, you're not going to get better. (Ana)

3.3 Impact on their children

While both the aforementioned practical and emotional challenges are likely to impact on their children directly and indirectly, the parents highlighted some of what they felt were the children-specific concerns and challenges of experiencing homelessness.

For Eva her experience of trying to get some understanding brought to bear on her daughter's ASD diagnosis and the impact of homelessness on her child's mental health was met with a "blocked wall" within the system:

I brought the HSU my daughter's medical referral and they didn't even listen to me. I went to the housing unit and asked if they could take photocopies of my papers and put them into my file. I went back to the HSU, sat down, in the hope that someone would be able to listen to me, to speak to me, and no one did, I had no interaction whatsoever, even though I came with documents that proved my daughter's diagnosis they didn't have time to take and look at the documents. I just came across a barrier, like a blocked wall....and I do understand them as well, they are overwhelmed, they can't do anything, they can't say anything. For ASD there's nothing. (Eva)

A similar sense of a system lacking in ability to support children's needs is echoed by Ana. She says that her experience of several months spent self-accommodating night-to-night with five children was extremely difficult for both her and her children. Having to leave their accommodation all day, while trying to secure a new spot for that coming evening is stressful and distressing. Ana describes how difficult it was to meet her children's most basic needs for food, and sleep, while having access only on a night-to-night basis to emergency homelessness services:

...I'm meant to try to find emergency accommodation each night, and how many hands do I have? I have five children. Because the children, they don't wait to cross the road, they don't listen, they want to play – and how many hands do I have to hold? What am I supposed to do and they say, it's your responsibility. Yes it's my responsibility but the problem is that I don't have a place, so the children can't relax. They are very tired. It's not like once or twice we have to do it, it's every day, every day the children have to wake up – they're not sleeping well and they're very tired. The children get sick



and tired of it all. They don't have time to relax, they don't have their own things and if you put them all day, every day on the roads with you – I'm an adult, it's ok I can manage but it's very hard for the children to manage. They get tired, they want to sleep. I have a double buggy luckily so the two small ones can go to sleep in the pram. The other three children would be walking. I'd be going to a shopping centre until the time came to get the hotel, eight, nine o'clock, Focus Ireland would ring me, the children would be sleeping on the floor in the shopping centre. I'd put them lying there, on their jackets and they'd go to sleep for one or two hours. (Ana)

Even when these families did get some respite from spending their days on the streets, the typical temporary accommodation which they were provided with were rooms in hostels, hotels and B&Bs. This kind of one-room-living does not appear to be fit-for-purpose in terms of meeting the most fundamental needs of families. Children have no space to do homework, to play, to store toys or any other belongings. Their parents have nowhere to cook for them, or to clean their clothes. No one has any space or privacy, and this kind of one-room living can go on for months – as outlined earlier, Eva spent over a year in such accommodation. So while in cases of emergency, a hotel may be considered a suitable option for a family for a short time-frame, once it goes beyond that to weeks, months and years, these kinds of accommodations are not suitable for families:

They've no childhood. They've no childhood.....they still have needs....there's no play area for them, they're confined to one room. There's no sitting area in that one room unless it's on the bed.....children have no belongings. They mature an awful lot faster, like my daughter, she's only six, but at the parent teacher meetings they say she's like a teenager. That's the impact of the little life she had of two years homeless, being confined to one room. The only person she had to play with was the little girl next door. (Sarah)

I got homeless in July last year [2017] and until October I was night and day in the hotel. One room, a bathroom, a small TV. You weren't allowed got out walking in the halls, you had to just stay there in your room.the children are not allowed to go into the hall, they have to stay in the room, they have to be quiet. You just have one room, one room. In one room there's four beds so there's no room to even move. There's no space. I'd just bring them out to eat, to McDonalds or somewhere, for an hour, and then we'd be back in the room. You can't keep many toys, because if they tell you to leave you don't have anywhere to carry them, you have to leave them there. A lot of things that my children ask for, 'get me this mum, get me this' and I have to say that I can't get you that until we have a house so that we don't have to leave it. They cry and I say please understand and they say ok mum, they understand. (Ana)

3.4 Compassionate, supported housing for complex needs

I know when I put my hand out now it's not going to be slapped, I know I'm going to be helped by someone. (Sarah)

While the families who participated within this project have experienced dark times in their journey through homelessness as described herein, there are also some positive aspects to their stories which point to potential solutions to providing for the often-complex needs of families experiencing homelessness.

With a combination of challenging circumstances, including family breakdown, being a teenage single parent, while experiencing homeless and drug addiction, Sarah found that she required significant support in order to be able to find stability and learn the life skills necessary to recover from her drug addiction. Her experience of supported housing provided by Sophia Housing is extremely positive and perhaps points us in the direction of what services which are family-centred, holistically and compassionately providing for the often-complex needs of families who have experienced homelessness, might look like:

...I was 18 and homeless, I never went into a shop and paid a bill so when I had a house and was getting all these bills through the door for a hundred and something euro in my mind I'm going 'I'm not going up there and handing her this'....and it was for the ESB. There was weeks when I'd sit in the house for two and three days with no electricity because of the fact that I just wouldn't go and pay a bill. So now I'm in Sophia Housing and I'm trained, we've got bills and they helped me arrange it and swap over to bill-pay and since it's gone bill pay I haven't had any issues with ESB or Gas or anything. That's the support I've gained from being with Sophia House. I can pay my bills, I can pay my rent, that comes out even before I check my money so I know legitimately my home is my home, every week my rent is paid. I'm not worrying about the end of the month where am I going to get €160....I know when I put my hand out now it's not going to be slapped, I know I'm going to be helped by someone. (Sarah)

- Eva is a single parent with four children aged between fourteen and two years. She became homeless in mid 2017 when herself, her then husband and her children were evicted from their private rented accommodation due to the house being repossessed by the bank from their landlord. The family were unable to find alternative private rental accommodation via the HAP scheme within their price range.
- Following a period of back and forth between Focus Ireland and South Dublin County Council (SDCC), and a short time in night-to-night emergency accommodation, the family were housed in temporary homeless accommodation in a B&B in the city centre. Eva and her four children were given one room, while her husband was given another separate room. The family spent a year in this temporary accommodation, 'confined to one room' with no cooking or laundry facilities. During this period, Eva describes her emotional state as 'traumatised'. Her marriage broke down and she was eventually evicted from the B&B for cooking in her room.
- Upon receiving the eviction notice from the B&B she had another period of back and forth between Focus Ireland and SDCC, where she felt she received no practical help. She eventually self-negotiated her current temporary accommodation – a one bedroom holiday village property

in Wicklow which she can renew on a two-week basis. She and her children have been there since July 2018. Eva is in a very precarious accommodation situation with security for only two weeks at a time. Her older children are in school in Tallaght and so Eva drives up and down from Wicklow each day to bring them to school, as she doesn't want to disrupt their schooling while they are experiencing homelessness.

- In November 2018 Eva was told by SDCC that she would be housed within a period of four weeks, but that has been pushed out indefinitely.

In terms of how her progression through homelessness has felt for Eva, it is characterised by feelings of fear, frustration, anger, insecurity and helplessness. Feelings of being unsafe, ignored, stressed, disappointed, failed, betrayed and ultimately traumatised by the experience of homelessness, and by the lack of support and proactive response from service providers. Eva describes her children as being afraid, panicked, petrified and unsettled by the past year and a half of homelessness. While happy and hopeful following the news from SDCC that she and her family would be housed before Christmas, Eva's feelings have returned to ones of frustration and disappointment with the lack of certainty, lack of security and lack of clarity that she is now facing.



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This is a scream of help to me, and unfortunately nobody is listening. That's really what I feel at the moment. Nobody is listening.

This second one is kind of related as well. At this stage I'm at a stage of confusion in my heart and even in my mind, lack of clarity, lack of certainty, I don't know when this is going to stop. If I was told in two weeks' time, or in one month, I don't know, a timeframe, that all of this would be finished, at least you can start the count down. The fact that you don't know anything, not knowing is what kicks you as well.



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That's the image of a car. Most of my time is spent in the car. I drive two hours coming from Wicklow every day, one hour going back. I spend from 1:30 when I collect my baby from creche, because he's only allowed to be in creche for half the day, so I collect him at 1:30 but we need to wait until my daughter finishes school at 4:00. So from 1:30 - 4:00 we are in the car waiting and then we drive another hour to Wicklow. So most of my time is spent in the car. Most of my children, they do their homework in the car, on the way home, to save a bit of time. By the time we get home, get something to eat, they have their shower and everything, if they have to do their home-work they're tired. We have to be in the car by 7:00 in the morning because of the traffic.

This is my son, he's 2 ...we actually spend six hours in the car with him. He finishes creche at 1:30 so we have to wait from 1:30 to 4:00 in the car until the other children are finished school. So most of the time he would spend crying like this. It's really depressing to be in the car and to have a child behind you crying and you can't do anything, because he wants you to continue driving because you're in the car, but then at the same time you're cautious of your petrol as well. It's just too much. The petrol is really huge for us going to Wicklow every day.



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This is about 6:15 in the morning because we don't have time to actually have breakfast so I usually make chocolate bread for my children and they have breakfast in the car while we drive for two hours. This is our typical breakfast, and the days where we don't have time to make the chocolate bread they have a biscuit for breakfast.

This is early in the morning when we leave it's dark, when we come back it's dark but I'm getting so tired that by the time I come back I'm actually nearly almost falling asleep while I'm driving and I know that it's very very dangerous but then I don't have any choice because I can't park the car and doze off and drive again, so I don't know. I just try to keep the air open and the kids can't talk to me while we're driving because they're tired, they're sleeping. So I'm the only one awake and I have to keep myself awake while I'm really really tired and frustrated.



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We look at houses being built - every Friday I log into the South Dublin Choice Based website, so usually there's two or three houses there, so in my free time I like to drive around those and kind of say to myself, well ok maybe one of these days one of these houses will be ours. You kind of make space to kind of dream a little bit, and then our hopes become broken again when we drive again in the same place and see other people living there. This is one of the houses that are being built in Jobstown and they are almost ready to be moved into and we hope that one day we could have one of them.

This is the library, well I took this not just for the library but for the idea that most of the time I use the public space to wait, wait. That's what I do, wait. Today I'm here in Tallaght, I'm waiting. There's a lot of time spent waiting. At the moment I am looking out the window and hoping for something new.



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This is my suitcase....when we are homeless we have to be ready to move all the time, so basically we never settle. It's always packed, because where we are we only have two weeks. So..they renew you for two weeks and the next two weeks they can say they don't have the space or they don't want to have you anymore. So everything needs to be packed always and be ready for the move. We are in a one bed, small apartment upstairs, and there are older people downstairs.

We are five people and I have to make sure that the children are not jumping anywhere and everything,

because we don't want to make noise, so that downstairs don't complain about us. So that we don't become a nuisance to them, because that could affect obviously whether we stay in that house or not. It's very stressful, even for the children, because normal things, you have to restrain them all the time, I feel that I have to restrain them all the time. I have a four year old and a two year old, and all they want to do is run, a bit of freedom but they can't do that.



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This is the microwave, the microwave means a lot. In the B&B we had before, all we had was a microwave, we didn't have anything else so the microwave was basically the thing we used for cooking meals. So you could go to a restaurant and buy noodles or something like that and heat it up for the children so at least they get something. Their diet has suffered very much obviously – what can you make in a microwave? Already they don't have proper breakfast, when we come back after school we don't have proper meals. Really I rely on the meals that they eat in school. It's not even a meal either, it's still a sandwich. So I'm trying to do my best but there's not really much that I can do.

These are ready meals, this is a sample of a lasagne that you can get maybe in Tesco. You can put it in the microwave then give it to them. From time to time I try to change, but it's limited.



