

Rough Sleepers: the Causes, their Identity and Housing First

Student ID 1625603

Anglia Ruskin University

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## Abstract

Rough sleeping has doubled since 2010, is predicted to continue rising, and is the most visible sign of inequality in England today. The personal experiences of 13 rough sleepers, with a total of 35 years living on the streets were analysed and the findings concluded, as previous studies have, that childhood trauma is continually seen as a prerequisite of rough sleeping. Whilst research has shown that not everyone is susceptible to rough sleeping, relationship breakdown, loss of a job and leaving prison are the main circumstances that trigger it. Some people still believe it is a lifestyle choice. However, from the experiences described, combined with a lack of family and social support, no alternative other than sleeping on the streets is available. Mental health problems and living in traumatic environments are other factors influencing homelessness, and often result in alcoholism and drug addictions, perpetuating rough sleeping once homeless. Living on the streets is degrading and amplifies vulnerability and insecurity. The associated stigma from being constantly judged by the public, compounded by the media, has a profound negative effect on self-esteem and feelings of worthlessness. Currently it is difficult for rough sleepers to get a home. If society is to help rough sleepers, the Housing First model needs implementing.

Keywords: rough sleepers, homelessness, childhood trauma, identity

## Rough Sleepers: the Causes, their Identity and Housing First

### Introduction

The United Nations (1991) stated that housing is a basic human right that should be secure, habitable and affordable. However, many people throughout the world do not experience it. There are 320,000 homeless people (one in every two hundred) in the UK (Shelter, 2018) with 82,000 families in temporary accommodation in England alone (Ministry of Housing, Communities and Local Government, 2018b). The UK Government has reported there were 4,677 rough sleepers across England in 2018 (Ministry of Housing, Communities and Local Government, 2018a). However, Crisis (2018b) suggest the number is more than double what Government statistics suggest. They predict the number to increase to 15,000 over the following six years. This is in addition to those sleeping in trains, buses, cars and tents (Crisis, 2018a). Whilst the Government has made a commitment to halve rough sleeping by 2022 and eliminate it altogether by 2027 (Sajid, & Sharma, 2017), the statistics reveal that rough sleeping has doubled since 2010 and has increased for the last seven years (Ministry of Housing, Communities and Local Government, 2018a). Rough sleepers are the most visible indication of inequality in England today (Adebowale, 2018).

Affordable housing is a real problem for young people. The relationship between young people's income and cost of housing has worsened in recent years (Hoolachan, McKee, Moore & Soaita, 2017). Combine this with the acute shortage of social housing (Thompson et al., 2017) and it is possible to see why many young people are forced to spend time in inadequate short-term accommodation (Quilgars, Johnsen, & Pleace, 2008). Councils in England have an obligation to provide emergency housing to people with a priority need, but the majority of people do not fall into this category (Loveland, 2017); and the reality for these people, without friends or family to support them, is that there are not enough hostel beds to cover the demand (Cromarty, 2018). This is one factor why there are thousands of people sleeping rough. There is a less compassionate narrative, which purports that rough sleeping is a lifestyle choice (Watts, Fitzpatrick, & Johnsen, 2018).

Whilst rough sleepers are relatively small in number, they have diverse needs and are very costly to society because of their disordered lives (Fitzpatrick, Bramley & Johnsen, 2013). The Government estimates that homeless people use around four times more acute hospital services than non-homeless people (Cromarty, 2018). This means there are long term financial benefits in dealing with rough sleeping (Bramley et al., 2015).

### **Psychological and Social Factors Leading to Homelessness**

The narrative from charities and the Government is that anyone is susceptible to homelessness. Shelter (2016) states that one in three working families are only one pay cheque away from losing their home. Research by Bramley and Fitzpatrick (2018) however, has shown that in England this is not the case. Some underprivileged groups are at a very high risk, whilst other groups are at virtually no risk. Poverty is the major factor, followed by health and support in teenage years, along with social circumstances. The main prevention is having strong social support networks and a family home as a young adult, although material poverty is still the main factor (Bramley & Fitzpatrick, 2018). Anderson and Christian (2003) argue that even after Government policies which attempt to deal with the problem, homelessness still exists and it is fundamentally a housing problem. They believe that what has changed is that society now views homelessness as a refined interaction between social structures and an individual's circumstances, whereas previously it was explained by a social problem or a person's failing. These studies (Bramley and Fitzpatrick (2018) and Anderson and Christian (2003)), whilst being fifteen years apart come to very similar conclusions; that social structure and individual factors combine to determine the risk of becoming homeless.

Multiple exclusion homelessness (MEH) is where somebody has been homeless, and also experienced 'deep social exclusion' such as: institutional care, substance misuse or participation in street culture activities such as begging, street drinking or sex work (Fitzpatrick, Johnsen, & White, 2011). Fitzpatrick et al. (2013) showed that the most complex forms of MEH are related to childhood trauma. These traumas have an adverse effect on

people's lives, especially coping mechanisms in early adulthood, with the possibility of negative long-standing consequences for wellbeing, health and social functioning. Latest Government research has also shown that having a traumatic childhood can lead to reduced coping ability when other factors such as leaving prison, eviction, bereavement or a relationship breakdown occurs (Cromarty, 2018).

