

Longitudinal Research and the Evaluation of Homelessness

Interventions in the UK

Joan Smith and Ann O'Sullivan
Centre for Housing and Community Research
Cities Institute
London Metropolitan University.

1. Introduction: 'Follow up' and Tracking Studies in the UK

In the UK general interest in tracking studies has increased as the volume of social interventions has grown under the two Labour Governments (1997 - 2004 ongoing). This is true in relation to interventions designed to move people from unemployment into work (New Deal), to interventions designed to increase the education and training participation of young people and in relation to homelessness¹. In virtually every field of social intervention there has been an increase in interest in the outcomes of those interventions. This interest has led to government reports, or government commissioned reports on the use of and design of tracking studies.

In 1999 the Office of National Statistics reviewed longitudinal data sources and distinguished between administrative data and social survey data. Longitudinal surveys of children born in a particular week have a long history in the UK – with cohorts being drawn in 1946, 1958 and 1970. These are robust surveys following all children born in one week in relation to their educational, medical and family histories. Data from the 1958 cohort has been used to investigate both deprivation among children and how young people leave home – however there is evidence that among the quarter of the family that are untraced many are from vulnerable populations. The largest longitudinal survey of youth is the Youth Cohort Survey which tracks each cohort of young people for two years but it has low response rates and vulnerable young people and young people from minority ethnic groups are under-represented.

The British government has invested in a long - term panel survey – the British Household Panel Survey. The BHPS under its director Jay Gershuny is committed to providing an

¹ This issue has become particularly important for homeless agencies in the UK with the development of new funding streams. Supporting People funding has provided greatly increased funding for agencies but this Government initiative now requires daily and weekly monitoring of bed use, tenancy terminations etc.

empirical basis for the study of social change. It's database is a prospective study of 3,000 households and all their members (with replacement households). Gershuny has argued that only extensive dynamic data can provide extensive insight into the processes of social change (1998). Data from the BHPS has been used to track a range of changes in British households, particularly in relation to family structure and to moves into and out of employment and may be used to study the move into and out of homelessness among some families. ²

Given Government concerns over the generation that has been described as NEET (Not in Employment, Education or Training) there has been considerable interest in tracking vulnerable young people (Green et al, 2001 and Canny et al 2001) through administrative records, as well as through surveys, and these records include databases developed through the education/Connexions service³, Youth Offending Teams and the Employment Service (Green et al, 2001)

Other government reviews of tracking studies in the field of careers/education have made a key distinction in relation to the *purpose* of the tracking study between 'historical' tracking (tracking the progress of individual young people) and 'interventionist tracking' (tracking in order to work with young people in priority groups (Green et al, 2001). A further key distinction has also been made between qualitative and quantitative studies leading to the report on '*Longitudinal Qualitative Research Approaches in Evaluation Studies*'; which was written for the Department of Work and Pensions by the National Centre for Social Research (Molloy et al, 200x).

Therefore in the general literature on longitudinal studies three distinctions have been made:

- Studies based on administrative or survey data,
- Studies taking a Historical or Interventionist approach
- Studies using Qualitative or Quantitative methodology.

2. Follow-up/Tracking Studies of Homeless People in the UK

In the UK 'tracking' studies in the field of homelessness have been undertaken in order to answer particular policy questions in both the mid 1990s and more recently from 2000. They have largely been 'follow up' studies that looked at the pathways taken by

² In a pilot study of its value in relation to studies of homelessness incidents among young people, seven cohorts of 16-25 year olds were used by our research unit to identify numbers of young people that experience eviction from independent housing, (CHCR, 2000, Unpublished).

³ Concern over young people being excluded from society has led to a new youth service has been established in the UK called Connexions whose Personal Advisors are particularly focussed on the one tenth of young people who are already disengaged, and the one tenth of young people at risk of disengagement.

homeless people after resettlement or re-housing, in order to see the outcomes of particular policy decisions (Anderson and Tulloch, 2000). Studies range in size from case studies of particular agencies, for example Vincent et al (1995), a study of the closure of one Resettlement Unit that housed single men and involved follow up interviews with 17 ex-residents, through to qualitative studies of resettlement outcomes of homeless people from more than one agency (Crane and Warner, 2002), through to a statistically robust study of homeless applicants across 9 local authorities in England undertaken by the Department of the Environment (O'Callaghan and Dominion, 1996).