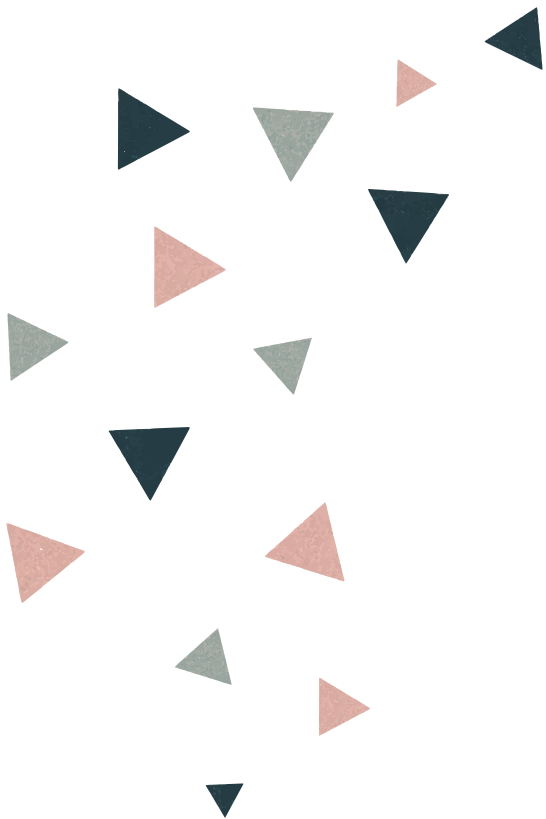
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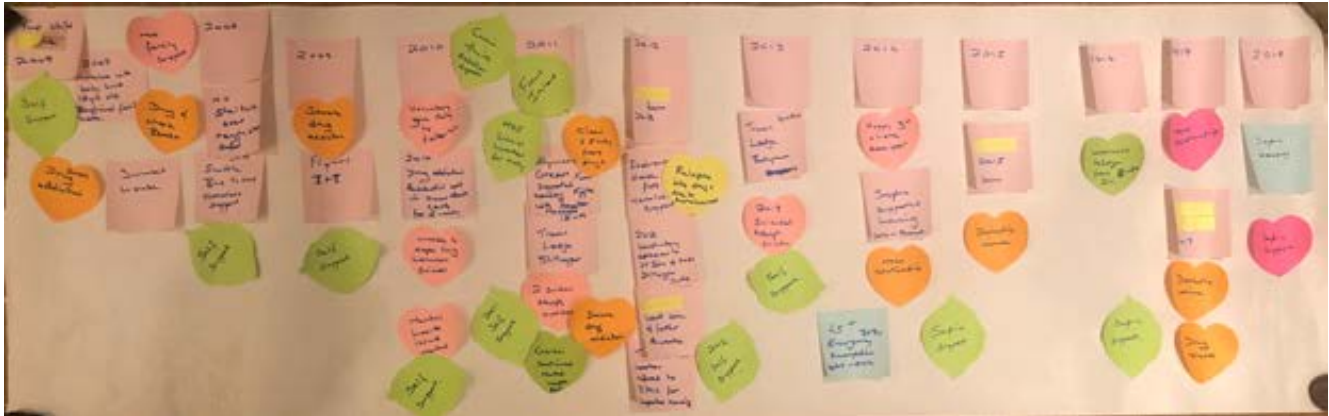
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So those are washing machines. When we used to live in town I used to wash all of our dirty clothes once a week - we'd go 15 minutes walk to the laundrette. You have to put money inside it and you can wash and dry but it's in the public place. I have two little kids and I can still only do laundry once a week and I should be doing laundry every

single night really. Sometimes, lets say I did the laundry in the beginning of the week and in the middle of the week their clothes are dirty, I still have to hold on until the end of the week. Especially for the school uniforms, it's really crazy.



Sarah's Story



- Sarah is a single parent to four children aged between twelve and one years. She became homeless in 2007 at eighteen when her first child was six months old, due to family breakdown. Sarah remained in and out of a variety of temporary homelessness accommodation (over 45 places in total in seven years, including rough-sleeping, hostels and a women's refuge) until being housed in Sophia Housing supported accommodation in 2014, where she and her children still currently live.
- Sarah has suffered from drug addiction since becoming homeless. She attempted several times to detox from drugs and is currently in recovery, and believes that her mental health has suffered considerably over the past decade. Her eldest daughter was put into voluntary foster care in 2010.

- In terms of the services which have supported Sarah over the past twelve years, the support of social workers in helping her gain access to supported housing has been key. However she feels that she had to reach rock bottom (two consecutive suicide attempts via drug overdose) before she received the help that she needed. This feeling is echoed by service providers within the project, as one Public Health Nurse states "everything has to be a crisis" before help is given.

In terms of how her progression through homelessness has felt for Sarah, she has felt suicidal and unable to cope, isolated and lonely. Having been in recovery for some time and in a secure supported accommodation since 2014, she feels that she is now in a far better and happier place in her life.



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This is to do with, I remember being homeless and you'd have to leave the hostel at all hours and walk around in the rain, hail, sleet, snow. So when I see that image that's what took me back.



This one is very sentimental to me. I was eighteen going homeless and my daughter was only six months. She was homeless with me for three and a half years and the wedge was already there and eventually the State, she's now with the State. It's voluntary care, I put her in there for her best interests because I was dealing with addiction at the time so that's why this picture stood out to me.



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This one is my Da basically because he was the only one when I was really badly in addiction and really badly homeless, he was the only person that really always stood by me no matter what. All my family turned their back on me because in their eyes I was an addict and I was never getting my daughter back.



And this one was just loneliness, being in a hostel, alone and being so lonely. No kids, no family, just drug use. So that's why this picture stood out. But that's about five years ago and my life's completely changed from that.



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This just reminded me of Focus Ireland, the café, because back when I was homeless this was the cheapest place to feed the kids. That and Brother Luke's. I took a picture of the café downstairs in Rua Red because it's the only café around, but that's what it reminds me of. I'd go there three, four days a week when I was homeless, just to get out of the hotel, plus I wasn't spending mad money on

McDonalds. At the time it was just me and my eldest daughter and I was more wrapped up in addiction and making sure I looked well rather than going out and buying shopping. And when I was homeless there was nowhere to store the shopping. I'd put aside €25 per week and that was for food, our meals. The Focus Ireland café, that's how I did it.



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I'm sure we've all experienced this, rushing to get there between ten and twelve and rushing to get back...that's where they make you go every morning. You walk in behind them doors and you feel degraded even before you get through the doors to sit down, to speak to somebody to get an allocation. It's disgraceful the way it's run around here. The minute I went around at two minutes to twelve he said 'no we're closed' and I said well you know what I'll go down here and take a picture and he said 'you're not allowed take a picture'.

You walk in there and it's like, 'and who are you here to see and what's your name and how many kids have you got, what hostel are you in' – 'I haven't got a hostel I had to come in here to book it' – 'and who did you book in with yesterday?' – so you have to remember that person's name, with all your distress that's going on the day before, you've to still remember that person's name, and if she's not there it's like 'well go in there and we'll see if you can be facilitated by someone else'. Sure I'm after telling her yesterday all my information and now I'm going to have to give all my information to someone else - nothing's changes!

All the travelling that you have to do when you're homeless. Between school runs and to see your family and the walking the length of town at the Luas line, that's what this photograph reminds me of. You know, buses coming and going and the Luas just waiting patiently. It's like everything else is moving and I'm the Luas just waiting patiently to go.



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This is just a picture of getting up in the morning, and I'm sure this picture relates to an awful lot of people in homelessness, that have to get their kids up when it's dark out. It's 7:20 in this picture, now I'm in a house and my kids' school is roughly five minutes away from where I live, but I still have to get up that early to get them ready, without being homeless or having to commute, or having to get buses. I was thinking if I have to get up at twenty past seven, it's still dark out, there's people in hostels that have to get up at like 6:30; 6:00 just to bring their kids to school. You'd think that was the middle of the night. I'm living in supported housing, where the school is close to me, but there's people who have to get up a hell of a lot earlier than I do.

I'm in this house almost five years, I had just had my second child, I went to the Council and I had reached a point in homelessness where I had to go and ask for help...when my second child was eight months I tried to overdose on heroin twice. Heroin was not my drug of choice, it was never a drug I did – that was my breaking point, that was it. It was end it all, give her to her Da. I went to the Council and I broke down, I explained about

losing my first daughter through homelessness, and my addiction and no help, and that's when the woman in the council said look here's the forms, fill them out and we'll get you supported housing, because my biggest fear was losing my second daughter; going through homelessness. Having her homeless and not being able to keep a stable place, it was like history repeating itself again. So I asked for help, I had to go and ask for help, because I could see myself ending up in the same situation, I could see myself going to breaking point.

I think my mindset back then was cut it off, do yourself in before the system does you in, that type of thing. That's the mentality I was walking around with. I was 23 when I tried to end it all, I'm 29 now and when I look at it, I've come a long way, I really have...if it wasn't for the supported housing, if it wasn't for Sophia Housing, I would have done myself in, that's the truth. With having the support of Sophia, having the support of knowing now if I use I know how to get the help...how to stop it before it progresses.



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A life living luxury is what I call this, because this is the one thing I think of everything...having to wash clothes in a bath, it was the one thing I really hated ...Flynn's B&B was the only place, they gave you a day where you could go down and wash your clothes...I knew on a Tuesday I could go down at 2:00 and that washing machine was mine for an hour, I could wash anything I wanted I didn't care how it would dry, I just wanted to wash it.

So that was one thing in homelessness that everybody needs – it's an essential thing when you're homeless, to

wash your clothes, to have a shower...it contributes to the stigmatising, not being able to wash, smelling... I don't have an issue with homeless people because I've been homeless, but there's people who've never been in that situation who sit there judging them, they're a junkie, they're an addict, there's something, that's why they're homeless. Who's to say their mammy didn't die, they've nowhere to ...go, and that's why they are homeless? It's little things like that that annoy the life out of me, because people don't know.



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That's my downfall. If I can advise anybody in homelessness – yeah you want to fit in, yeah you want to be what everybody else is, yeah it's hard, but whatever you do don't pick up any drugs. If people tell you take two to go asleep, don't take two, because you'll wake up the next day hungover from taking those two and that person that gave you them two is still in that bed beside you and still probably has loads of them to sell.

Then it's, yeah just give us 10 – it's so easy to be sucked into addiction, and once you're in addiction they do not

help you in the homeless services unless you're in a really bad way on the heroin, or as it is now the crack....that's the only way people are getting help.

As tough as it is, if I could advise anybody, just don't take drugs, because in the long run you suffer with your mental health. I'm off drugs, and I still find it hard to sleep, I'm doing counselling now and we're working around that. I suffer with my mental health through being homeless and through drug use.



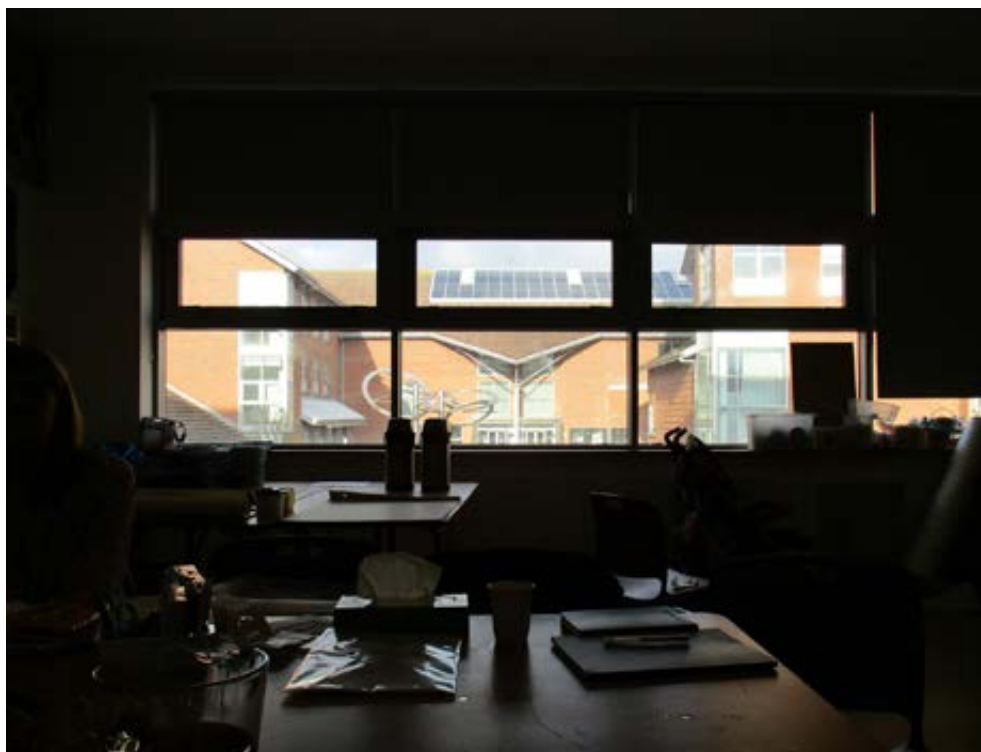
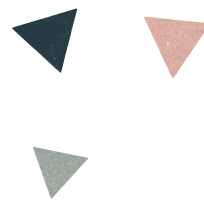
This one is praying – praying very much helps you when you feel like something is going on and you feel you need to pray.

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When you're homeless, you're on your own....there are just too many things going on with you - you're not happy with everything that's going on with you. With the children, with the homelessness, you have to care for them ...you don't have time for you, just on your own. You want to do something, work or something and you can't, your hands are full. When you want to go somewhere – if you want to go anywhere you can't.



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That's when you feel something you want and you can't get it. You're sad, the children... they need things, you can't have it. It makes you depressed. This is where you're feeling as if everything is over. When you're homeless your children don't have everything that they need, but when they have their space, they can relax, they can go to sleep when they want to, but when you're homeless – where can they go to bed? When you're on the street all day, where can they go? When they have everything they need they can relax. On the street it's hard for them to relax – when I was on the streets, they would want to relax, or to play, or to sleep, but they couldn't get anywhere to sleep. I have a double buggy so two of my children could sleep in that, but the other three would have nowhere to sleep.

Once I was very sick and I came to Tallaght to go to the Council and I was trying to explain my situation, where am I going to go?, my children want to sleep, look at me, I'm very sick. I had a virus or something... They said go to Focus Ireland, and I said Focus Ireland sent me here to get help. Focus Ireland said that the first step is with the Council and then Focus Ireland. I had to get up in the morning, wake my children, get them dressed, get the Luas from town and come straight away here to Tallaght to the Council. The Council is open from 9 or 10, and only until 11 or 12, and after that time they close. So if you don't get there early, you came too late, the office is closed. I spoke to the Council and explained my situation and they just

gave me a list of hotels to book into every day. I told them I already had this list, I had already rung them, some say they're not taking anyone from the Council, or they're fully-booked, or with five children they don't have the space, because I need two rooms with the children. What am I to do? I had my stuff, my children with the pram, I asked them to look at me, I was feeling sick. They didn't care. They said go to Focus Ireland, and I said Focus sent me here so what am I to do?. So they said we need to see someone else, they tried to put me out of the room.