Quilgars et al. (2008) further supports the necessity for a supportive stable home by concluding that relationship breakdown is the main reason for homelessness. However, persistent problems at home, including violence, are experienced too often by young homeless people. Woodhall-Melnik, Dunn, Svenson, Patterson and Matheson (2018) argue that it is a combination of systemic factors such as the welfare state and individual factors such as neglect and childhood trauma, that interact to create a social context for long-term homelessness. They interviewed twenty-five men undergoing long-term homelessness. The analysis showed they all had similar experiences of complex psychological trauma early in life. The experiences encompassed sexual, physical and emotional abuse, as well as neglect and caregiver substance abuse. They concluded that men's entry into long-term homelessness should not be considered as when they became homeless, but rooted in complex psychological traumas. These findings were substantiated by Tsai, Edens, and Rosenheck (2011) who conducted a retrospective longitudinal study with 738 participants, which profiled their childhood experiences. They stated that homelessness can be predicted early in life, when adverse childhood events are seen. Bender et al. (2015) also discovered that many homeless youths experienced abuse prior to leaving home - approximately 50% had experienced physical abuse and between 25% and 33% sexual abuse. More recently, Tyler and Schmitz (2018) studied 150 youths in the USA. Their results showed that approximately 80% of homeless youths had experienced childhood abuse within their family.

### **Psychology of Living on the Streets**

People have both social and personal identities; social identity relates to the group they belong to (Parsell, 2011). Because belonging to the rough sleeper group is stigmatising,



over time, some rough sleepers distance themselves from other rough sleepers (Desjarlais-deKlerk, 2018). Those that continue to identify with the in-group have lower self-esteem (Osborne, 2002). For young people this results too frequently in depression, anxiety, drug addiction and withdrawing from education, training and employment (Quilgars et al., 2008). These mental health and substance misuse problems are a consequence rather than a cause of MEH (Fitzpatrick et al., 2013).

Williams and Stickley (2011) undertook a narrative research study, examining how homeless people talk about their experiences. They state that homeless people's identities are affected by their experiences, and are reshaped due to the trauma and indignity of their homelessness. They went on to say that, many people's identities are moulded by how they relate to their families and occupations. However, homeless people construct their identities around drugs, illness and exclusion, resulting in a negative sense of identity of destructive proportions. To establish a future beyond homelessness into employment, a positive sense of self and self-esteem is continually found to be essential (Hornsby, 2018).

### **Psychology of Having a Home**

Giddens (1991) described ontological security as a sense of order and permanency in regard to an individual's experiences, where they have meaning to their lives, a positive view of self, the world and the future, avoiding chaos and anxiety. Padgett (2007), studied homeless people with mental health problems in New York City, looking at how a home increases 'ontological security'. The study concluded that ontological security is improved by having a home, as a secure base where the markers of constancy, privacy and daily routines facilitated identity construction (and repair). Participants living in their own apartments self-reflected that markers of ontological security were clearly in evidence.

Whilst rough sleepers are stigmatised by their experience of life on the streets, once in housing, they move away from both homeless people, those affiliated with homelessness and associations with temporary or supported accommodation (Desjarlais-deKlerk, 2018).

Social distancing from the old stigmatised group is a factor in creating a new self, facilitating new social relationships and avoiding social isolation. A new identity, independent living and housing are possibly vital in maintaining a new housed status (Desjarlais-deKlerk, 2018).

Traditionally the solution to homelessness was to deal with an individual's mental health problems, or drug and alcohol abuse. This is known as the Treatment First model (Tsemberis, 2010). This approach has not been successful as there has been a constant rise in homelessness for the last seven years (Ministry of Housing, Communities and Local Government, 2018b). Current thinking has moved away from this idea. The central component of the Housing First model (Pruitt et al., 2018) is to detach dealing with individual problems from housing (Tsemberis, 2010). Once a housing structure is in place other structures such as employment are possible, as well as addressing mental health and drug and alcohol problems. The Housing First model has two key principles: firstly, housing is a basic human right, not a reward for engaging with health and addiction support. Secondly, once a rough sleeper has housing and a sense of stability is restored, clinical and social stabilisation occurs faster and it is more enduring (Pruitt et al., 2018). The Housing First model was first developed in New York in the early 1990's by Pathways to Housing. The model has grown throughout many US states as it has proven to be effective. After a four-year longitudinal research study in 2006 comparing the Housing First model to the Treatment First model, it showed 88% housing retention with the Housing First model compared to 47% with the Treatment First model (Padgett, Gulcur, & Tsemberis, 2006).

Research into community based Housing First projects, where homeless people are involved in the decisions regarding their housing and support structures, has resulted in clients having improved self-esteem and hope, combined with a reduction in depression and anxiety (Pruitt et al., 2018). Treating homeless people with dignity and adding structure to their lives is something that many countries are currently either replicating or considering (Lancione, Stefanizzi, & Gaboardi, 2018). There is a clear link between adverse childhood experiences and mental health problems, suggesting that people suffering chronic

homelessness would benefit from the Housing First model that then subsequently deals with childhood trauma (Milaney, Williams, & Dutton, 2018). In addition, Padgett (2007) and others in the housing and health field, suggest that housing is a central element for ontological security, adding further support for a Housing First approach.