There has been a recent review of tracking studies in the field of homelessness in the UK: '*Tracking Homelessness: A feasibility Study*' (Pickering et al, 2003). This review was written as a scoping study undertaken for the Scottish Executive and therefore includes some studies specific to Scotland. Unlike the government reports that have made the three distinctions reported above, this report takes part of its orientation from the American sociologist Rossi (Housing Policy Debate, 1991, FannieMae, US) who distinguished between Full Prospective, Semi Retrospective and Full Retrospective tracking studies, classifying UK studies according to this distinction.

In this paper Table 1 follows the Pickering et al review by classifying existing UK studies in relation to the Rossi (1991) criteria but also classifies the studies in relation to the method used distinguishing between qualitative and quantitative survey methods and studies based on administrative data.

Full prospective studies follow a sample of people who are at risk of homelessness, of which there is one example in the UK (Stockley, 1993) and one long-term action research project that has generated a database on over 400 young people at risk of homelessness, living in eight London boroughs. However this action research project has now lost its funding (Safe in the City, 2000-2003) and it may only be possible to track the lives of half of the young people originally involved.

Semi retrospective studies follow already homeless people, gathering data on their past through retrospective interviews; examples in the UK include O'Callaghan and Dominion (1996), Craig et al (1996), both of which were successful larger semi-retrospective studies, and Fitzpatrick (2000) which was a qualitative study that followed 25 young homeless people. Crane and Warnes (2002) was a semi-retrospective study that was a survey of 64 homeless people and was designed to be interventionist rather than historical. The chief interest of the Crane and Warnes study was the process of resettling older homeless people and to this end 64 older homeless people who were resettled were followed for a period of two years.

Three questionnaires were used in the Crane and Warnes study, including one prior to resettlement and two when the older homeless person was living in their own home –

either in independent accommodation, sheltered accommodation, a shared house or a registered care home. They remained in touch with all 64 older single homeless people apart from those who died during the study. In all 61% were still housed at the end of the study and those living in sheltered accommodation were most likely to report being settled. Those living in independent accommodation were either likely to build new social contacts or be faced with loneliness. The most difficulties were experienced by those sharing with other tenants.

Full retrospective: Vincent et al (1995) was both a semi-prospective and full retrospective study in that 10 of their follow-up respondents had previously been interviewed while in the facility, and 7 had not. Full retrospective studies that find homeless people and interview them about their past experiences have been carried out by Worley and Smith (2000) and Rosengaard (2000).

Table 1. Studies in the UK that track homeless people by type and method of study (following Pickering et al, 2003)

Method	Full Prospective	Semi Retrospective	Full Retrospective
Quantitative		Craig (1996) O'Callaghan and Dominion (1996) Harding (2004)	
Qualitative	Stockley (1993) Crane and Warnes (2002)	Fitzpatrick (2000) Vincent et al (1995)	Vincent et al (1995) Rosengaard (2000) Worley and Smith (2001)
Administrative		Vincent et al (1995) Randall (1995) O'Callaghan and Dominion (1996)	Craig (1995, 1996)

The other way to classify UK tracking studies is to consider which homeless population was tracked by the study, and this is reported in Table 2. As explained previously in papers on the UK, homelessness legislation has created two groups of homeless people: statutory homeless (families with dependent children, older persons aged 60 years plus) and non-statutory homeless (single persons and those intentionally homeless). This pattern has changed with the legislation of 2002 which has added a duty to house young people aged 16-17 or from local authority care until age 20 years. Harding's study of re-housed 16-17 year olds in Newcastle-upon-Tyne is the first study to follow young people who have been rehoused under 2002 legislation. However, broadly rights

under homelessness legislation and the duty of local authorities to re-house or resettle remains different among different groups of homeless persons. ⁴

Table 2. Studies in the UK that track homeless people by type of homeless population

Method	Homeless Applicants to Local Authorities	Single Homeless – older or all ages	Single Homeless – young people	Rough Sleepers/ Street Homeless
Quantitative Survey	O’Callaghan and Dominion (1996) Harding (2004)		Craig T (1996) Harding (2004)	
Qualitative	Rosengaard (2002)	Vincent et al (1995) Stockley et al (1993) Crane and Warnes (2002)	Fitzpatrick (2000) Worley and Smith (2001)	Vincent et al (1995) Randall (1995)
Administrative	O’Callaghan and Dominion (1996)	Craig T (1995, 1996)	Safe in the City database. (2000-2003)	Randall (1995)

The development of the Rough Sleepers’ Initiative (RSI and then RSU) also led to a pathway into housing and support for the street homeless, again creating a distinction within the single homeless between the street homeless (principally older men aged late twenties through to forties and over) and other single homeless people.

One can describe the majority of ‘follow-up’ studies as using qualitative or quantitative methodologies.