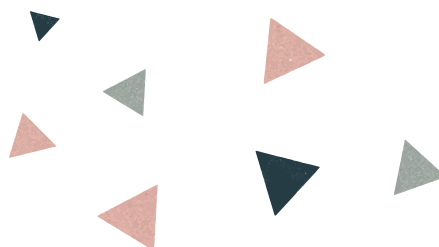
So then I left and went to look at some of the housing agents, trying to look around for something to rent and the agencies said no we don't have anything suitable to rent. So they were giving me numbers to ring, and I was ringing but they'd say no we're not taking rent from social welfare. So then I got the bus back into town, and I was feeling at that time very very sick and feeling like I needed to go to bed. So then I lay down at the bus-stop, and there was people walking past me in the street. They were asking me if I was ok. When I got on the bus, I didn't mind how many people look at me on the bus, I lied down on the bus and I slept until we got to town. That was very hard, and my children they looked at me like they knew I wasn't well. At the time it was raining, cold outside. It was very stressful for them and for me as well. When I was homeless I was in depression.



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This is where I live, this is the apartment block where I live at the moment. Until I got here, I found it very hard. When I got there I had to find out the schools, I had to find out how to go to social welfare, let them know I've moved here. I had to go back to my previous place in town to change everything, change the address, everything. I had to buy a lot of stuff to put into the apartment, and pay rent. The Social Welfare gave me €200 to buy things (the

apartment is furnished but didn't have kitchen items like kettle, toaster etc. bedclothes, towels) ..so it cost a lot. When I got there, I needed to paint it, the wall was very bad so I asked if they'd pay for paint, but they said no, you have to leave after eighteen months, so I got some paint and painted it myself. They give me this apartment for eighteen months. After eighteen months I don't know where I might go. I don't know where I'll go.





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This is the way to school, this is my children in the pram. I have to go all the way to get the children from school, at 1:30. With the children I find it very hard to bring them to school and to get them from school because in the morning I have to dress them, get them to school, come back do the chores, the time goes very quickly and then at 1:30 I have to get them again from school, bring them back home, do their dinners. It's a half an hour walk to the school. Anywhere you have to be, you have to get the children from school. I can't do anything for myself, all the time my hands are full with the children. So to go anywhere else, sometimes if I have appointments, if I have to go to Social Welfare, if I have to go somewhere, the hospital or something, then the children don't go to school. They have to miss a day, they're not going to school. That's the thing, your hands are full and you can't look for a place...and when you try to explain to people, they can't understand you, they don't listen to you, they don't care. I had the same thing when I was homeless and I'd say please give me a place where I can stay night and day and they'd say no you have to look yourself, there's too many people. But I'd say I have five children, and my children would be looking at the people, and listening to me when I'm talking ..and when they were telling me, there's too many people, you have to look yourself, I felt like crying. I was crying and I'd say [to the council workers] – I might get into a depression and they say, go to the doctor, go to the GP.

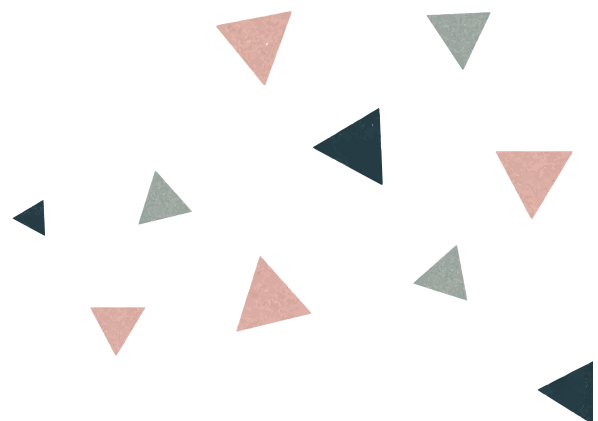
I'm on the streets for two months, so I'd ask them to please help me, every night, every night staying in a hotel and every day I have to be outside. So for seven, eight, ten hours you're on the streets, and sometimes it's raining, very bad raining, cold, freezing. They don't listen, I'm meant to try to find emergency accommodation each night, and how many hands do I have? I have five children. Because the children, they don't wait to cross the road, they don't listen, they want to play – and how many hands do I have to hold? What am I supposed to do and they say, it's your responsibility. Yes it's my responsibility but the problem is that I don't have a place, so the children can't relax. They are very tired. It's not like once or twice we have to do it, it's every day, every day the children have to wake up – they're not sleeping well and they're very tired. The children get sick and tired of it all. They don't have time to relax, they don't have their own things and if you put them all day, every day on the roads with you – I'm an adult, it's ok I can manage but it's very hard for the children to manage. They get tired, they want to sleep. I have a double buggy luckily so the two small ones can go to sleep in the pram. The other three children would be walking. I'd be going to a shopping centre until the time came to get the hotel, eight, nine o'clock, Focus Ireland would ring me, the children would be sleeping on the floor in the shopping centre. I'd put them lying there, on their jackets and they'd go to sleep for one or two hours. Because the children would get very tired.



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This is my children's school – my children are very happy. They do their homework, play. When they finish school, they come home they have some tea.

They come out of the freezing cold, they do their homework, dinner, watching TV, playing, going to sleep. They have friends.





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The children were lucky this year because they got a Christmas tree. Last year I was homeless. Last year I was on the streets, and in emergency accommodation. We only had one room in the homeless accommodation so I couldn't get everything for them, and they'd ask me to get things for them but I'd say where are we going to put it?

So this year they were lucky, when they saw the Christmas tree, because last year they didn't have one, they said 'thank you mum'. I said to them, what do you need to say? And they said 'thank you god', so they are happy now you know. The situation when you're homeless, this is the kind of thing that you don't have.



4. The Voices of the Service Providers

In this section, the experiences of those providing services to families in homelessness will be outlined. The service providers who took part in this project work across a variety of organisations who support families that are experiencing homelessness in the South Dublin area. This includes Tusla, Respond, High Street Hub, Barnardos, Saoirse Housing, Sophia Housing, South Dublin County Council, local church leaders, and childcare providers.

Over the course of two three-hour workshops spread over two weeks, the group of sixteen men and women discussed their own experiences, thoughts and opinions regarding the needs and priorities of families experiencing homelessness within the area. Using the photovoice methodology, they dug deep under the skin of the issue, and their own beliefs and recommendations for service improvement.

Together they submitted over 40 photographs which give a powerful and moving account of life at the frontline of homeless service provision. As outlined earlier the overall aim of this project is to let the photographs and narratives speak for themselves, however there are a consistent set of themes which we feel it is worthwhile to highlight.

The experiences and thoughts of service providers on the key challenges facing children and their families in homeless echoes that of the parents within this project. As can be seen from the photographs and the accompanying narratives, while the service providers are viewing the situation from another angle, through another lens, there is significant overlap across the board. They share the parents' frustration and concern about the long-term impacts of homelessness on their children:

Time to enjoy childhood is interrupted. No time or space to play, dress up, be creative and imaginative, crawl, tummy time etc. Growing up too fast, Development, education, emotional well-being all compromised. Taking on adult worries and concerns too early in their little lives. Their futures fraught with challenges beyond what they should be faced with. (Rose)

The service provider's photographs have been grouped into five loose, and often over-lapping themes;

4.1 The impact of experiencing homelessness on children

The service providers highlight the mental and physical health impacts on children who are experiencing homelessness, especially those who have been homeless for a prolonged period of time. Their developmental milestones are negatively impacted, and their mental health is seen to deteriorate the longer they are in the system.

Public health nurses, educational welfare officers, and family support workers struggle to assist parents in providing adequate health care for their children. Families who are in the transient 'self-accommodating' part of the homelessness service are seen as particularly vulnerable as professionals have no way of keeping track of them to assess and support their needs.

Echoing the parents, the service providers highlight the fact that families who are experiencing homelessness lack access to their basic requirements such food and laundry facilities:

They have nowhere to do their laundry, some of the families that I have met ...were doing their laundry in the parks. They would just find a public water supply or wash their clothes from the bottles of water. So that's a barrier to having facilities to do their laundry and even having proper meals during the day. I know if you are in the city you can go to the Focus Ireland cafe but you can only access that until 5.30pm in the evening so it's just a barrier to the basic needs of children, of families, of human beings. (Zoe)

Homeless people, families and children end up needing admission to mental health inpatient facilities due to a deterioration in their mental health. (Niamh)

...as a new person coming in (to a family hub), there's no light at the end of the tunnel for them. I get that sense from people from talking to them, especially when they come in, that there's not much lower they can go. (John)

4.2 Barriers to accessing timely and appropriate services

The second key theme which emerges from the service providers is the idea that families experiencing homelessness face significant barriers to accessing services. The first hurdle each family must jump is to 'prove' that they are homeless. This can be a difficult process for people who are in distress, experiencing trauma, that have literacy issues and so forth. As one of the Public Health Nurses explains, proving homelessness is not always a straightforward task, especially for those who are most vulnerable – for example people attempting to escape domestic violence:

help you...you have to go to the Council and show them that you've been evicted, show them that you have children, show them that you have needs and that they must house you and that's very hard because they send you off to get another thing stamped or another form....I had a family, a mother and four kids and she was in a situation where domestic violence

was escalating in the home, and she had to leave. ...she had nowhere to go, and she went to the Council but she couldn't prove her homelessness because she was on the tenancy for South Dublin County Council (SDCC) so she was considered housed. So she would have to go to a solicitor to get an affidavit to say that she was leaving the family home. She had all these obstacles, and she was black and blue...she was in a very bad situation and she had to go back to that home. And on it went, she ended up in A&E. It's just on and on. (May)

Bureaucracy is highlighted as a barrier to getting the right supports to the right people at the right time.

4.3 The fragmented and often confusing nature of homelessness services

Another issue highlighted by service providers within the project is the often confusing and fragmented nature of the homeless services. It can be difficult even for those who work within the system to navigate it or understand who is entitled to what service:

There's a lot of information out there that I would call noise and it's just a difficult system to navigate. If I start just from the process of becoming homeless there are just so many strands to it that you almost need to work in the local authority to understand who is entitled, who is not and what you can get.... (Zoe)

A lot of the challenges that we see people facing are that a lot of the things they have to do are over the phone, they are not necessarily in front of somebody who can sit down with them. A lot of it's over the phone, it's "what can I do?", it's "who can I ring?" it's "where can I go?", it's "who can you link me with?". It's not very person centred. (Carol)

It is confusing, I find as a worker I had to break it down myself by step one to ten. You go to the Council, but you're not in the right place so you have to go around the corner... (May)

4.4 The impact of policy

Service Providers express feeling somewhat constrained by their defined roles in terms of the interventions that they are allowed to make to support families experiencing homelessness. Each service provider, be they family support, education welfare officers, childcare providers, social workers, public health nurses, can step in and support families to a point, at a specific time, under specific circumstances. However, according to the participants in this project, often what a family needs is a holistic set of responses which are outside of the remit of any one service provider. This is a source of frustration for the service providers, as Finn puts it;

...in my work I can give you a 5% piece of information, then you need to go somewhere else, then you need to go somewhere else, then you need to go somewhere else. (Finn)

Family hubs are seen as places where extra services could be offered to families, to help them navigate the journey through homelessness both practically and emotionally, thereby limiting some of the detrimental impacts that homelessness can have on their physical and mental health:

Even where families have been skilled before, if they've been in homelessness for any period of time they can become deskilled and it's really about not setting families up to fail and if you're going to the effort of putting families in hubs and trying to give them some stability and trying to give them somewhere where they can live with normal daily functionality, you need to do the next bit or when they move on to permanent accommodation they're really going to struggle. If the council are housing someone there's key workers there but in an ideal world, the key workers would be coming in to support the families before they got into permanent accommodation. Family support services from Tusla can come in and do some of that as well...the hubs need to be staffed with qualified support staff for some of the issues that they are presenting with. (Carol)

....you'd like to go further with them and togo through phases of progression with them and get them ready. You'd like to work with them and it would help to build a relationship with them. We would have challenging behaviour

we would have reports going into Tusla, but my team aren't key workers, they aren't project workers – they are facility support staff. Key workers, project workers they are probably better trained, better qualified, better able to deal with challenging situations. We don't have those resources. I have one part-time project worker, three hours a week to a head count of 160....so you're not peeling back the layers of the onion at all, you're not even touching the tip of the iceberg... the DHRE are now reacting, now Focus will be putting extra resources into our building. I think the model should be that if you open up a hub, you should have it resourced properly in the first place. (John)

4.5 Governmental and societal responses to homelessness – role of empathy and compassion

The final theme explored by the service provider participants is the presence or absence of empathy and compassion, and its place within the homelessness system. One representative from a local church highlighted the lack of the fundamentals of Christianity within the system:

...in Christianity we claim that you could be entertaining Jesus. He has no hands or feet but ours....Jesus was there with the people at the bottom of society, that's who he knocked around with, that's who he stood up for. (George)

The idea that the policies in place within our current system of homelessness require people to prove homelessness to such a degree that a woman with visible signs of domestic violence would not be considered eligible for homeless accommodation immediately appears to suggest a lack of compassion and empathy within our system.