### **Qualitative Method**

Whilst many studies have involved quantitative research, Powell (2018) argues that it stops researchers getting to the main issues facing social problems such as poverty and inequality. This study will advance knowledge regarding rough sleeping by focusing on qualitative research. A semi-structured interview analysed using Thematic Analysis will produce real themes within the data, pertaining to life on the streets (Howitt & Cramer, 2010). Using a flexible, data-led approach, following procedures as detailed by Braun and Clarke (2006), will ensure insightful themes answering the research questions, and benefiting from my personal involvement in collating knowledge, by observing, listening, recording and contextualising (Henwood, 2014) the personal experiences and feelings of rough sleepers.

Studying previous research has highlighted that much of it has been undertaken with homeless people who are living in hostels or temporary accommodation. Whilst this previous research is vital, this current research involved those homeless people who are sleeping rough, on the streets.

### **Research Questions**

In summary, the objective of this research is to investigate homelessness from the perspective of rough sleepers, to gain a comprehensive understanding of the issues surrounding their predicament. The questions this study will attempt to answer are: what circumstances result in someone sleeping rough? What is the self-identity of a rough sleeper? And what would a home without conditions mean to a rough sleeper? The themes and concepts produced by this research could be used by councils and Governments to help

some of the most vulnerable people in our society, by targeting solutions that address the base factors leading to rough sleeping.

## **Method**

### **Participants**

I interviewed thirteen participants, all of them had periods of rough sleeping in Cambridge and Chelmsford, which are affluent university and county cities in the East of England. They were recruited via CHESS in Chelmsford, who support homeless people with emergency and supported accommodation, and the Winter Comfort homeless day centre in Cambridge. The Ministry of Housing, Communities and Local Government (2018a) reported that 6% of all rough sleepers are under 25 and 14% are women. Participant characteristics are listed in Table 1. I interviewed eleven men aged between nineteen and sixty-six, of which two were under twenty-five, aged nineteen and twenty-one, and two women aged twenty-eight and forty-one. They had spent between one week and fourteen years on the streets, in periods of between two weeks and twenty-five years. The average age of the first time they started 'rough sleeping' was 31, the total years 'homeless' was 63 and the total years 'rough sleeping' was 35, which means the participants have spent more time 'rough sleeping' as opposed to being 'homeless' in hostels and temporary accommodation. The only requirement was that they had to be sleeping rough or had previously. Whilst some of the participants openly discussed their drink or drug addictions, I felt they were all compos mentis. No inducements or rewards were given to the participants

Table 1  
*Summary of Participant Information*

Participant / Pseudonym	Gender	Age	Age first time rough sleeping	Total years homeless	Total years Rough sleeping	Accommodation other than rough sleeping, since first time rough sleeping
Bob	Male	31	29	2	1	Boat / Family / Hostel / B&B
Bill	Male	66	56	3½	1	Hostels / Sofa surfing / Own flat / Move-on flat
Dave	Male	36	32	4	2	Trap house / Prison / Hostel / Sofa surfing
Emma	Female	28	25	3	1	Trap house / Prison / Hostel / Sofa surfing
Max	Male	30	25	1	1 week	Hostels / Sofa surfing / Car / Own home
Carl	Male	47	37	1	½	Car / Hostel / Private rented house
Jim	Male	31	14	17	2	Random people / Travellers
Tim	Male	35	34	½	¼	Shelter / Random kind person's house
Dom	Male	65	52	6½	6½	Squat / Prison / Move-on flat / Own house
Nick	Male	21	19	1¾	1¾	Prison
Stu	Male	53	28	25	14	Night shelters / hostels
Jane	Female	41	38	2½	2	Hostels
Ben	Male	19	15	1	2 weeks	Trap houses / Parents / Sofa surfing / Hostel

### **Semi Structured Interview**

I developed a semi structured interview schedule to facilitate a dialogue in real time. The schedule was designed to encourage the participants to freely talk about their feelings regarding their personal experiences, their identity and how the public and media influences this. In addition, what caused them to be sleeping rough and how a home would affect them.

Having supported rough sleepers as part of a community project, I have good knowledge of the topic which helped me create the interview schedule in line with my research questions; initially focusing on general questions to encourage them to freely talk. The interview schedule facilitated responses in-line with my research questions; one question was 'what are the public views towards rough sleepers?', with the follow-up question of 'do you think you are treated differently than people in homes?'. This line of questioning invariably gave insight into self-identity. To establish how a home would impact them, I asked the question 'what would a home mean to you?' See appendix A for the full interview schedule.

### **Ethics**

In line with the British Psychological Society recommendations and Anglia Ruskin University policy, I completed the University's ethics approval process, see appendix B for the ethics approval email. The risk assessment, participation information and debrief sheets, consent form, interview schedule and proof of consent from CHES and Winter Comfort to

use their facilities were scrutinised. The ethical permission I received from my supervisor at Anglia Ruskin University (S/DREP, Psychology) included instruction to store the interview data on University computer hard drives for security reasons. See appendix C for the participant consent form, appendix D for the participant information sheet, and appendix E for the participant debrief sheet.

## **Procedure**

CHESS and Winter Comfort not only helped find participants, but provided interview rooms too. Initially I discussed the project with staff at the centres, who then introduced me to homeless people at both the day centre and winter night shelter. I slowly integrated myself into these environments by dressing in casual clothing and sitting amongst them. Over the course of fifteen to forty minutes I was either introduced to participants by staff or I initiated conversations, initially general, leading onto the research project and whether they would like to participate. I would suggest to the participants we get a water or coffee and head to the interview room.