⁴ Among the non-statutory single homeless many voluntary agencies developed services for particular homeless populations: for example, some agencies such as the Salvation Army have principally worked with older homeless men (and sometimes older women) providing up to half the hostel beds for this group. Other voluntary agencies have specialised in working with young people including YMCAs and YWCAs of which a high proportion of beds may be specified as being Supporting People beds i.e. providing accommodation for homeless young people. In different cities particularly voluntary agencies have also specialised. In general young people are classified as being aged between 16 and 25 years, although occasionally a particular YMCA may extend the age range to 34 years. The development of specialised agencies means that many studies in the UK are specifically of older single homeless people or young single homeless people.

3. The interventionist orientation of UK tracking/'follow-up' studies

Several writers have argued that there is a need for longitudinal research into homelessness to allow policy makers, researchers and those working in the field to better understand the processes by which people become homeless, and to better understand the processes by which people are helped out of homelessness by specific interventions. Therefore there is also a need to develop more robust methods of evaluating interventions that are designed to tackle the issue (Anderson & Tulloch 2000, Pawson et al 2003, Pickering et al 2003).

The strength of longitudinal studies is that they allow the researcher to identify those circumstances that lead to households or individuals moving into and out of homelessness. In general UK studies have sought to have an impact on homelessness policy or an impact on the practice of the agencies that have provided services to the homeless people that have been tracked.

Pathways into homelessness

In relation to the movement into homelessness, Stockley (1993) identified the issue of families in the armed forces and subsequent homelessness among members of the armed forces and their children; this finding was specific to the location of his study, in the South of England, but has influenced national policy. A more widespread finding was a relationship between homelessness and criminal conviction (and vice versa), and between homelessness and reconviction.

The Safe in the City project that identified young people at risk of homelessness coordinated prevention services for them in eight London boroughs has now closed for lack of funding. This was an ambitious project that would have been a full prospective study.

Pathways to Resettlement – older homeless people in hostel accommodation

The study undertaken by Vincent et al (1992-95, published 1995) followed the government decision to close the old 'Spikes', or Resettlement Units that provided Government direct access housing for single homeless men and redistribute that funding to homeless agencies run by the voluntary sector. This policy was based on the desire of government to withdraw from directly providing this type of accommodation and on an interpreted finding of *Single and Homeless* (Drake, 1981) that most hostel residents could be re-housed successfully in their own independent accommodation.

⁵The study '*Homeless Single Men: Roads to Resettlement?*' looked at the closure of one –

⁵ This finding was disputed by Vincent et al (1995) and others because Drake's study was based on data aggregated from seven areas in which many respondents were from hostels and advice centres different in kind from direct access accommodation. However Drake's finding fitted the whole move into community care

the Alverston Resettlement Unit, Derby - in 1992 and followed up the resettlement of its 62 residents.

The study of the resettlement of 62 Alverston residents was also partly a study of the resettlement of long-term street homeless. The Vincent study used case records stretching back over 410 residents to provide the context for their study and established 10 different 'patterns of stay' from these records. The records also provided evidence that a third of Alverston residents had been on the road for more than 10 years (particularly those aged over 60 years), although this information was no longer asked, whilst current information suggested that 30-50% of Alverston residents had been homeless for less than one year. It appeared that in 1991-2, the final year of operation, there had been a large increase in the number of 'first time' Alverston residents, up to 37% of all residents, suggesting a new group of homeless were emerging in UK society.

Vincent's study was based on 64 actively resettled of which 18 were resettled in one hostel in Derby, 12 in independent accommodation, 1 in sheltered accommodation and 9 in residential homes. Others were resettled in a range of hostel accommodation including 'dry houses' (5). Of the 17 follow up interviews 7 were undertaken with men who had moved into the one hostel in Derby (Hartington House), and others in other accommodation in Derby.

17 men remained in the accommodation in which they had been resettled. Of these, the hostel residents found it difficult in the new hostel because of mixing with younger people and missed the higher level of support they had had at Alverston, although they appreciated having single rooms rather than dormitories. (The Salvation Army has understood these lessons; retained hostel accommodation but improving the quality of accommodation for those living there.) Ex-Alverston residents who remained in their own accommodation had been given Community Care grants to help them with furniture and resettlement. They were happy with their accommodation because they felt they were too old to be on the road.