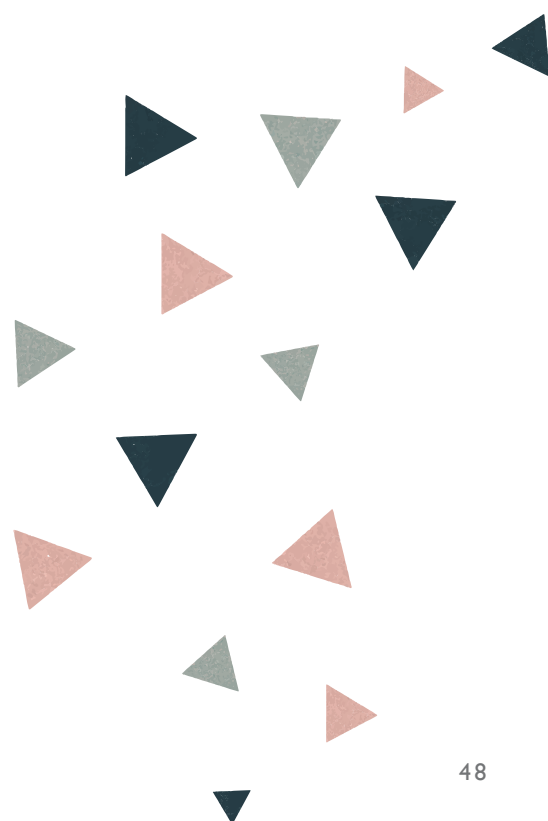
There was also discussion amongst the group as to the protection of children who are experiencing

homelessness. The understanding amongst the participants within this project is that becoming homeless per se is not seen as a child protection issue. A child's welfare is linked to people in their lives rather than circumstances, so it is not until they are considered vulnerable to neglect or abuse by a person in their lives that the State steps in. However, several of the service providers believe that becoming homeless should be considered an Adverse Childhood Experience (ACE) in and of itself. The participants would like to see homelessness policies and service provision infused with more trauma-informed policy, and with a more ACE-aware approach to providing care to children and their families.²²

It is noted by participants that Tusla does attempt to provide a response to children who are impacted by their experiences of homelessness through the Prevention Partnership and Family Support programme (PPFS).²³

Throughout the discussions with the service providers, there is a deep and palpable frustration that they cannot do more to help families and children experiencing homelessness, allied with a deep sense of compassion and empathy for families who are at their most vulnerable, without a permanent roof over their heads, or access to their most basic of needs:

I spend my whole life waiting. As a nurse waiting for change, for houses to be built, for people to get moved on to better accommodation, for children to get better opportunities, for the paperwork to stop, for so many things. So many clients who are homeless with their kids, they're waiting for Focus to open, they are waiting for the Council office to open, waiting on a hotel to ring them back with a room for the night and they spend their whole life waiting, waiting on a home. (May)



The impact of experiencing homelessness on children and their parents



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Time is running out. Hello is there anyone out there listening? Do they know time waits for no one? Time is running out for the thousands of children and their parents who are currently experiencing homelessness. Families displaced and separated from their supports and networks. Time to enjoy childhood is interrupted. No time or space to play, dress up, be creative and imaginative, crawl, tummy time etc. Growing up too fast, Development, education, emotional well-being all compromised. Taking on adult worries and concerns too early in their little lives. Their futures fraught with challenges beyond what they should be faced with.

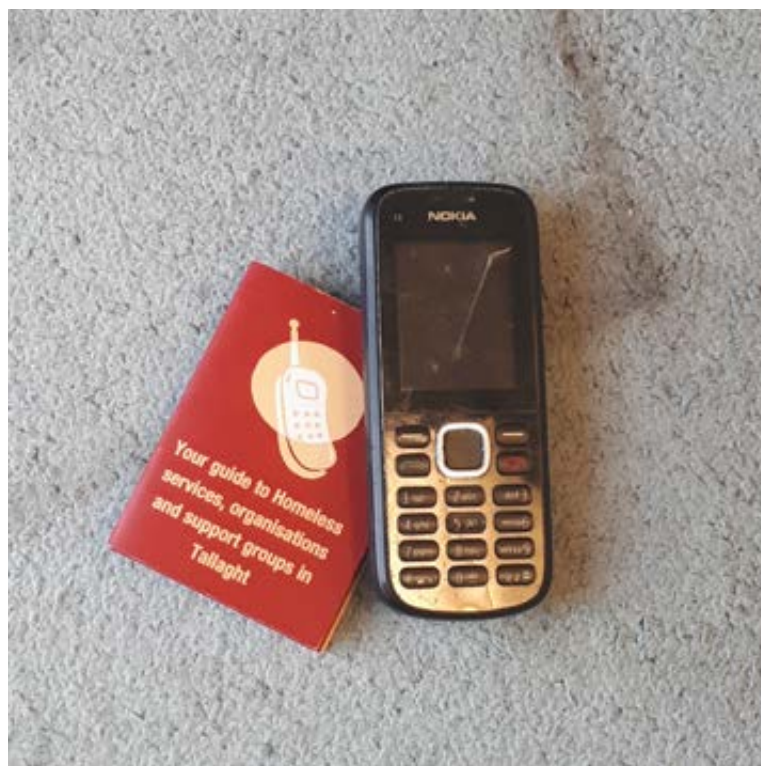
Time is running out for parents trying to hold it all together. With the multiple competing demands of parenting and family life coupled with the demands of homelessness. Dare we ask what is being expected of them? Heads down to sleep at night worrying what tomorrow holds. Where will we be in a week a month a year or more. Trying to hold it all together and keep things as normal as possible. Appointments forgotten or missed trying to meet basic needs of food and shelter.

Time is running out.

I feel that in the nursing profession, it feels like we don't get to give our patients enough time. We are stretched so thin that people don't get the time from us that they deserve and need. People and young people that we care for who are homeless are no different. Homeless people, families and children end up needing admission to mental health inpatient facilities due to a deterioration in their mental health. This deterioration in mental health can sometimes unfortunately be underlying but it can also be a reaction to the stress and experiences they have gone through from being homeless. Due to the difficulty in finding appropriate places for young people and adults it can delay their discharge and can often mean people become attached to the care and sense of safety they receive from being in hospital. Their needs are met without stress and worry about where the next meal is coming from or where is safe to sleep.



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A lot of what we do is via the phone. We are constantly having conversations. We are a screening team and most of our contact with families who are homeless is over the phone but we are also very conscious of the fact that when we are referring people on we are telling them that this is the number you can ring. A lot of the challenges that we see people facing are that a lot of the things they have to do are over the phone, they are not necessarily in front of somebody who can sit down with them. A lot of it's over the phone, it's "what can I do", it's "who can I ring?" it's "where can I go?", it's "who can you link me with?". It's not very person-centred.

We are very conscious of the impact of that on people when they are on the phone. They feel that they are not getting the response that they need and they have nobody to physically turn to and say "what do I do now?, where do I go next". It's just something we are very conscious of and particularly that's what we are to people, a phone contact.

We are trying to move people to the services who can support them because we can't support them in Tusla in

terms of homelessness. We can support them in a range of other things but we are very clear for referrals and for people phoning in that just because you are homeless doesn't mean that we feel there is any risk in how you care for your children and whether or not you are able to protect them and the cases that we do work with in the longer term that involve homelessness are the more complicated ones where the impact of homelessness over time has hit in but the homelessness in itself isn't ... something we have the capacity to support people with. We don't have any access to the supports that they need.

We've seen a huge increase in the mental health difficulties around children in homelessness. We are really starting to see the need to try to pull the homeless services and supports together to get to these families at the early point.

We get loads of referrals from families in hubs. We get no referrals from families who are going night to night because nobody sees how things are with them. The night by nights are the ones I would be really worried about.



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I'm a public health nurse and that's the Applegreen beside the Mary Mercer health centre and I would often meet homeless families there to link in with them because they can't leave their clothes, because there's such a queue for it. So I'd often be in the cold with them having a chat about things and I'd be saying to them 'are you remembering the Vitamin D for your baby?', and they're nearly belting you with their bag, 'I don't have money for Vitamin D' or 'I lost the tablets'. All babies are meant to have Vitamin D up to a year, and I'm going on about inconsequential things, for them, at the time where they are in life, but I'm trying to remind them of small things to help the kids.

Some of the babies might be in their car seats and buggies, the back of their heads could be flat because they're not

out of the seating at all for hours during the day and things like that. And you're trying to bring these small things up to discuss them with the families but they are just trying to get their clothes clean, trying to stay warm, trying to get food. So if these things aren't addressed it leads to bigger problems for the children, with speech as well, soothers and over-feeding with milk which can lead to anaemia for the kids and we're trying to advise them to get vitamins and other stuff but their focus just isn't on that. They're just trying to get their clothes clean, and it's very sad.

And they are often broken as well, those machines, because they are over-used.

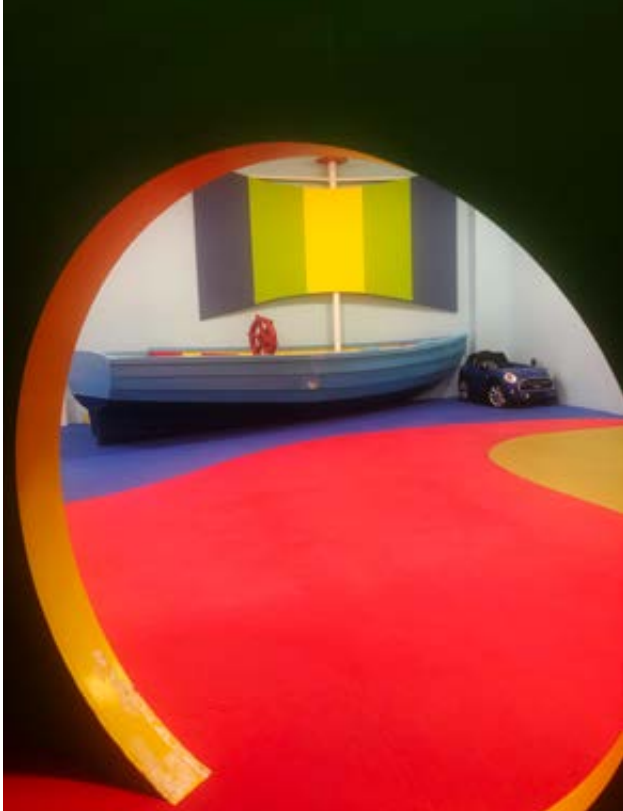


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In the family hub we have a purpose-built toddler room, there's soft flooring, a boat, playhouse and things. When I went to take photos, I just went around and thought I'd try to capture real life and see what context I can put on it. So I walked into the playroom, lights-out time, and when lights-out comes we ask people to tidy-up after themselves and put things away. That toy was just sitting there inside the doorthe child had it in her hand and was bringing it out and her mam, you could see she was saying, no you can't bring it with you, you have to leave it here. It's not her toy. The rooms aren't appropriate or big enough to keep toys in – that's why we have the playroom, but at the same time; 'stop, you can't bring it with you', you know that was upsetting.

We see it every day, you see these things but sometimes you don't think about what's behind it. I left the toy

sitting there, I didn't tidy it up.. A child left it there I've no problem with that, I left it sitting there in the dark and then I was thinking how many children are in the dark as well? The toy can't talk, it doesn't have a voice. For me that's symbolic of homeless children, they don't really have a voice. But there was a happiness in it in that the child had played with the toy – she wanted to bring it with her and it was just that little tinge that no, you can't, it's not yours, you must leave it there. So she purposely propped it up and left it there, and that's the innocence of youth. A toy in the toddler room and the children can't bring them down to their rooms because of storage, there just isn't the space for that kind of stuff. They must leave them behind, and what children are being left behind by this crisis and what voice do they have?



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A child's view from inside the play house into the play room. This view is rarely if even seen through an adult's eyes, and is homelessness really being viewed through the eyes of children and how their experiences will manifest later in life? Do we look at the services we provide, the facilities, through the eyes of a child, or is it through the eyes of the adult who think they know best for the child? It goes back to the idea of the children's voice in all of this, is their voice heard, is it listened to, are they consulted? I know the Ombudsman is having a consultation now, but this crisis has been going on a long time. Are we too late into the crisis to be trying to solve it from a policy perspective?

These are the handprints of some of the children that have come through our service, some of them are still with the service and some are not. I wonder what print homeless services have left on these children.



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I got a picture of our breakfast club. Volunteers usually attend the breakfast club. For me, that's how the day starts, it's my favourite part of the day, it's a really exciting part of the day. We have 90 young people in there, it does be jam packed and again a good lot of the young people who attend that would be from homeless families but a good few of the young people would be from families on the verge of homelessness, who are very much disadvantaged and struggling and those who like to come in and enjoy the social aspect of it and have the craic before school starts.

It's a mad chaotic morning, I really like the breakfast club. There's a kind of quality about, there are people from lots of different backgrounds and lots of different issues and they all get a good proper meal. At the moment the porridge is going down like you wouldn't believe. So they all get a good proper meal and I just think it's a really good start to the day, for me I get a good buzz out of it and I think that's a really good way to impact young people's lives today and like I said there doesn't seem to be a stigma attached. Everyone is invited and it's open to all.

That's the entrance to our breakfast club and there's a small group of young people who'd be there early and that's unfortunately the ones who get dropped off, they are the young people getting dropped off from direct provision or coming from town and they're getting there much too early and standing in the freezing cold and they'd be standing there from about a quarter to eight and we only open at twenty past eight.