The interview rooms at CHESS and Winter Comfort facilitated a very good environment for the participants to feel safe, secure and comfortable; the rooms were set up so there was no hierarchy. I asked them to read the Participant Information Sheet and sign the Consent Form. I then informed them of their anonymity, and that the findings of the research would depict a true representation of everyone's interviews. The interviews were recorded with an iPhone.

I am a founder member of an outreach and lobbying community group supporting rough sleepers, which means I am both comfortable and accustomed to meeting and talking to rough sleepers. I was conscious that some rough sleepers have drug and alcohol addictions, also mental health problems, which made me aware that participant communication could be compromised.

I asked open questions, used silence and gestures such as nodding and sitting with a positive body language posture. I used prompts to encourage the participants to talk and develop their conversation, and I would also lean into the conversation showing interest. When on a few occasions the participants became emotional, I told them that they could take a break, or end the interview at any time if they wanted. Nobody did. I also encouraged the participants to direct the conversation, whilst ensuring that the interview facilitated rich responses in line with my aims.

They were one-time interviews, lasting between nineteen and fifty-nine minutes and were audio recorded. Interview three was with participants Dave and Emma [pseudonyms], who were a couple. At the end of the interviews I gave the participants a debrief sheet, and suggested they might like to relax for a while before leaving the room.

### **Validity**

Due to the subjectivity in qualitative research, it is important that the procedure facilitates validity. Whittemore, Chase and Mandle (2001) advocate both primary factors such as credibility, authenticity and integrity are as vital as the secondary validity criteria of sensitivity, thoroughness and congruence. Both the environment where the interviews were held and my approach espoused primary factors; all participants associated the environment as being part of their support, they were places they knew, spent time at and could freely talk. I feel my extensive years working in the business environment, and having spoken to rough sleepers on many occasions over the last three and a half years, helped me create the atmosphere the participants needed to trust me. I used the skills I have developed over those years to build rapport. I had real empathy for their predicaments, I cared about their lives, and whilst I did not feel a need to tell all participants, I did discuss the outreach and lobbying work I do with some. I have no doubt that this combined with my genuine reaction, showing my true feelings to what they were saying gave rise to real, honest and at times emotional dialogue. This resulted in the participants giving detailed accounts regarding their lives. At times the participants became emotional, there were periods of extended silence, I

kept silent allowing them to experience the moment. I felt the participants and I respected each other and a real sense of authenticity and congruence was achieved.

### **Data Analysis**

On most occasions I transcribed the interview the same day. I listened to the voice recordings and transcribed them verbatim, which gave me an intimate knowledge of the data (Howitt, 2010) where preliminary ideas about the analysis were formulated. The transcripts totalled approximately 56,000 words.

The transcripts were analysed using thematic analysis as detailed by Braun and Clarke (2006). I read and re-read the transcripts, and then began a data-led approach (Braun & Clarke, 2006) to code the data line by line. The initial analysis generated 93 codes, which I copied and pasted onto a word document and started grouping it under headings. The process was to scrutinise the data, developing thematic networks (Attride-Stirling, 2001), by identifying similar codes. This resulted in changing the name of some codes, combining groups and reducing the codes initially by 50%. Further analysis of the new groupings resulted in the generation of themes where I constructed meaningful patterns, which ensured links and relationships were visualised. The process was time consuming as different codes and themes became apparent as I moved codes and themes around; the more I analysed the more meaningful the themes and sub themes became. Some themes were obvious whereas other themes developed as the analysis progressed. Some themes were discarded as the data was not clear enough and some codes naturally merged into others. Having spent around fifty hours undertaking the interviews and transcribing them, it was important that the thematic analysis was organic, where the analysis of the data evolved as the process took place. The naming of the themes developed as it was evident how the individual themes became crucial to the overall narrative of the data. Lastly, I produced the findings, where I added to the themes those parts of the transcript which best illustrated them.



## Findings

The purpose of this research is to generate a comprehensive understanding from the personal experiences and feelings of rough sleepers, pertaining to the causes of their rough sleeping, how it affects their self-identity and what a home would mean to them. The data led analysis produced three main themes, which are rooted in the experience of 13 participants, with a combined 35 years of rough sleeping, predominantly on the streets of Cambridge and Chelmsford. The first theme is the reason why the participants 'became homeless', which is divided into three sub-themes: 'childhood, family and relationships', 'eviction' and 'prison'. The second theme is 'street life and self-identity', which is divided into five sub-themes: 'sleeping where?', 'street life', 'drugs and alcohol', 'mental health' and 'self-identity'. The third theme is how the participants feel about a 'future home', which is divided into four sub-themes: 'normality', 'children', 'ontological security' and 'love'.

### **Becoming homeless**

Twelve out of the thirteen participants described the circumstances that resulted in them becoming homeless. These were family and relationship breakdown, where children and adults suffered in dysfunctional or traumatic environments. Other reasons for homelessness were due to a job loss, leading to the non-payment of rent and eviction, and lastly leaving prison. For over 50% of the participants it was a combination of factors. All participants were acutely aware that they had little or no choice but to become homeless, as they had no family or support structures (Cromarty, 2018) to provide a temporary or permanent home, compounding an existing trauma and negative sense of self.