45 out of the 62 resettled Alverston residents had moved on before the one year follow up. All had left the hostel accommodation or dry houses to which they had been assigned and some had given up their tenancies (5) and some moved out of their residential homes. There were **two** conclusions of the Alverston study. First, the men who found it easiest to settle were those who were older and had spent longest in the Alverston Resettlement Unit. Second:

' ... success in resettlement is should be understood as the establishment of a home, which in turn requires the maintenance of a lifestyle compatible with

and away from large institutions. Alverston was an institution that was not only direct access but ran a farm and manufactured paving stones.

having a settled home. The main obstacles to the establishment of such a lifestyle are loneliness and boredom. The men who have stayed in their new places over overcome these problems in a variety of ways, but it is clear that the question of work or occupation is of central importance’.

Men who could not be engaged in employed occupations could be engaged as volunteers.

Additionally, it was also noted that although some received family type support mostly they were best living entirely alone although those with alcohol problems found it hard to manage their alcohol whilst living alone.

The most recent study of single homeless people is that by Crane and Warnes (2002) that followed, successfully, 64 homeless people who had been resettled in London, Leeds and Sheffield. Single homeless people that had received services from four agencies were followed as they were resettled in independent accommodation (13), sheltered accommodation (13), shared housing (22) and residential care homes (16). Only six of their respondents were aged under 30 and a further 12 aged under 40, a half were heavy drinkers and just under a third had mental health problems (Table 1: 21)⁶. A half of the interviewees had been previously re-housed but had become homeless again.

The study found that resettlement was associated with increasing contact with friends and relatives.

‘At the time of resettlement, just 5% socialised at least twice a week with relatives or friends. This increased to 23% after six months, and to 45% after 24 months’. (Crane and Warnes, 2002: 42)

These social contacts were associated with a reduction in feelings of depression, worry, pessimism, being unsettled and being dissatisfied with the accommodation at six months. The other important factor that decreased these feelings was whether the resettled person was occupied during the day (a similar finding as to Vincent, 1995). There was an overall decline in heavy drinking at six months.

At two years after resettlement 38 were still resettled (61%), 11 had abandoned their tenancy, 6 had been evicted and 7 had died. Only for two people was the outcome unknown. Tenancy failure was most common in the earlier months and this was due to the person being unsettled. Early tenancy failure was associated with a history of transience i.e. those who had been in four or more cities within the 12 months prior to resettlement. Tenancy failure that occurred after 16 months of resettlement was usually associated with inadequate accommodation and a perception by the homeless person that they would not be moved on to better accommodation in the future.

⁶ Where information in the written text differs from tabular data the tabular data has been accepted in preference.

This study has contributed to a system for evaluating outcomes developed by one of the agencies in the study.

Pathways to Resettlement – young homeless people

In 1994 a research group from St. Thomas' Hospital, led by Craig, used a range of validated measures (principally CIDI) with two samples: (i) 161 young homeless people drawn from two London agencies and (ii) 104 domiciled youth from a sample drawn from local GP surgeries. 107 young homeless people (67% of the first sample) were successfully re-interviewed one year later. Considering only the one-month prevalence rate the Craig study found slightly higher rates of substance abuse and substance dependence among the homeless population compared with the domiciled youth population (8% vs 7% substance abuse and 14% vs 9% substance dependency) but rates of mental illness that were nearly three times as high (22% vs 8%). The proportions of homeless youth with mental illness and substance abuse problems was 6% (vs 0% domiciled youth) the proportion with both mental illness and substance dependency was 12% (vs 2% domiciled youth)

Among the 67% of homeless interviewees who were re-interviewed a year later just over half (52%) were in fairly stable (6 months in the same place) or stable housing circumstances. Those in fairly stable or stable accommodation were more likely to be female, from Black or Asian ethnic groups, and with some educational achievement and with shorter histories of being homeless. Amongst all those followed up just over a half had no mental illness at both interviews and prior to interview (51%), 19% had been chronic throughout, 8% had a new onset and 22% had recovered, although 'recoveries were confined to subjects with less severe disorders, predominantly involving episodes of depression'. (Craig, 1996)

Fitzpatrick (1999, 2000) produced a typology of six pathways to youth homelessness through a semi-retrospective entry-exit qualitative study. A principle distinction was made between young people homeless in a local area and young people homeless in the city centre. Eight group interviews with young homeless people were undertaken and 25 biographical interviews in the City of Glasgow. The 25 young people were followed up one year after the biographical interviews. The main finding was that young people accommodated in housing projects in their local area made better progress than those accommodated in the city centre. She also thought that young women were less likely to live as hidden homeless and seek agency help than young men. She also found that independent accommodation was associated with improved relationships with family members. (This study can be described as historical rather than interventionist.)