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One thing I love about my job is meeting families in their home because I learn a lot about them by meeting them in their space, where they're most comfortable and at ease. Usually this initial meeting takes place in the kitchen or the sitting room. I never enter someone's bedroom, even though many parents ask me to go upstairs to talk to their teen. That's their space and entering it would be to intrude on them and their privacy. When meeting with homeless families who are staying in hotels, there often is no other option than to meet them in the hotel room. I met with a family in their hotel room once and the only place to sit was on their child's bed. To me that was a line crossed. I was an intruder and it was all I could think about. I didn't feel good about being there. I'm sure they didn't feel good about me being there either.

I remember the first time I visited a family in the hotel they were staying in. As I got out of the lift and walked towards their room, the thing that struck me the most was the corridor. It was lined with children, all different ages, all of them homeless. Some of them were sitting quietly on the floor, diligently completing their homework. Others were huddled together around a tablet or phone. Another group of children were kicking a tiny ball to one another. One girl was sitting on the floor with a magazine on her lap. As I stepped around her, she looked up at me and smiled. She came across as fearless and resilient. The corridor was their unofficial space, the space they had claimed as their own to do the things that kids do. It was just a corridor, but it was stark and it was sad.



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This is actually the cremated remains of a cat. It reminds me of a young girl and she became homeless when she was 7 months pregnant and really she became homeless through circumstances where she really had no other option but to become homeless. We had worked very hard with South Dublin County Council (SDCC) but they could not offer her anything because she was not a family, she was 7 months pregnant, and they were constrained by bureaucracy. She was offered a hostel in town that opened at 10pm at night and she had to leave at 10am and she was 7 months pregnant and it was the best and safest accommodation, it was a dry hostel, staff were aware of her situation, she was probably the most vulnerable young person I have ever worked with.

The reason I took this photograph was she spent the day in my office when we were linking up with SDCC and all her bags and baggage were with us. And I went out to Penney's and bought a night bag and I said you cannot bring all of this with you, you need to transfer stuff into a night bag and bring that back and forth with you. I said if there's anything you really value that you don't want to get lost you need to give it to me and I'll lock it away in a secure filing cabinet so she gave me three things and they absolutely broke my heart. She gave me the only picture she had of her deceased mother; her mother's engagement ring and her mother's ashes. And they sat in my filing cabinet for 9 months.



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I bring residents in and bring them through a whole induction and get them to sign-off to agree to the guidelines and rules of the Hub. I bring them around the whole facility, through the playroom, opening hours and all that. When I bring them upstairs to the actual bedroom wing, that's the first thing they'll see. That's looking through the glass of the fire door, so I was just standing outside taking a snapshot. So in context that's only half the corridor, the darkness is the second half, it's motion sensor lighting.

Looking at it as a resident you're probably looking down that corridor thinking it's not very welcoming is it? There's no light at the end of that tunnel down there. This is what we show them, it kind of looks like one of these high security places in America that you'd see on TV. You can imagine the warden going down with his baton and clicking it along the doors. From a facilities point of view, it is what it is, but then there's other contexts. If you're a resident and you're living in the second half of that corridor, once you open your door, once you turn the handle the lights come on. So if you look out your door, there is light at the end of your tunnel, but as a new person coming in, no there's no light at the end of the tunnel for them. I get that sense from people from talking to them, especially when

they come in, that there's not much lower they can go. They're at their lowest really at this stage, but then the facility itself is dark, there's a bit of colour on the doors – all the colours are specified by the council, we don't have carte blanche, they tell us they want that colour and that paint. ...one of the challenges when I came on board was my staff saying ah look there's children putting hand-prints on the walls and I said it's fine, it's children, it's what they do, we'll paint over it.

You often see they'll have drawn murals and things like that down the corridors with their crayons, and some people can't handle that, but I think that's life, get over it, get past it, put a bit of paint on it. It's no harm for a child to do that, they'd do it in your own house.

For some people there is no light at the end of the tunnel, but if you're down there in the darkness, there is light at the end of the tunnel. The nature of the building itself and the facilities available within it I think have a big part to play in the mental health of the adults. It's a great facility, it's clean, but the restrictions of being in a Hub can adversely affect the mental health of the adults, and that's what I would see as the biggest issue in our building.



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In the Family Support Team that I work with, if we don't support ourselves how can we support families? So once in a while we just take a time-out and take care of our mental health. So recently we took a trip to Dun Laoighre harbour and just had a time-out for ourselves. We can take a time-out, but being homeless, that's impossible. The stress is always there, the thinking 'where am I going to find myself at the end of the day?'. Especially listening to some homeless families they have to be out of a place by 10:00am, and to have to leave at 10:00am in the morning is very very hard.

Being homeless the food is not always there when you want it, whereas in our case we can get our food when we want it, so let's not take anything for granted.



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Barriers to accessing and providing adequate services

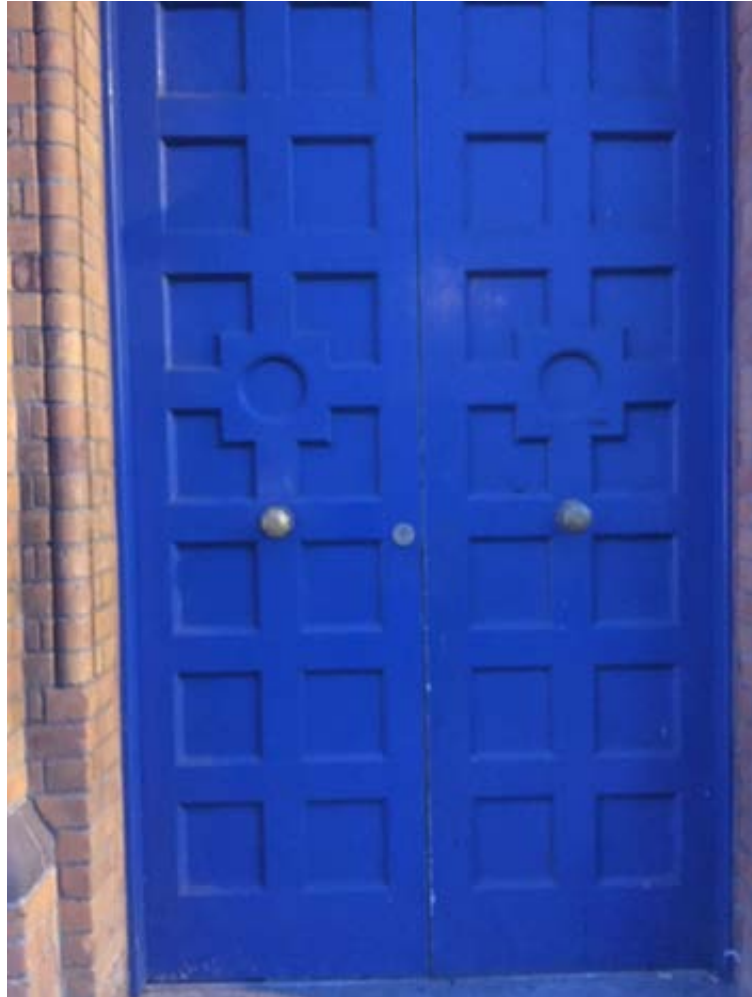


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What I was thinking of in this photograph is in terms of barriers to getting services for homeless families especially the cohort that are self-accommodating, the 'one night only's'. What I wanted to capture is those two X's where no matter what you try it's just really a blockage in terms of those families, in terms of these referrals to family support because of the transient nature of the accommodation that they get in so far as even registering for childcare in terms of the system that is currently there. They can't really register for that because your child has to be registered for the year. They can't because they don't know where they are going to be tomorrow and because of that bureaucracy there is that barrier...and in terms of having somewhere to spend the day, be it in the shopping

mall, they have been asked to leave the shopping malls and they are just sitting there and just wanted somewhere to be warm, and they have been asked to leave.

They have nowhere to do their laundry, some of the families that I have met ...were doing their laundry in the parks. They would just find a public water supply or wash their clothes from the bottles of water. So that's a barrier to having facilities to do their laundry and even having proper meals during the day. I know if you are in the city you can go to the Focus Ireland cafe but you can only access that until 5.30pm in the evening so it's just a barrier to the basic needs of children, of families, of human beings that I was thinking of.



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That's the heart of where you go to when you're homeless in Dublin. That's Parkgate Hall. That's the centre of excellence of homelessness. Every family that is homeless would pass through these doors at some stage and it's just really interesting that when I went to take the picture the doors were closed. I just thought this is 5.30pm

and the doors are closed and the families experiencing an emergency, where do they go?, they can't get a place to stay, they have to find a place to make that call and be supported in the evening and for me this represents the heartbeat of being homeless for any family. When you say Parkgate Hall they know where to go.





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It's been brought up before around the idea of the waiting game and barriers. Our role is quite specific, we don't work directly with homeless families, we're there as an advisory service to support them to secure childcare services, so really it's quite small in terms of impact that we'll make with families. There is a scheme out there for families that are working through Focus Ireland, and it looks great from the outside in terms of yes there's a support there from the government but realistically whenever you scratch the surface of these kinds of things, is it fully supporting parents? Possibly not. When you get down to the eligibility criteria, you have to be working through Focus Ireland so that's a small contingent of who is homeless in the Dublin area.

When you look at how many hours are available for those parents, you're looking at part-time childcare, you're not looking at full-time childcare which is what a lot of parents need because if you take the example of parents traveling from one county to another to drop children to school, while trying to secure their accommodation, all that kind of rigmarole. This particular scheme is free but realistically, part-time care, five hours isn't enough because the travelling time alone would barely even cover that. Then

you roll into a different scheme where there are fees involved for parents, you also have the issue of availability of childcare where there is a huge intake in September, but if a parent comes to us in October or January a lot of spaces are filled up so trying to find a space for a child, or a family of two or a family of three, where there's possibly transport for afterschool children, there's a whole mix.

So there are supports that are out there, but realistically whenever you tap into them it's sometimes not enough. With the red light comes the changing targets of the government, in terms of, we're 100% funded by the Department of Children and Youth Affairs (DCYA) and depending on what the DCYA targets for that year are, our work will depend on that. We've seen this year that some of our work has been called off because a different organisation will be doing it, so you're almost at the behest of what they want you to do. Should we do that? Should we not do that? I know I can do a lot more, but do they want me to do a lot more? We're working with Focus Ireland, they're obviously very heavily linked-in with the families, so you're treading on people's toes, so there is that whole kind of navigation pathway, those kinds of things we find which is represented by that red traffic light.

OTHER USEFUL CONTACTS

Dublin Refuge 01 4630701
 Rathfriland Refuge 01 2941962
 Yucca House Refuge 01 4642015
 Bray Refuge 01 2864163
 Kildare Refuge 045 527384

NSP Domestic Violence Service 01 4807000

Rape Crisis Centre 1800-778008
 Women's Aid 1800-347500
 Tallaght Garda 01 4646000
 Tallaght Hospital 01 4342000
 Tallaght CIC 076-1078340
 Focus Ireland Tallaght 01-4940224
 Amber Hot Duty Social Work 01-4686209
 Dolphin Hot Family Court 01-886340
 Rape Counselling Tallaght 01-4642015

SAOIRSE WOMENS REFUGE

Please contact us for refuge accommodation or confidential help and support

24hr Helpline 01 4630000

Admin 01 4630400
 Fax 01 4523627

helpline@saoirsecwomensrefuge.ie
 services@saoirsecwomensrefuge.ie
 outreach@saoirsecwomensrefuge.ie

SAOIRSE WOMENS REFUGE TALLAGHT

Are you or someone you know being abused or assaulted physically, emotionally or sexually by someone close to you?

24 hr Helpline 01 - 463 0000
 Outreach Service
 087 - 998 2251 / 085 - 801 6720

www.saoirsecwomensrefuge.ie

Saoirse Women's Refuge
 PO Box 10819
 Tallaght
 Dublin 24

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I had a family, a mother and four kids and she was in a situation where domestic violence was escalating in the home, and she had to leave. So she wanted to go to Saoirse and it was full, and all the other places in Meath and Kildare and Portlaoise were all full, all full throughout Leinster. There was no room and she had nowhere to go, and she went to the Council but she couldn't prove her homelessness because she was on the tenancy for South Dublin County Council (SDCC) so she was considered housed. So she would have to go to a solicitor to get an affidavit to say that she was leaving the family home. She had all these obstacles, and she was black and blue, and while the kids weren't obviously physically damaged, she was in a very bad situation and she had to go back to that home. And on it went, she ended up in A&E. It's just on and on.

The refuges are doing their best but they just don't have capacity. Within the refuges they have to nearly evict

women and children to make room for the next crisis and then they have to go and prove their homelessness. And this proof of homelessness is a very heavy burden on any mother or father; if they are being abused, to get all this paperwork together; because they have to go back into the home to get it. I just think it's a huge hurdle, to be acknowledged that you are homeless with the Council. All these jumps you have to do to show it. There's very little for men. Everything is paperwork, they have to go back and get paperwork.

You would hope that the workers in the homelessness services would have a choice to work there, that it's a voluntary thing, that it's not put upon them, that you have to do your turn. That they are supported, and have some kind of peer support, I don't feel that there is.



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That's my desk. That's where I go straight after breakfast club. That's all the paperwork. I work in a school completion programme, a Tusla funded organisation. If you're a young person who might be homeless but you are getting to school everyday, you're doing well in school keeping your head down you I suppose you might fall between the cracks.

I talked to staff and community workers and lots of people I work with and I got a lot of feedback about what the issues were. The first thing was I found out lots I didn't know that was going on around Jobstown, and it was a lot of just community initiatives, just people themselves, not organisations or government bodies. Just people wanting

to do something, somebody told me about a man who owns a business who opened up a playcentre. He wasn't funded. Just a decision he made.