**Childhood, family and relationships.** The majority of participants discussed the implications of drug and alcohol addictions within their relationships as being fundamental to their homelessness. Four participants described particularly traumatic childhoods, where their parents had mental health problems or drug and alcohol addictions, which fuelled an abusive environment (Bender et al., 2015). From a young age they felt they were in a

minority, and other children had more secure and loving parenting. The negative implications regarding wellbeing were evident.

Ben About the time I was 15 when relationships started breaking down with my mum, I moved into a mate's house. And then when I was 16, probably about 17, I had a massive fallout with her, moved out officially, was sofa surfing for ages. I went back to my mum, but that lasted about a week, she had another psychotic episode, we had a massive fallout, and then I was sofa surfing. She suffers with psychosis, well, we suffer with her psychosis.

Being brought up in care led one participant to leave both school and care aged 11 and never returning.

Jim I was in care, I never had no family. I left school like at about 11 [age] to work.

Inter. How old were you when you first slept out rough alone?

Jim 13, 14, a teenager, yeah, a young teenager.

For those participants where there was a breakdown in a romantic relationship, there was the double trauma of splitting up with a partner, as well as the realisation that the cost of housing was too expensive for a single person on low wages (Hoolachan et al., 2017).

Tim I'm just a guy that met the wrong woman. 2011 I had my son, 2012 or ten days before he was one years old, she kicked me out, decided she wanted to be a lesbian again, said I couldn't have access to my son. Jimmy's night shelter started off all them years ago, as a group of churches with a basement that was just empty, and they took homeless people in, now it's £330 a week to go there.

Three of the participants were under 18 when they first became homeless, and neither family or social services took care of them. As Bender et al. (2015) discovered, many youths experience abuse prior to becoming homeless, adversely affecting their mental health and positive sense of self. It is these same youths who cope least well when other negative factors arise later in life (Cromarty, 2018), perpetuating the cycle of homelessness.

Tim To be honest I was so angry with people, if I had been born two months later I would have been supported with social services until I was 21, none of my friends were doing their GCSE's living in a bed & breakfast.

**Eviction.** Three participants became homeless having lost a job and were evicted from a rental property. As with a relationship breakdown, the outcome can be doubly traumatic, and the speed of change can have a severe negative affect on self-esteem and hope for the future.

Dave It just happened pretty quick, yeah, lost the job, lost the room I was renting and that was it, I felt hopeless.

**Prison.** Participants spoke about leaving prison 'NFA' (no fixed abode), with £46 (prisoners in England can get this upon leaving prison). There can be little support, nowhere to go and little money, which results in instant homelessness. The transition from the prison regime to being on the streets is very traumatic.

Max I was in jail for a year. The Winter Project [night shelter] didn't start until the Monday, so I was homeless. It's a massive thing, there's a lot of people leaving jail, with stuff like that with nowhere to go, and basically told to then fit back into society without a hiccup, and it's not going to work, they're going to go back to their ways, of how they know how to survive. There's tons of people leaving jail NFA.

### **Street life and self-identity**

Rough sleepers' identities are formed by their experiences, where the trauma and indignity of their homelessness is real (Williams & Stickley, 2011). All participants spent much time

focusing on the raw minutia of what life is like on the street, both surviving and navigating the challenges of finding somewhere to sleep.

### **Sleeping where?**

***Rough sleeping.*** Every participant had slept on the streets, most were long-term rough sleepers [over one year], however, they mainly slept away from the city centres - the feeling was that most people who slept there were on heroin or crack, and it was not safe. Their harrowing personal accounts are described throughout these findings.

Bob I didn't want to sleep near anybody who was on drugs, trying to rob me and stuff like that.

The places where people sleep is varied: shop doorways, building sites, public toilets, behind buildings, lobbies and in parks and open spaces.

Bill When I first left Helen, I was sleeping under bushes and trees, or if it's really raining hard you can get under the stairs, you just adapt, you've got to be able to adapt to survive on the streets, because it's not a happy thing, you just put up with it, grin and bear it, that's what I do, I don't let it bug me that much.

The first night sleeping rough is particularly shocking and traumatic; it is not just the exposure to the physical environment, but the insecurity, vulnerability and stress. This profound sense of insecurity means many decisions one normally would not consider are real options.

Jane Terrible, terrible, the first time in my life being on the street, of course I got drunk.

Max I just felt like I would probably be better off being back in jail, I had to sleep with one eye open, you can be vulnerable at any moment from someone else.

There are thousands of rough sleepers in England (Crisis, 2018a), it is a community without accommodation.

Stu But that night within a couple of hours, you then realise that being alone on the street is insanity, you will never be alone, I don't mean in a friendly sense, I don't mean someone to talk to, I mean the fact that there's so many other people, it's almost like you've now joined this club.

**Houses and miscellaneous places.** Some rough sleepers have the opportunity to sleep off the streets occasionally, sofa surfing and sleeping in trap houses [drug houses] was common.

Emma Because it gets to a point sometimes, you know, you don't always want to sleep you know, in a loo or whatever, you know, people want to be paid to stay at people's houses, so you've got bring some money around or drugs or whatever, just to get by, and sometimes it gets quite cold sleeping outside and in the loos, so, we've got to do what we've got to do to survive.

**Prison.** Prison was spoken about in terms of it starting homelessness upon release, however, four participants said prison was a better option than rough sleeping.