Worley and Smith (2001) undertook a full retrospective study of residents who had previously lived in a West London Foyer. The respondents were found through existing

residents who had kept in touch with previous residents, a small group who had returned to volunteer at the Foyer, those who had returned to the street, and those who had been rehoused. The 40 respondents included 13 refugees and there were noted differences between the two groups. UK young people both had difficult family backgrounds and had basic skills/education needs. Asylum seekers had problems with English as a second language and additional support needs but did not have the same problems of family background and education. Overall the factors that were found to influence resettlement were: family background/ origins (refugees were more successful); educational attainment; level of support needs during their time at the Foyer; the availability of accommodation in their area of choice; their social networks; forming secure relationships or becoming a parent; gaining employment; and faith.

Harding (2004) undertook a quantitative survey of all 16-17 year olds rehoused in Newcastle upon Tyne (Harding, 2004). All young people who were rehoused were invited to join the study, but over half refused. Information was therefore gained on 145 young people from the housing agencies responsible for the permanent accommodation; of these 94 were interviewed at the first stage of the research, and 45 in a second interview, only three of whom were young men (Harding J, 2004 *Making it Happen*. Policy Press). (Because of the drop-out rate it is not possible to compare outcomes by gender.)

Harding discusses tenancy failure in relation to the inexperience of young people (young men need more support, young women need to be less confident – it was the ones who lacked confidence who succeeded because they understood the difficulties), structural factors such as inadequate benefit payments and whether or not they received informal support from friends and relatives. This survey confirmed the improvement in relationships with family that occurred when young people achieve independent accommodation (Jones, 1995; Fitzpatrick, 2000); a similar finding as with older single homeless people.

Pathways to Resettlement – street homeless/ rough sleepers

Another set of studies have also looked at the issue of resettlement for street homeless people – again from an interventionist perspective. Following Randall and Brown's scoping study of 5 different groups of single homeless people with resettlement needs for the voluntary agency, Crisis (1994), they published two reports on the work of the Rough Sleepers' Initiative in London, Phase 1 and Phase 2 (1995,1996). The 1995 study of Phase 1 analysed 200 case records (50 each from two resettlement agencies, and two outreach agencies), used data collected under the Street Monitor in London and interviewed 100 RSI clients waiting rehousing and 150 clients that had been housed through RSI. Its principal recommendation was for permanent housing with resettlement support on moving in and to prevent loss of tenancy.

The 1996 study evaluated Phase 2 of the RSI, and concentrated on potential/ existing RSI clients (375 interviews) but did include 13 interviews with people who had returned to the streets having been resettled under Phase 1 of the RSI. Their evaluation found that Phase 2 was an improvement on Phase 1, with more inter-agency co-operation, and co-operation with the mental health services. The studies by Randall and Brown and Vincent et al led to a robust debate in the UK over the fact that 'a house was not enough' and that ongoing social support was a necessity. The funding of floating support for homeless people moving out of hostel accommodation was a direct result of this study.⁷

As well as the Randall and Brown studies that was based on good quality agency data and a Street Monitor, there were also attempts in different areas to create estimates of rough sleeping that could have subsequently been used in a tracking study. The team from Cardiff University were funded to estimate the prevalence of rooflessness in Scotland over a six month period, and developed 'mark-recapture' methods in order to create such an estimate. It is a basic 'tracking' system in that it records people at first contact and re-records at second contact (Shaw, no date). These mark-recapture methods (also called capture – recapture) were also used within the National Health Service to establish numbers of homeless people (see below).

Pathways through Health Services - Mental Health Initiatives

Craig T et al (1995,1996) undertook a semi-retrospective evaluation of the Homeless Mentally Ill Initiative established in 1990 to work with homeless people in London with mental health problems. Researchers were attached to the London clinical teams established under HMII. Administrative information was collected on 2,175 referrals over the life of the project and 574 clients were followed over one year. Again this was a policy initiative through which clients were first offered shelter and benefits and then treatment. The aim was to move the clients from specialist treatment into mainstream NHS treatment. The finding of the report was that early preventative interventions were especially important and they identified three groups where preventative policies were particularly important: ex-prisoners, tenants who are in danger of losing their tenancy, and psychiatric patients who were homeless at the time of hospital admission.

One of the findings of the 1995 study was that the services had targeted the older homeless who were more visible and neglected young homeless people. Therefore Craig et al (1996) studied 161 young homeless people and succeeded in reinterviewing 107 a year later (67%).

⁷ A study by Gerard Lemos also discussed the problem of loneliness among single homeless people arguing for support in rebuilding social networks (Lemos, 2000).