On the other side of that is what came up when I spoke to the staff in my place about it, about what the issues were, while they spoke about that side of things, the humanity and wanting to volunteer and give back and support, on the other side of that is the negative, the kind of negative of it is that in the bigger picture many people profit and benefit from homelessness and the housing crisis. For some people this is almost a good thing, there's a profit there. From every circumstance there's always somebody who is going to take advantage of it.

Fragmented services – confused system



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That picture is at Heuston station, that shows the transport networks and when I think of homelessness, the services, the providers and the people that are working towards eradicating homelessness, it's just a maze, it's just something that even I as a professional who is trying to specialise in homelessness, everyday there's something that I am like, I never knew that resource was happening. There's a lot of information out there that I would call noise and it's just a difficult system to navigate.

If I start just from the process of becoming homeless there are just so many strands to it that you almost need to work in the local authority to understand who is entitled, who is not and what you can get from accessing homelessness itself. Then in terms of the amount of services when you talk about family hubs, private

emergency accommodation, one night only accommodation, self-accommodation. It's just the amount of information in the service providers you just find that there are an enormous number of people that are providing services but nobody knows who is doing what.

In most instances people would know about Focus Ireland, Sophia Housing, Peter McVerry but the amount of people in organisations out there doing their own thing, being on the streets, having access to children, putting children at risk and maybe without even being Garda-vetted I just thought that represented the amount of noise for families, for professionals and for anybody who is trying to make sense of what is going on in the homelessness world.



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For this particular one it represents my experience of staff working in Parkgate Hall, they're dedicated individuals and my view is that they do try their best, they get in at 7.30. There is an office on the ground floor called the central placements and they are ringing the hotels, asking how many beds they have and trying to place families, to match families with the best available accommodation. When you see them they are really doing their best in a system that is probably just designed not to support the amount of effort or even acknowledge the amount of work they put in. They are just working with that cohort of people who would find it difficult to access psychiatric services in a particular area and they do outreach work, all the work for mental health, it is outreach work.

They have a dedicated team that try to ensure that every child has public health services, that every person has public health services so when I think of Parkgate Hall I see the one stop shop they were thinking of and of workers in terms of individual dedication that is in existence. It's just quite unfortunate that all the effort that people in Parkgate Hall put in does not result in reducing the number of people who experience homelessness or prevent it from happening.

They have a team that is dedicated to preventing families going into homelessness but it is not really translating into actual results or alleviating homelessness or reducing the number of children and families who are homeless.



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This is my filing cabinet at work and this file is full of all the good work that we are doing. It can be stressful – it's something that can take a lot of time in that we're working with families, we have to document everything and to make sure that our work is not lost and that it can be reflected at the end of the day. People need to know that we have a paper trail of the work we're doing as a Family Support Practitioner in conjunction with other colleagues that are supporting families that are homeless.

One of the things in that file relates to a particular family with seven children, and the mother was asked to bring documents from home, from Nigeria, which she found difficult. She was also asked to bring a proof/stamp of her coming to Ireland, and she had come fifteen years ago. Without my support she wouldn't have been able to get those documents and she wouldn't have been able to be registered homeless. Luckily, she got a house with her children.

There are a lot of things we do that are not in the remit of our work but we know that without doing them, this family would just be there and in terms of the Council, they want what they want – otherwise they tell you that you cannot be on the list. So the only way you can be on the list is to meet all the criteria, get letters from your home country that you don't own any property before they can even start listening to you or put your name on the system.

I believe that we need more support for migrant families, we need more training for staff – there are some cultural needs, you know it's very difficult for workers outside of that culture to understand. It's something that needs to be recognised, we need specific support for migrants who are going through homelessness because their needs are practically doubled. They will go through more trauma, more stress if this cultural support is not in place.

The Geese have arrived.

Each year these guys arrive for their winter holidays from colder parts of the world. Their ability to navigate such long distances to get to the Irish coastline is something to be marvelled at. Watching them arrive, following their flight constructions as they move across the skies in large V formations with one bird in the lead and the others trailing behind in two diverging lines. Leadership changing as needs arise. This formation makes it easier for the geese to maintain visual contact with each other and communicate, which helps navigation and flock cohesion. The gaggle working as a team looking after and out for each other get to their intended destination together. This reminds me of the benefits of co working and cross sectoral cooperation whilst working with families experiencing homelessness. The systems and challenges faced by families can be so complex with a range of services involved. Without this cohesion between services families are at increased risk of getting lost within the sector and falling through many nets. Cohesion is also needed at political level to address both the current housing crisis and the potential future fallout for children and parents.

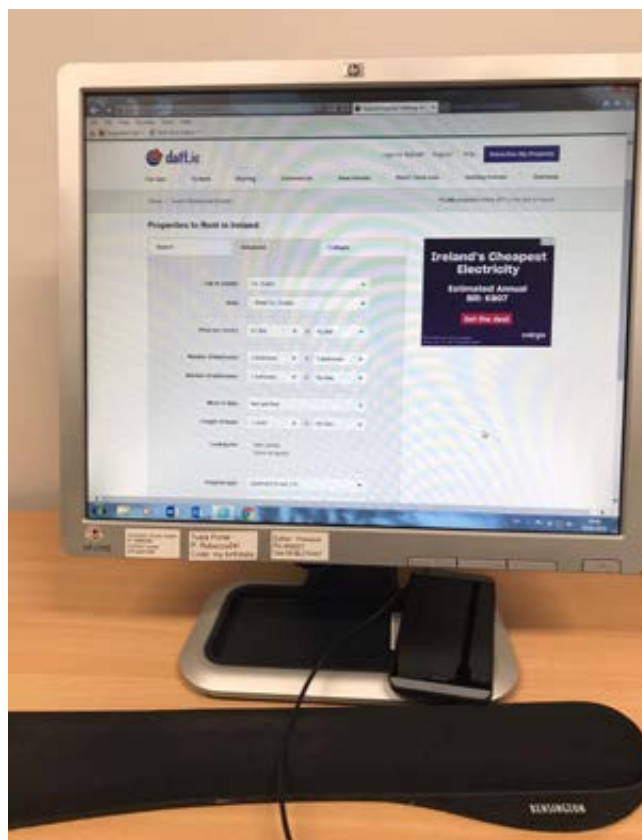


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The weather conditions have been brought up before, my uncle owns a tyre fitting company and so we took a car up the road, with the winter tyres on, to take some photos. Obviously, it's a lovely photo, we get to experience snow in a much different way than the way that homeless families get to experience it. My photos are coming from a privileged side where it's like we're getting to enjoy all these different things whereas we know that the clients we're working with aren't necessarily enjoying it. It dawned on me as well, my uncle owns the tyre company, I can go there straight away, I can get tyres fitted. If I need anything done it's done straight away and the ease of access to whatever I need in that sense. Whereas in my work I can give you a 5% piece of information, then you need to go somewhere else, then you need to go somewhere else and it's that kind of like, it's so easy for us to secure something I need because of relations that I have or money which just make things a hell of a lot easier.



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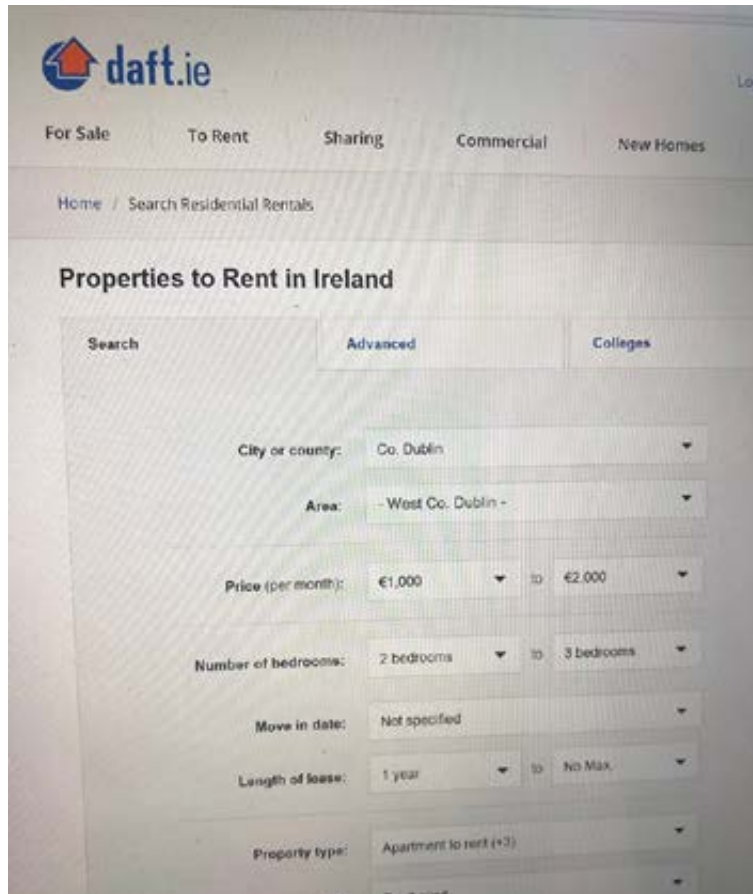
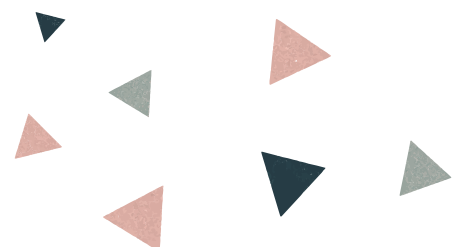
This photograph represents the importance of mobile phones and technology for families. Working with young vulnerable families who become homeless, our catchment area is Dublin South West. When families become homeless especially if they are self-accommodating or if there isn't availability within Tallaght if they can be placed outside our catchment area our main way of contacting them is on the phone. It is the most vulnerable families that become homeless and then something happens, they drop their mobile phone, they break it and they have no money and we lose contact with them.

And they're the cases that I actually feel physically stressed by, nauseated at times, you get a feeling in the pit of your stomach, I haven't heard from X since last Tuesday. Ringing. Phone not in use. Phone not in use. You're getting frantic and you go to the last place they have been. They have moved on. You can't find where they are in the system. You can't go to the family and ask have you heard from your daughter because they are over 18. And they have with them a child under two who you are worried about. We know that young people have the capacity to parent if they have the right environment in which to parent. Babies end up being in buggies all day, with soothers in their mouths, they end up with bottles in their mouth, they end up with chronic nappy rash, they're cold and their mummies and daddies don't want that for them.

But when you lose contact with them there is that anxiety. They want a better life for them but they are driven into homelessness. and they can turn up a week later and they may be fine or they may have had a really horrendous experience. The power of the phone.

Two years ago, one summer, one of my young parents had a legally ended tenancy in an apartment in Tallaght. The apartment was repossessed and because she had been placed here after coming out of care, her original care placement had been in Dun Laoghaire Rathdown she had to go back to the DLRD system so that was my first experience outside of SDCC who are very well organised. The day she was moving out. I was with her there that day. The stress she experienced and the stress her baby experienced that day and I'm on my mobile phone on the Dublin City Council line, I'm number 14 in the line, I'm number 13 and then I'm number 2 and then it's 59 minutes and what happens, your mobile phone cuts off. And you're number two on the list because mobile phones only stay connected for 59 minutes and I never knew that until that happened and that must have happened 4 times to me that day. There were days when we were on hold from the office for 2 and a half hours. What we realised was that any family that we were working with who were homeless needed access to a landline, a mobile phone is absolutely useless.

Impact of Policy



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I spend hours and hours of my life on www.daft.ie ...when I first started my job, 12 or 13 years ago you'd log on and Tallaght would come up and there could be 40/50/60 properties and everybody wanted to take somebody on rent allowance. It was so easy to get accommodation. I logged on this week and there was nothing available in Tallaght. I changed my search to South County Dublin and there was nothing available at all. There were no rental properties available at all. I put the highest HAP limit in and nothing came up.

But it struck me the amount of time and support both myself and my team have done to help those young people at risk at becoming homeless to actually support them into something more stable before they become homeless and the time and the resources that takes and we have done it because of the welfare of the children and we know what impacts are caused on children and

families that become homeless and when young families are living in somebody else's family home and there's conflict in the home, there's family violence....it really struck me the difference between when I started my job and now. When I started my job if a young teenager said to me I want to move out of home we'd do the four month moving out of home program, when we believe they could budget, when we believe they could go down to the council, when we believe they could get all their paperwork done then we would support them in the next steps. And now it is completely turned on its head. There is a huge difference between then and now.

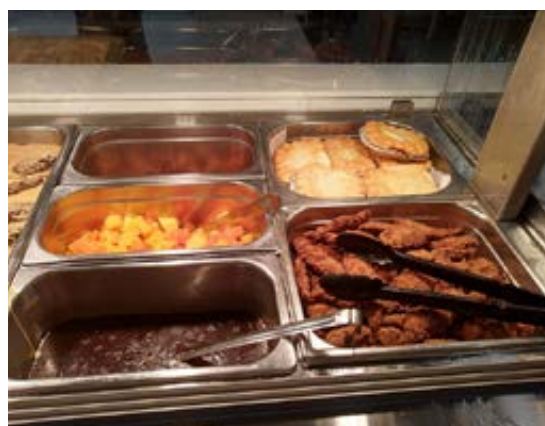
I am just struck by the difference in the availability of properties and how much time as professionals we spend on this, my expertise is in child development, in parenting, in family support and how much time I spend in front of the computer doing things like this.