Max It felt like I would probably be better off being back in jail, and it went through my mind a couple of times, you know, I might as well just do something to get put back in jail, because anything's got to be better than sitting here shivering and freezing cold in the pitch black and the pouring rain. I got to a point where I have two options, either go and commit a crime and be put back in jail and try and come out in the summer, or just end it there and then.

**Hostel.** Hostels evoke mixed feelings; some have changed in recent decades, whereby they used to be a place that only offered a bed and maybe some food, in addition many now offer complete wrap-around services and support.

Stu I actually became homeless in the sense of living in a hostel and not having a house a few years before that, but I've gone straight into a hostel, cause it was easy in them days. It was around about 1996 when the current system became normal practice, when it was taken over by, I don't know what you

want to call them, but people that would have project workers and key working session.

The combination of many hostels now having strict policies regarding who can stay there, and the increase in rough sleepers since 2010 (Ministry of Housing, Communities and Local Government, 2018a), has resulted in rough sleepers having the dilemma that they both want to get into a hostel, as it is seen as a way to get off the streets, but find it difficult to meet the strict rules they must adhere to.

Carl It's only places like this [CHESS, hostel], charities and that, what are really, more supportive than the actual Government.

Emma Hostels is a rare one, it's difficult to get into a hostels, very difficult.

Ben To live in Jimmy's [hostel], basically means you can stay there for 28 days, as long as you're engaging, doing activities with them, talking to your key worker, if you refuse the housing options they give you, then they like turn you out as you're not trying to move on. Basically means going up there, putting your name down so they know you still need a bed, if you don't put your name down every day you don't get a bed.

In the cold winter months some church halls open up for rough sleepers.

Jane Now it's the winter time so to the end of march I can sleep in the church, It's a lucky time.

Temporary housing is available for people with addictions.

Jim I got turned down by a gaff because I had 'no issues', you have to have issues to get into this gaff, you have to have a drink problem, and drug problem, I was thinking do I lie just to get in the gaff!

The changes some hostels have made bring increased costs; no longer are they church halls with a few camp beds in, they now resemble budget hotels with many administration and support staff, helping people get work and housing. These costs need paying, and whilst

Government benefits cover the costs if the person is unemployed, rough sleepers have a very negative feeling about a charity charging so much more than the cost of a room in a private house.

Tim When I tell people that Jimmy is £330 a week; most people don't believe me.

Tim You want my honest opinion, homeless has become a business, a massive business, Jimmy's night shelter started off all them years ago, as a group of churches with a basement that was just empty, and they took homeless people in, now it's £330 a week to go there, per person times 40 people, £600,000 a year give or take, it's a massive business, you can't work there. YMCA £280 a week, Cyrenians £250 a week.

### **Street life**

**Support Organisations.** Hostels provide accommodation and generate mixed emotions, whereas support organisations such as individuals, outreach groups and day centres which do not offer accommodation are considered positive. These support organisations have a holistic approach to support, and unless someone is causing problems, everyone is welcome and gives a rare but positive message about society's compassion.

Bill In the last year people helping homeless people has boomeranged. There is a lot more help, they supply places like this [Winter Comfort] and Jimmy's, food and stuff like that, it's a lot better for homeless people, they can come in here, get a shower, they can have a breakfast, a change of clothes, there's always clothes in the clothes the store, women's and blokes. We get shampoo, shaving foam, toothpaste.

**Security, Vulnerability and Abuse.** Nearly all participants described safety as the most important consideration on the streets. They all talked about potential abuse, the threat of violence from the public and other rough sleepers, and how vulnerable they felt. It was these extreme negative feelings regarding their security, that compound existing mental health problems, often resulting in alcoholism and drug addictions.

Bill All I do is concentrate on that night, make sure I'm safe, and I get through it ok, I'm always happy in the morning when I wake up.

Max You have to sleep with one eye open to make sure no one has taken your stuff, or you know, or feel like, you know, you can be vulnerable at any moment from someone else, and that's the biggest thing, a lot of people say that, people I've spoke to at the night shelter, they come there because when they hear people's feet on the concrete, you know, they are unsure what's going to happen, you know, whether that person will walk by, or whether that person will do something to them.

Keeping warm is paramount as being cold is traumatic.

Dom I simply couldn't put it into words how cold it got.

Max You're sitting there in the freezing cold and it's pitch black.

**Subsistence.** Subsistence is vital to life, and for those rough sleepers that know where to go, free food is available.

Max I come here [hostel] for eight o'clock, where they hand out a meal to whoever may need it.

For those who are new to an area or have just become homeless and do not know where the free handouts or support organisations are, stealing becomes a necessity, which can compound a negative self-identity.

Bob Definitely daunting, not knowing where to get food, thinking, shit I'll have to steal food, which I have done a couple of times, I won't go into Tesco's and walk out with a CD player to sell, but I will walk in there and walk around eating a cheese and onion sandwich.

Keeping clean is very difficult, but for those who want to keep clean facilities are available.

Max Once a week I get to come here and have a shower and wash my clothes.

Keeping physically and mentally healthy is a real problem.



Dom Physically it has had extremely detrimental effect on my health, it isn't simply just the cold weather or wet weather, it is the fact that it is simply, I have nowhere to lay down, to relax, to freshen up, it is wear and tear, it's like every week having to run a marathon. When we have to get up at say six o'clock in the morning and walk around for 12 hours it wears you down.