One London study also attempted to **estimate** the number of homeless people through 'capture-recapture' methods using the National Health Service as a base. Fisher et al (1994) recorded 2150 contacts by 1640 homeless people and estimated an unobserved homeless population of 3293. This was based on a broad definition of homelessness including people placed in bed and breakfast, private rental accommodation, hostel accommodation or in hospitals or other institutions. They concluded that mental ill health was less prevalent among the unobserved than the observed.

However, the Fisher study broke with all the statistical assumptions made in the capture – recapture model i.e. the sample was not homogeneous, Westminster is an area with the most change in the homeless population, recontacts were not independent of first contact and it is doubtful whether all members of the population had less than zero probability of 'capture'.⁸

Pathways out of homelessness into social housing

The previous studies were designed to follow homeless people living in different circumstances (rough sleeping, hostel accommodation) who were either older single homeless or younger single homeless, or to estimate their numbers. The most statistically robust survey was one that was described in the previous paper to the Madrid Workshop on Point in time surveys (which see for a fuller description of this study). *The Study of Homeless Applicants* undertook a study of all homeless applicants to nine local authorities and therefore included families (including single parents) and single people. The nine areas included three London boroughs, three metropolitan districts, and three non-metropolitan districts. Of the 2,474 applicants, interviews were achieved with 61% although the response rate varied between 45% and 79% in different local authorities. Of applicants interviewed in the first round a second stage interview was completed with 68%. The non-response in both sweeps of this survey was due to an applicant having moved or their address being incomplete. It is therefore a point in time survey with a longitudinal element.

The purpose of the study was to compare the characteristics of those accepted as homeless, with those rejected, and to follow the two groups of applicants to find out what happened to those who were not accepted and those that were. The survey identified the reasons given for the homeless application being made (as reported in Madrid), the proportion of applicants who were single people applying as homeless (35%) and the proportion with children. It also reported the proportion of acceptances by area (as found in 1995) and this finding demonstrated the variability of the likelihood of a homeless application being accepted. In the London authorities 38% were accepted, in

⁸ Williams and Cheal (2000, 2001) have now discussed in more detail the use of this method to **estimate** numbers of homeless people based on their work in the South of England.

the other metropolitan authorities 59% were accepted and in the non-metropolitan authorities 46% were accepted.

Applicants were subsequently divided into three: those whose application for housing under the homeless legislation was accepted, those who were rejected and those who withdrew their application. Of those whose application was rejected 54% were rejected as not being in the priority need categories (i.e. with dependent children or an older person or with a health problem), and 34% as not being homeless. Overall nearly half of all rejections were of single person applicants. Only 28% of single applicants were accepted. Household type (i.e. not being responsible for a dependent child or aged 60 years and above) was the most important reason for rejection rather than their current living circumstances; an exception was those applicants who were escaping violent relationship breakdown whose current living circumstances deemed them to be homeless.

The study found that applicants that were accepted for social housing were financially poorer than those not accepted, were not in employment and were living on benefits. They were also not likely to have applied from their own home and were likely to be living with someone else in over-crowded conditions.

There were three housing outcomes: 52% were living in permanent social housing through the local authority, 31% had not moved since they applied for housing, and 16% had found alternative accommodation for themselves. On re-interview, half of **the unsuccessful** applicants were still living in the accommodation from which they had applied (55%), a quarter had moved to accommodation they found for themselves (26%) but 19% had been re-housed into social housing through the local authority on a subsequent application – either through the waiting list or through a new application as homeless.

A small study of 27 homeless people re-housed Scotland has also looked at issues of resettlement for mostly statutory homeless rehoused in local authority provision. *Routes out of Homelessness* (Rosengard et al, 2002) provides an account of different pathways taken in Scotland; women with children were helped into social housing, as were some other homeless people, with the support of agencies. Some applicants were helped into permanent supported accommodation, and some were helped by their families. The main finding was that health improved after resettlement, as did the proportion in employment and undertaking activities outside the home. This is a study of all pathways out of homelessness including the route of applying for permanent accommodation to the local authority.

4. An ongoing study of youth homelessness resettlement outcomes

Pickering et al (2003) describe the current evaluative literature on homelessness in the UK as being weak, in particular from the point of view that there are few longitudinal evaluations that enable longer term outcomes to be assessed. Citing Kennedy and Lynch (2001) they point to a lack of evaluative evidence on the merits of different resettlement models. They call for more longitudinal research to develop an understanding of the resources that homeless young people in particular need to call upon if they are to achieve positive outcomes.