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This is the view from the office window. When I first started out I had a view of the Dublin mountains. This to me is the biggest folly, the biggest waste of money of the boom. It had just started when we went into recession. Just as we went into the recession, we found that the housing crisis was beginning to bite in. We started to see young people going towards homelessness rather than being able to support them in a supported planned move out of home where we would have got successful outcomes where our young families would start off and be able to maintain their own family home and parent. So up went the Newlands flyover. The biggest folly. All this does is push the traffic through the Red Cow to the Kylemore junction where it backs up again all the way back to Rathcoole. It's symbolic because the frustration of trying to get to work through the roadworks. It's a symbol about when somebody at policy level makes a decision about traffic environment that it absolutely by-passes everyone. How many houses could have been built up on the land beside Brookfield for the cost of this?

We provide a continental breakfast and a hot meal every evening from 4:30-6:00. That's the biggest social gathering for the families, there'd be a lot of interaction around them. They queue up outside the door to come in. We're very proud of the food we provide, it's cooked fresh daily by qualified chefs, all our chicken is halal. My issue with it though is that in our hub, no families pay rent, they get the facility for free and don't pay for any of the food. My issue isn't from a cost perspective, we're happy to provide the food, it's from a skills perspective. Some of these families have no household budgeting skills and we're not really empowering them to be successful when they move on. I think it's disempowering people, and it's setting them up to fail when they move on. Again it's policy, someone made the decision somewhere and I don't think it was the right decision. I don't think they should pay rent, but I think if there was a contribution at source from every family when they came in and that was ring-fenced and handed back to them at the end to help them move into their new home, and you could have household budgeting workshops while they are in the service. In our service unfortunately our job is just to provide the facility ... food, safety, security, that's where our role stops.



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That's my bird feeder, it's a luxury in a back garden. Last Saturday morning I was looking at this pretty little house blowing in the wind hanging by a thread and I actually thought for a lot of families in the private rental sector they are literally a landlord's decision away from eviction. For a lot of people working in the private sector if they lose their job they could be literally three months away from being asked to move out. For people who own their own home who lose their job or their job circumstances change, they can go into mortgage arrears and actually the hidden homeless are everywhere. When I think of hidden homeless I think of three or four families living in one home. It's a massive problem and a lot of people are hanging by a thread.

Handing over a set of keys to a person or family is the nice side of the job especially when they have come from a hostel or hotel/B&B. It makes them so happy to have their own set of keys and front door. The children are always so excited about having their own space and designing their own bedroom.



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Governmental and societal responses to homelessness – role of empathy and compassion



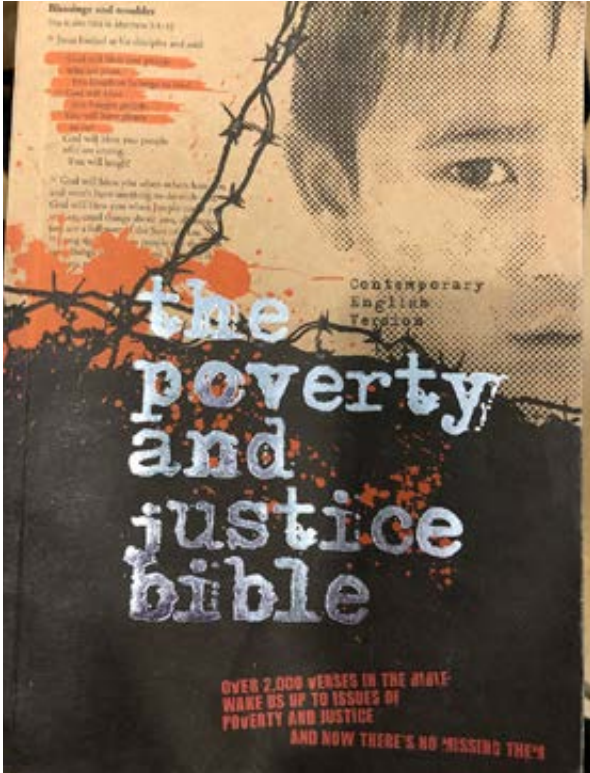
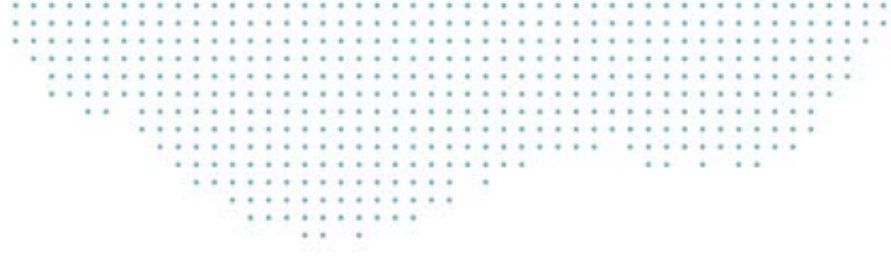
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This first one is an old crib, and it has written “remember the roof over His head that the hotel, as in the inn provided, was temporary”. The second one is our new crib which is African, we’ve been blessed by immigrants, and you can see I’ve written “by the time the wise men arrived he was housed”.



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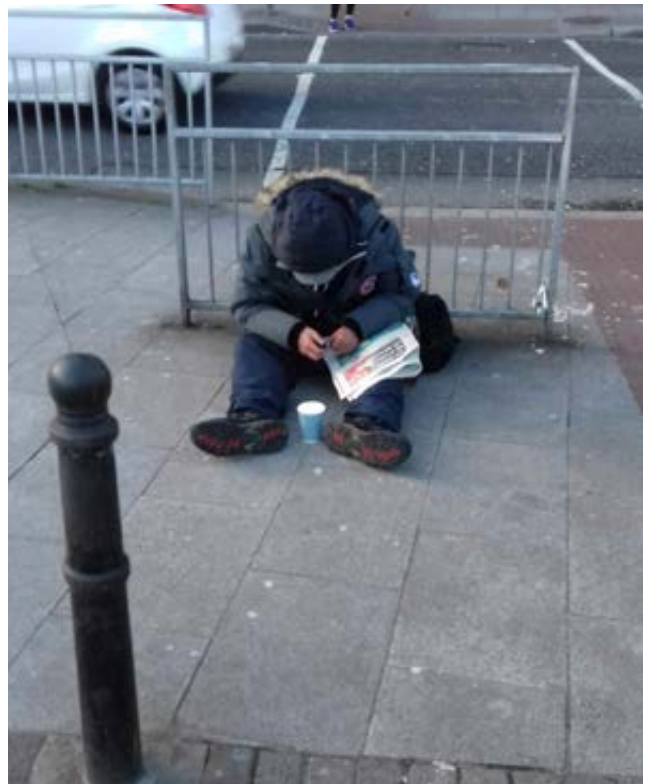
This is inside Christchurch Cathedral – it’s the Homeless Jesus, and you can see his feet have the nail holes. You know that idea that you could be entertaining angels, in Christianity we claim that you could be entertaining Jesus. He has no hands or feet but ours.



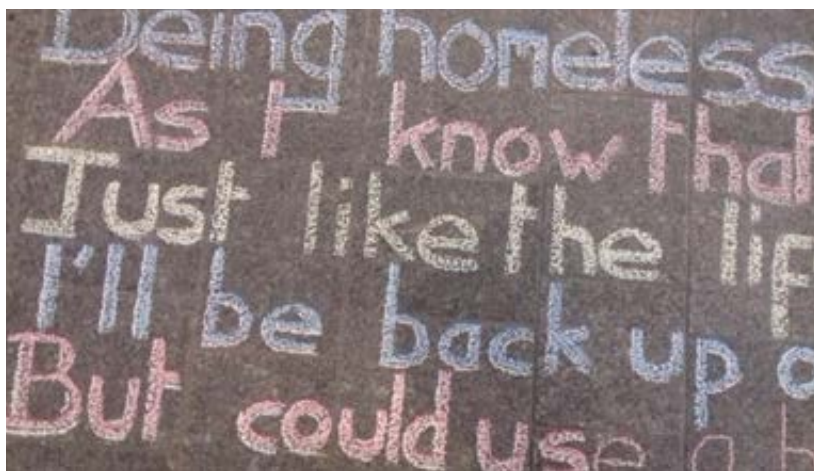
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I know in this country one could be forgiven to think that in the Bible He was always talking about sex, far from it. This is the Poverty and Justice Bible, where they have highlighted everything that refers to poverty and justice, and nearly every second page is highlighted. Jesus was there with the people at the bottom of society, that's who he knocked around with, that's who he stood up for. I'm still reeling from the man on Prime Time who said homelessness was normal – the heartlessness of it.

Down and out in Tallaght. This man is there every Sunday.



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This was written on Grafton Street by a girl who is experiencing homelessness, it was beautifully written and people were walking over it.

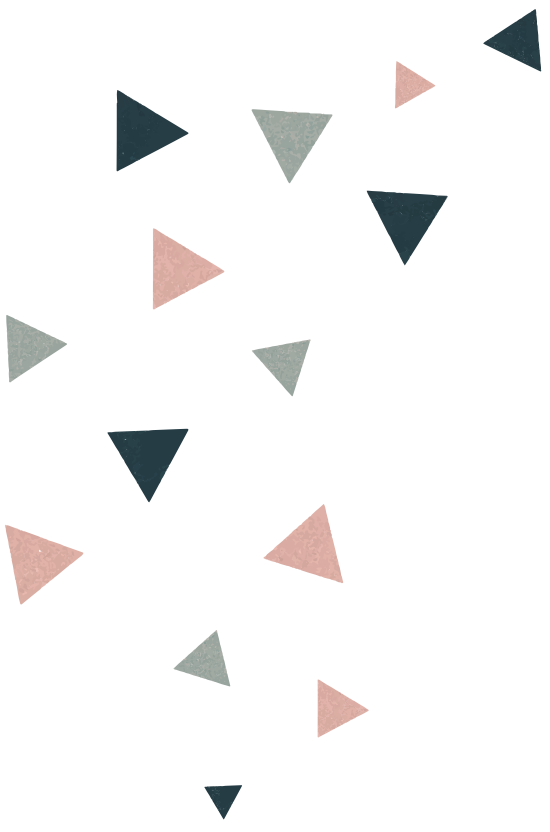
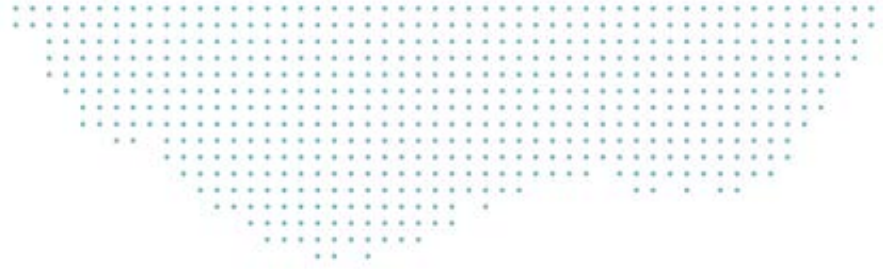
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Outside of work I do a lot of sport, I play rugby, I play Gaelic and I go to the gym quite a bit and those are really really big things for me in my life, and whenever I'm talking to clients who are zooming here there and everywhere – they're collecting children they're trying to secure accommodation, sport and that kind of thing doesn't really come into their life. For me it's such a priority in my life.

Then on the rugby laces you have there, the rainbow laces which is part of a campaign for LGBT people in sport which came about quite recently because a Welsh international rugby player who is openly gay was attacked on a night out and the International rugby community came together and made big, huge deal of it. There were international teams wearing the rainbow laces and it really kind of made a big deal out of it but I was thinking, one person gets hit on a night out and this whole campaign came from it. Yet we're sitting with possibly 10,000 people homeless and what sort of campaign is being done about that?. Because people are not seen and don't have a voice, it's almost shoved to one side.



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5. Recommendations

A variety of reports have identified improvements which could be made to the overall homeless services for children and their families who find themselves in this most vulnerable of positions.²⁴ For example, a recent report conducted on behalf of the Children's Rights Alliance (Scanlon and McKenna, 2018) identified a series of considerations which could be put in place to better support families experiencing homelessness, including more adequate emergency accommodation, better school supports and access to appropriate welfare payments.²⁵

The aim of this particular project is not to rehash what other reports have found, or to make a long series of policy recommendations to add to the pre-existing lists. The aim is to use innovative participatory research methods which give voice to marginalised groups, and which allow the voices of the 'experts' in this field – both those experiencing homelessness, and those working alongside them attempting to support them through the process on a day to day basis to have their say. As such, the focus of this kind of project is the implementation of the recommendations which are often already well-known and in many cases well-documented, but which are not being implemented within the system.

Thus the key recommendation from this project is that the voice of the participants be given a chance to be heard via in this first instance a public exhibition of their photographs. The materials produced as part of this project aim to be easily accessible and deeply impactful, so that they can educate us all on the reality of experiencing homelessness as a child and as a family – the challenges, the road-blocks, the supports that work, and the service improvements which could be beneficial. The methodologies used within this project tap into the understanding that empathy and feelings are at the heart of implementation of change, and that people (including policy-makers) are influenced by information that makes them feel, rather than information that just makes them think.²⁶ This project has aimed to do both.

All of that notwithstanding, the following are a series of recommendations which emerged directly from participants within this project – they have been grouped into what we consider to be shorter-term practical solutions which families experiencing homelessness would benefit from, and longer-term policy recommendations.