Money is essential in our society and discussing it provoked diverse reactions; some participants were proud that they worked.

Jim I just go wherever I can get work, I've never signed on in my life.

Other people do not work.

Nick I've never worked.

Dave Shop lifting, yeah, to make money. It's become a way of life really.

Getting benefits is hard, money management including not getting into debt is a problem.

Bob The debts are going to start following me again.

Dom My wife handled all the finances, before that my mum handled the finances, in a practical way my knowledge of the world was practically zero.

Begging was one of the most divisive subjects, only three participants did it. Most of the participants felt begging was undertaken by addicts, and was the main factor giving rough sleepers a negative image. They spoke passionately about how they felt stigmatised as they believe all members of the public feel all rough sleepers beg. Those rough sleepers that do not beg try and disassociate themselves from those that do. However, paradoxically, not begging causes a multitude of further problems due to having no money.

Carl They're begging for money, and you can see they're spending it on alcohol and cigarettes, you see I don't beg, I don't like people begging, you know, make your money last, you don't need to beg, but for them, they're getting money for their fix.

Stu What I'm saying is I went six years with not signing on, not working and not begging, and that's a long fucking time eating out of bins and fucking going to handouts.

Jim I wouldn't beg or anything like that, I wouldn't be asking for anything.

**Family & Friends.** Most participants do have family and friends, but do not want to burden them with their predicament.

Bob My mate rang me up the other day and he said "come back to my place", he's got a house and room for me. I said "I don't want to get in the way".

The participants spoke about how they used to have the same negative attitude towards rough sleepers as they perceive the public has to them today. They now have compassion for fellow rough sleepers in their community.

Bob Even when I was a youngster and a teenager looking at homeless people, you think fucking druggy, waster.

Bob She [rough sleeper] had broken shoes last year, holes in her shoes, "come on let's get a pair of shoes for you".

**Councillors and politicians.** Councillors and politicians are considered unhelpful and untrustworthy.

Bob If you're lucky enough get hold of a tent and put it down in the fields, the council come down and tell you to move on, if you get caught more than three times they can take your tent off you. Your trying to survive and look after yourself, and people are saying fuck you, you can't look after yourself, we're taking your tent off you as your... What do you want me to do, sleep out in the open?

Dave Depending upon what the vested interests are, the political viewpoint, it's bollocks really, it's easy to tell a tale.

Emma People say in politics, you know, they want to make a difference and a change, but they don't, they just say that.

### **Drugs and alcohol**

Whilst 70% of participants use drugs or alcohol, they were all 'compos mentis' during the interviews. Most participants felt those people taking hard drugs (heroin and crack) were giving other rough sleepers a bad name, and saw a direct relationship with begging. Some felt their own alcohol and cannabis addictions were not as serious as other people's addictions to harder drugs.

Bob Not everybody down there is addicted to drugs or sleeps in a shop doorway. I don't take crack, I don't take heroin, I'm not a piss head, I'm not an alcoholic, I smoke a bit of weed and I might have a pint now and again.

Some rough sleepers use hard drugs and this was described as being extremely destructive, and a way that many rough sleepers deal with their real predicament and mental health problems. The participants spoke about self-medication, dealing with the loneliness and feelings of worthlessness.

Max Ever since, I was about 11 or 12 I have always self-medicated through drink and drugs. In the end I started to use cocaine to get me through the night, get me through the day, then with the cocaine came the drinking. I was consuming so much alcohol and cocaine that it took over, I thought I had control of it, at one point, and in the end it took over, to the point that, you know, my little girl was playing with her toys on the floor and I was sniffing cocaine off the side.

### **Mental health**

Poor mental health in all of its forms is evident amongst rough sleepers. Depression, anxiety, bipolar, unstable borderline personality disorder and PTSD were all described in terms of the devastating negative consequences. Mental health problems are one of the factors leading to rough sleeping, and one of the factors perpetuating it.

Bob I think depression is a major problem, throughout the homeless people, the alcoholics, the druggies, depression is a major, major aspect of it.

Max I found out about the Unstable Borderline Personality Disorder, it kind of made sense that I do massive explosive things without thinking.

Ben I've had pretty bad problems with mental health to the point where I've made attempts on my life.

### **Self-identity**

The Government, councils and hostels have a negative reputation with rough sleepers, as the support they offer is conditional; due to mental health and drug and alcohol addictions, not all rough sleepers are able to meet those conditions. The desire to want to get off the streets combined with the reality of why it is so difficult, perpetuates a poor self-identity. Rough sleepers' identities are formed by their experiences, and reshaped due to the trauma and indignity of their homelessness (Williams & Stickley, 2011).

**Negative identity.** All rough sleepers have experiences that compound their belief that a proportion of society has negative feelings towards them. Living on the streets is enduring, there are few occasions when the constant negative feeling subsides. It is one of the stark realities of life on the street, that it is nearly impossible to get away from that part of society that wants to outwardly show their negative feelings towards you. Permanently seeing people who, compared to a rough sleeper, have a good life, where they can keep clean, eat when they want and keep warm and secure, is a reminder of everything that they do not have. These experiences define their identity, that they are constantly judged by the public that has negative opinions of them.