This conclusion demonstrates the 'interventionist' approach in the UK to longitudinal studies. The focus is on the policy outcomes of different models of resettlement. Our own perspective is that it is important to develop three types of longitudinal research:

1. An overall perspective on the risks of homelessness and the pathways out of homelessness for the **individual** homeless person. This requires long-term data of the kind collected for the British Household Panel Survey. Some data of this quality was collected by the Safe in the City project for young homeless people in some London boroughs (www.safeinthecity.org)
2. Fully funded large scale studies of service provision that track the outcomes for service users. This would include full assessments at the point clients come into a service and tracking procedures through the service and afterwards.
3. 'Realistic' evaluations of project interventions that establish what works **within** the project.

A current research project that is being undertaken by the authors is an example of the third type of study. It uses a tracking methodology based on structured interview questionnaires with young people leaving 10 different Foyers and can be described as a 'realistic evaluation'. The aim of the research project, entitled *What Happened Next* is to track the subsequent housing, employment and social histories of young people leaving supported accommodation. Despite considerable interest in Foyers and other forms of supported accommodation for young homeless people there has been no successful tracking study undertaken in the UK to date.⁹

The areas that are being explored are young people's subsequent history in relation to accommodation, employment, education and training, relationships, community involvement, use of services, and development of self esteem/ self-confidence. At this point in time, therefore, many Foyers have bedded down into their communities, have the funding to provide resettlement workers and floating support services, and some

⁹ Within the UK Foyer movement there are now over one hundred and twenty accredited Foyers rehousing up to 6,000 young people each year and working with a further 4,000 people from the local community. Therefore in the UK Foyer movement has become an established part of local authority strategies in relation to youth homelessness in England, Northern Ireland and parts of Scotland.

have established systems for recording entry and exit characteristics of young people. It is hoped that these developments provide the basis on which a two year semi-retrospective study of Foyer leavers can be undertaken.

The study uses some of the findings of a full retrospective one year study of young people moving out of Foyer accommodation (Worley and Smith 2001 *Moving out. Moving on...From Foyer accommodation to independent living*). These were

1. It is necessary to record the 'entry' characteristics of young people in relation to three prisms: young people's origins/backgrounds, their educational/work experiences and their support needs prior to their arrival at the Foyer.
2. It is also important to record the precise services provided to meet the diverse needs and experiences of different residents during their stay.
3. In West London one of the most important factors in the subsequent history of ex-residents was *where* they were housed, not just the fact of being housed. Was their accommodation within the local borough where they had contacts and friends or was it at some considerable distance?
4. Many methods had to be used to overcome the practical problem of contacting young people once they have left.

The current study is designed to study process through comparison by following the leavers from 10 different Foyers. The first stage of the project began with interviewing managers, staff and young people in these 10 Foyers. Young people about to leave were not interviewed individually but as a group of residents who had already been housed in the Foyer for more than six months and would be moving on in the future. From this first stage we can establish some of the principal differences between the 10 Foyers and the differences in context of the experiences of young people living in these Foyers. The principal differences are: the training facilities and other services available within the Foyer they were resident in; the availability of secure move on accommodation in the area; the availability of floating support after move-on.

Establishing differences in these three contexts in which move-out or resettlement occurs is important because otherwise other variables might be given a weight they do not deserve e.g. different outcomes for ex-residents of a hostel that houses refugees may be due to lower support needs once resettled or to the different availability of accommodation or (Worley and Smith, 2001).

In our individual interviews with ex-residents undertaken so far we have noted eight different routes out of Foyers and we are now seeking to ensure that these are represented within our sample:

- Into permanent accommodation, local authority or housing association or Housing Executive (Northern Ireland).
- Into temporary accommodation such as a first stage resettlement flat

- Into temporary private accommodation such as shared accommodation with friends.
- Into move-on accommodation within or next to the Foyer and managed by the Foyer
- Move out to other forms of supported accommodation, usually with higher support
- Returned Home
- Evicted, usually moving between friends, families
- Returned to the Foyer

The final route (returned to the Foyer) often occurs for young people who have been evicted but we have also interviewed one young man who gave up permanent accommodation in order to return to the Foyer because he was in danger of failing.