5.1 Practical short-term solutions

Access to cooking and laundry facilities for families experiencing homelessness

Kitchens in local community centres could be made available for use by families at certain times to allow families who do not have access to cooking facilities to prepare meals and use laundry facilities:

In terms of services that we might need, I thought that it would be nice to have some community space to cook. Maybe in the community centre, to just open the kitchens for even an hour or half an hour so I could cook a decent meal without having to rely on other people. An open service, or even like a space where you could just come in and do your laundry or something like that. That would be something that would be really helpful. (Eva)

Assistance with securing accommodation

More support in accessing accommodation, particularly the competitive private rental market, is required by families experiencing homelessness and who have been directed to the HAP scheme as a solution to their homelessness. The Placefinder service should be advertised to them, and expanded to support them in finding accommodation.²⁷

Multiple and frequent phone calls, being put on hold for lengthy periods, and phone lines being cut off if on-hold for over an hour all add to communication difficulties. "Hot lines" could be provided specifically to access housing services in public areas such as libraries, health clinics and Garda stations.

Appropriate emergency accommodation services

Emergency accommodation services experienced by the families within this project include B&Bs, Hotels, Hostels and short-let holiday homes. These accommodations may be appropriate for a one or two night stay in an 'emergency' but when an 'emergency' becomes weeks and months long, this accommodation is not fit for purpose. This kind of emergency accommodation should only be used for limited periods (we recommend a maximum stay of three nights in such accommodation) due to the lack of cooking and laundry facilities, and overall space requirements of families.

More appropriate accommodation is required for families required to self-accommodate for extended periods of time, and this form of provision should be phased out totally for families.

Accommodation should be allocated with the needs of the family, and particularly the children, at the forefront. With this end in mind, school location should also be a key influencing factor, to minimise the disruption to a child's education, peer-support networks, and overall routine.

From a public health perspective, keeping families local if they are self-accommodating, rather than having them use accommodation around the city, is recommended by the service provider group;

I would just like a co-ordinated approach to keep families in SDCC and not have to do the night-by-night, self-accommodate outside of Dublin South West. I don't think that would cost money, I just think that's co-ordination between the three councils. (May)

Support navigating the system

The experience of homelessness is a distressing and often traumatic event within a person's life. When families experience homelessness there is a deep emotional impact, and they need support in navigating a complex, fragmented and often confusing homeless service support system. Rather than being provided with practical support in terms of lists of emergency accommodations to ring, it would be

beneficial for families to have someone to help them source that accommodation and someone to talk to as they navigate the complex system at a very vulnerable time. Local authority staff taking more of a mentoring role, and also being assigned cases so that there is follow through, regular engagement and the development of a relationship, would all be helpful.

School transportation for children experiencing homelessness

One of the issues that needs to be explored further is the provision of transport to school for children experiencing homelessness. We know that many families go to great lengths to ensure their children get to school despite often having to negotiate long distances from homeless accommodation to schools. While in Dublin families can access a Leap Card which can be a vital support, it is not the answer in all circumstances. Alternative supports need to be considered, preferably in consultation with families, to understand their preferences and needs in this area. The recommendation above, whereby the needs of children centrally inform accommodation decisions would address this.

5.2 Longer-term policy approaches

Homelessness recognised as both a public health and a child welfare issue:

Homelessness is a public health and welfare issue for children and families and should be recognised as such. The physical and mental health impact of homelessness on children and families is identified by both the parents and the service providers who participated within this study, and a co-ordinated, family-centred approach to supporting them is required. As one service provider states;

I think Homelessness should be recognised as a public health issue and possibly an Adverse Childhood Experience (ACE) because I think it is, and until we get to that stage I don't think we will get a co-ordinated approach across departments. (Zoe)

This consultation clearly indicated that families who are 'coping' with homelessness struggle to receive any support, as the thresholds for interventions are too high. The stresses, physical impact and psychological strain of being homeless all reduce resilience and a person's capacity to think and act strategically. Positive, proactive engagement from support agencies should be the norm, rather than a reactive system which acts when families fail or fall apart.

Allied to this is the suggestion that as part of government policy, there needs to be a commitment that no children/families will be homeless for longer than a specifically-stated period:

One big issue is time – no one has put their head above the parapet and said this is the maximum amount of time a family should be homeless before it impacts adversely on the children. We've heard they are missing milestones already but no one has said ok, you can't be more than six months homeless. Life is finite...the amount of time children are spending in homeless services needs to be minimised. (John)

Minimisation of bureaucracy

A compassionate balanced approach needs to be struck between ensuring the right people get the right help within the reality of a resource-constrained system. Requiring families to prove their homelessness can create barriers to some of the most vulnerable in receiving essential support. Throughout the system, a common-sense approach to providing care to the people that need it should not be undermined by policies and procedures which many within this project found unhelpful (both service users and service providers).

Specialised training for staff working in the HSU of the Council

A consistent recommendation is that staff who work with families presenting as homeless in council HSU's be given training in dealing with vulnerable, distressed groups who are potentially suffering from trauma.

Often the HSU staff are the first port of call for people who find themselves in crisis and thus they require adequate training in the skills needed to provide compassionate customer service to people in these circumstances. Staff in the HSU's also require adequate practical and emotional support in working at the coalface with families experiencing this kind of distress:

They are overwhelmed and they have no training. Each council as you appreciate there's sections and staff are rotated within the sections, and I don't know what training if any, which appears to be none, that they get if working in the homelessness unit. (May)

This training might include managing difficult conversations, demonstrating empathy and de-escalating conflict. Other important aspects would relate to knowledge of local services and sectors in order to effectively sign-post. In addition, a space for staff to safely process their own frustrations and sense of hopelessness is vital. A significant difficulty is that there is not a key-working service available to people who are self-accommodating, therefore, it is difficult for people in this position to avail of co-ordinated support.

Support for staff in other areas of service-provision

Due to the often complex needs of families who are experiencing homelessness, holistic interventions which take into consideration their often precarious, stressful and challenging circumstances need to be provided. Staff who are attempting to support families in one area of their lives (for example Educational Welfare Officers who are tasked with ensuring children are supported in attending school) often find themselves unable to provide the holistic support that families experiencing homelessness need. It is therefore important that staff are provided with the supervision and support to identify what is in the best interests of the child and how best to support parents in very challenging and complex circumstances.

Culturally-sensitive service provision

Extra support is required to assist families from the migrant community who are experiencing homelessness. Participants feel that there is sometimes a lack of cultural-awareness, and of the required language/translation skills to support migrant families within the system. These families can find navigation of the already confusing and fragmented homeless system especially confusing:

From the family support perspective with Tusla, we have not only families from the Irish community but also families from the migrant community, Romania, Africa..... Family support workers help families attend meetings etc. "Message delivered is not always message received", because people out of anxiety, stress might not come across positively to the person on the other side. What they are communicating to them might be taken differently than it is meant..so that is where our job comes in.there should be a support service that homeless people can actually see, they can go there and be supported in getting some of this accommodation....you have to go the extra mile to support these families, because they can't do it on their own. So it's very very important that the service providers and also the people on the other end that are supporting the homeless families, get the point. People will always remember how you made them feel, and being homeless is very very stressful. (Abi)

Cohesive service provision – holistic family-centred responses

Participants across the board highlight the fragmented, often confusing nature of homeless service provision in Dublin. Participants recommend that there be more collaboration, more cohesion and more person-centeredness within the system. Less reliance on phone-interactions with families experiencing homelessness, and more face-to-face engagement and support for people who find themselves and their children in these very vulnerable situations.

A case-worker system at an early point, similar to that utilised by some Social Work Duty Teams, would enable better tracking, recognition of needs, and linkage with appropriate supports. Case workers would need knowledge of the sector and area in order to sign-post service users appropriately, and to offer a level of hand-holding through this process.

Clearly, introducing greater levels of engagement and support for families in homelessness has implications for resource provision. This is challenging for local authorities and housing agencies, but if children's rights are to be regarded as paramount, creative solutions will need to be found and possibly hard decisions made.





About the Authors

Dr. Maria Quinlan is a collaborating research fellow at University College Dublin (UCD), and Head of Research at the Institute of Integrative Counselling and Psychotherapy (IICP). Maria is a sociologist who specialises in the use of creative, person-centred research methods which aim to facilitate people in sharing their lived experience. She is passionate about putting the participant at the centre of the research process and using methods which aim to empower people to become co-researchers and to share their stories. Maria is a multidisciplinary researcher who uses a variety of innovative participatory action research methodologies, including photovoice and video-ethnography to explore how people experience their world. She was formerly Research Lead at the Applied Research for Connected Health Centre in UCD, where her research focused on the implementation of person and family-centred healthcare, with a particular emphasis on service quality improvement methods. She is the founder of the Pink Flower Company, a research consultancy which focuses on creating actionable insight regarding issues of equality and inclusion.

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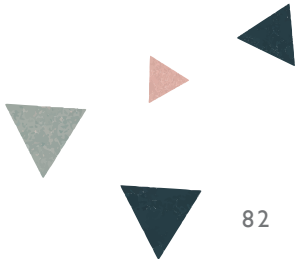
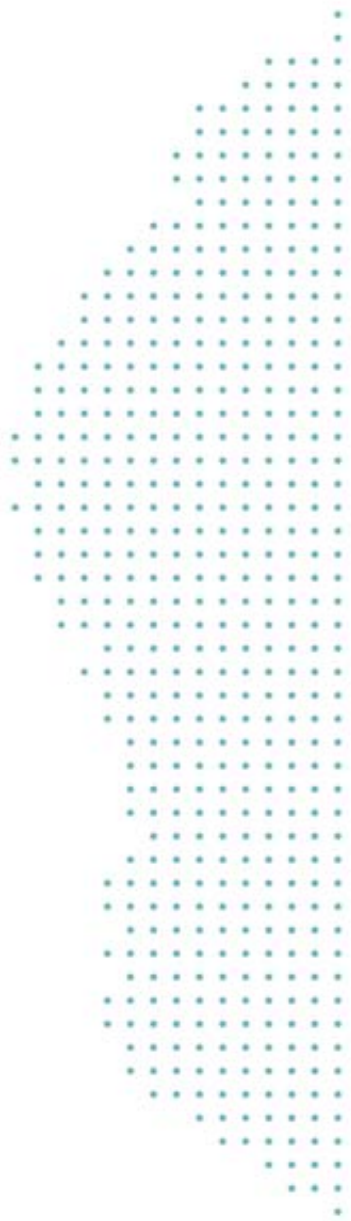


Patrick Bolger is a writer and visual artist who has over twenty years' experience in the production of still and moving images. Patrick works with a range of high-profile national and international clients on photography and documentary projects. His work is ethnographically-informed, embedding qualitative life-course interview methodology to explore the lived experience of participants within his projects. He has collaborated with Maria on a variety of research projects which use both photovoice and video-ethnography methodologies, facilitating group discussion and guiding participants in the use of visual methods to find their voice and tell their stories. Patrick places connections, authenticity and trust at the centre of all creative output.

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Acronyms

ACE: Adverse Childhood Experience

CAMHS: Child and Adolescent Mental Health Service

CDI: Childhood Development Initiative

CYPSC: Child and Young Peoples Services Committee

DRHE: Dublin Regional Homeless Executive

EBCD: Experience Based Co-Design

HAP: Housing Assistance Payment

HCDT: Human Centred Design Thinking

NHS: National Health Service

SDCC: South Dublin County Council

QCBI: Quality and Capacity Building Initiative

UCD: University College Dublin

Appendix I

Terms of Reference

Overall Purpose:

To guide and inform the research project, and maximise its application.

Specific Tasks:

- To meet monthly for the duration of the project;
- To facilitate access to stakeholders and participants;
- To receive, review and feedback on reports provided;
- To ensure linkages with other developments and initiatives are maximised;
- To trouble-shoot, minimise barriers and support the identification of solutions;
- To promote the initiative, advise on policy and system alignment and support plans for replication and sustainability.

CDI will:

- Provide the financial support and reporting, within the context of the Tusla Service Level Agreement;
- Contact the external support to drive the project
- Inform the CYPSC of progress, issues arising and recommendations.

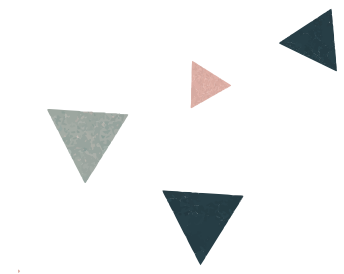
Name	Role	Organisation
Jean Rafter	Education Welfare Service	Tusla
Justin Parkes	Primary Care	HSE
Niamh Milliken	Social Worker	SDCC
Kerri Smith	Regional Director	Barnardos
Deborah Chemere	Homeless Liaison Officer	Tusla
Jackie Austen	A/D PHN	HSE
Peter O'Neil	Family Support	Tusla
Caroline Sheehan (minutes only)	PPFS Manager	Tusla
Leanne Clooney	Project Manager	Sophia Housing
Marian Quinn	CEO (Chair of Working Group)	CDI

Members may be co-opted as required.

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Design and cover illustration by Erin McClure Design

I created this cover illustration using watercolour and ink. A number of little houses line up along abstract streets, surrounded by heart and raindrop marks.

The dark, defined houses represent already-existing homes. The faded, transparent houses represent homes which are merely imagined or dreamed of. The clustered hearts bordering the image represent communities, and how we are all the same, we all have a heart which beats. The splash marks are suggestive of both tears and also heavy raindrops - the harsh, outdoor elements that those without a home know only too well.

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