The study is interventionist, as previous studies have been. We would want to end with answers to the following. How many young people achieved successful outcomes in relation to education, relationships, community and personal support after leaving the Foyer? What are the key dimensions of progress for young people? What do they see as a successful outcome? How many different aspects of their lives need to be working for them to feel that they are moving on with their lives? Did their stay in the Foyer help them achieve that progress or that successful outcome and in what ways? If their stay in the Foyer was not successful what were the reasons for that? What more could the Foyer have done? Looking at their situation now what would they have done differently? What are the critical success factors (mechanisms) in the young person's experience

5. Realistic Evaluation and its value in interventionist studies of homelessness and provision for homeless people

For our purposes evaluation undertakes two basic tasks, determining outcome for the client - the extent to which a program or intervention has made a difference - and understanding the process involved in the implementation of a particular program or implementation. These are the fundamental tasks as outlined by Oakley and Fullerton (Conference Paper), who state that the basic task of evaluation is to see if desired outcomes are achieved; they argue that if desired outputs are not achieved, there may be little point in studying the process. However our understanding is that it is equally important to understand why a program is not achieving its desired outcomes as to understand why it is.

Qualitative research can seek out explanatory models but process evaluation is fundamentally a descriptive methodology. Steiner et al (1998) states quite correctly that the richness of process evaluation must be traded against the scientific power of the outcome evaluation approach. There is often a criticism against process evaluation or indeed qualitative research in general that it tends not to use comparison groups, and it

is usually single site in its focus. However if the research takes a pluralistic approach not just methodologically but also in terms of sampling techniques this approach is best suited to bringing about the a better understanding the complexity of reality. In the 'What Happened Next?' Project we have undertaken a 10 Foyer follow-up study in order to be able to compare, from the inside, processes in different areas and with different levels of service.

This approach fits with the perspective that emerged in the social sciences in the 1990's of 'scientific realism'. Pawson and Tilley (1997) among others have developed this as a legitimate evaluation strategy or perspective in its own right in an attempt to deal with the limitations of other approaches. This approach rather than concentrating on linking variables at a surface level (the establishment of cause and effect) addresses the question of why programs work, for whom, and under what circumstances. Scientific realism is wholeheartedly methodologically pluralist.

Pawson and Tilley (1997) describe the experimental paradigm of evaluation as a heroic failure arguing that in stripping away the context of a social intervention they produce results that are only valid in other context-less situations. What is called for then is a model of evaluation that can provide contextual understandings. Pawson and Tilley summarise their point of view in the following words 'One might summarise the point by saying that it is not programs which work, as such, but people co-operating and choosing to make them work' (1997:36). They are claiming in a very fundamental sense that *choice making is the agent which engineers change within social initiatives*. In looking for a causal language that will enable them to describe such a process Pawson and Tilley use the generative paradigm of causation with its terminology of 'transformation' and its concentration on the 'liabilities' and 'powers' of subjects. It is a call to shake off the habit of thinking and talking about initiatives as 'producing outcomes' and instead replace this with the idea of programmes offering chances which may/may not be triggered by the subject's capacity to make choices. It is the subject's choices that will frame the nature and extent of change.

Pawson and Tilley describe the whole process thus:

'What we are describing here is not just when the subject signs up to enter the program (or not), volunteer for it (or not), co-operate closely (or not), stay the course (or not), learn lessons (or not), retain lessons (or not). Each one of these decisions will be internally complex and take its meaning according to the choosers circumstances. (1997:36)

The logic of the RTC (Randomised Control Trial) is to control a situation so that only the intervention can be responsible for the observed outcome but this is not the approach of the realist evaluator. Realism gives the researcher a standard set of concepts in which to describe the operation under the headings: embeddedness, mechanisms, contexts, and change.

We are all aware of the patterns and regularities into which our lives are formed, aware of the choices which channel our activities, and are also aware of the broader social forces that limit our opportunities. This awareness will result in some people at least a desire to change those patterns. They may be thwarted in this desire to change because they may not have the resources to bring it about or, it may be countermanded by others or other groups with more resources. Further unpredictability is introduced because people have imperfect knowledge about the contexts that limit their actions and the change mechanism itself may have unintended consequences. So part of the research question is to ask: what are the mechanisms for change triggered by a program and how do they counteract the existing social process. Progress in research depends upon being able to demonstrate which problem mechanism has been overcome by which blocking mechanism.

The research may begin with a period of theory building, professionals might be interviewed at this point to elicit realistic theories which might generate change mechanisms. These folk theories are then used to interrogate a range of data in a range of ways. In essence the starting point is to generate some putative mechanisms- each producing different outcomes and these are termed conjectured CMO configurations. It is an idea at this point to look for a range of best and worst context. Pawson and Tilley (1997) suggest that the researcher must get into a habit of not thinking about programs as some kind of unitary happening which either does or does not work and must face up to the fact that they are not facing singularity but a daunting complexity. In our study *What Happens Next* we are attempting to begin this on limited resources by generating some hypothesis about potential CMO configurations, initially by drawing on the knowledge of managers, staff and the residents themselves.

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