Max To walk past you and to judge you, even with their eyes, to judge you and look at you as if your just like this piece of shit, or, you know what I mean, you're no contribution to this world at all.

Carl I was hearing them, like "you loser".

Bob They look at you like you're a bit of shit on their shoe, you know, they all tie you into the drugs, homelessness, drinking, stealing.

As already described, the reality of sleeping rough, is not just the unbearably scary first night, but sometimes the longevity, which can be years. Coming to terms with the stigma and worthlessness, compounded by self-stigma, permanently validates a negative sense of self.

Max Maybe I'm not as important or worth as much as some people I suppose. Sitting here in the rain, teeth chattering, and I got to a point where I have two options, either go and commit a crime and be put back in jail and try and come out in the summer, if I going to be homeless come out in the summer, or just end it there and then.

Max I felt, dunno, degraded.

The feeling of loneliness is not just the fact that rough sleepers are generally alone, but also by the permanent movement of people walking past them, talking, laughing and seemingly not caring.

Stu I remember thinking 'now I'm really alone', it's just me, absolutely nobody gives a shit, you could be dead on that floor, no one gives a shit.

Getting to the point of rough sleeping means they have been subjected to traumas and negative experiences; living on the street is a new low point in their life, where they feel degraded and seriously worthless. The stigma is evident with all rough sleepers, "leave your pride at the door" is a poignant comment, and results in further compounding of the effect of self-stigma, "being on the streets destroys me".

Dave Leave your pride at the door, yeah, leave your pride at the door, get over that mate.

Max You just kind of get left in the bottom of the barrel, because apparently we've chose to be at the bottom of the barrel.

Jane Being on the streets destroys me, recently even though I have people around me, I feel more alone than I ever have.

Rough sleeping and the lack of money forces people to make decisions they otherwise would not. Survival means food, and if a rough sleeper has no money, an option is to steal. Being in a position where you have to do something criminal, when you are not a criminal, affects self-identity in a negative manner.

Bob I keep looking over my shoulder, thinking shit someone's going to catch me eating a cheese and onion sandwich [stolen], it's embarrassing, you know.

**Influencing public perception.** A couple of rough sleepers tried to make an effort with their appearance, to improve their public-self, by doing so they regained some pride in themselves.

Bob It makes me feel better, if you look in the mirror and if you smell good, look good, you feel good about yourself.

Tim I wear a shirt every day when I sell the Big Issue.

**Media.** Rough sleepers are aware that the media generally portrays them as a negative part of society, where all rough sleepers are tarnished by behaviours of the most extreme. They are also aware that the public is getting a biased viewpoint.

Bob They are tarnishing us all with the same brush, we're not all like that.

Emma The media is pretty inaccurate.

### **Future home**

All rough sleepers spoke enthusiastically about what it would be like to have a home. They 'came alive'; their facial expressions showed hope and positivity when they thought or spoke about it, but they were grounded in the reality of their situation.

**Normality.** Their expectations are rooted in what they describe as 'normality'. The word 'normal', or 'normality' was used by a few participants, but most used descriptions which would be considered 'normal' regarding a home. They were humble in their outlook, and wanted what could be described as 'the same as everyone else'.

Carl Normality, normality for me is the same as anyone else, you can get up when you want, it depends if you're working, you're up at a certain time, bath, shower, cooking something when you want to cook it, telly, music. All these things, basic things, you know, I'm not a materialistic person, far from it, but these, to me are normal, what everybody does.

Carl I just want a part of basic normal life, going to bed when I want to, get up when I want to. I want that basic normal sort of living, like having a telly, one thing I miss is music, I miss that.

**Children.** Three of the participants had children and all three said a home would mean they could start seeing them again. This would have an immediate positive effect regarding their self-esteem.

Max It would mean everything to me, it means I can try and fight to see my kids again, I can then get myself back into some sort of structure, I could then you know, work better at my mental health, I can get back into work and use the qualifications that I worked so hard to get.

Tim It's just going to change my life; it's going to give me access to my son again.

**Ontological security.** All of the participants wanted a secluded, secure place where they are away from the weather, and could choose when to eat and relax. Not one person described the physical space, everything was based around their humble perception of normality, and how their wellbeing, mental health and ontological security would improve (Giddens, 1991). A permanent home would automatically give a positive experience, meaning to their lives and a more positive sense of self and their future.

Ben I like the security of being in a house, and having somewhere to go that's away from everyone, like when you're on the streets you can't really seclude yourself.

Bob With a roof over my head. I would definitely feel better about myself, you haven't got to worry about where you're sleeping at night, whether you're welcome there, just keeping the wind off you sometimes.

**Love.** A home is more than just a shelter, it is "a little nest", where love and relationships can flourish. Love leads to a positive sense of self and self-esteem.

Emma All I want is a little home, like with Dave, that's all I want, is a little nest, so we can be together, you know wake up together and be warm and have food you know if we don't have to leave the house you don't have to, you know.

### **Discussion**

The purpose of this research is to generate a comprehensive understanding from the personal experiences and feelings of rough sleepers, pertaining to the causes of their rough sleeping, how it affects their self-identity and what a home without conditions would mean to them. As detailed in the findings, the original aims were achieved; there is commonality regarding the findings from all rough sleepers, facilitating a clear understanding of their predicament. Family and relationship breakdowns in traumatic environments, combined with a lack of social support, were the main reasons that led to the majority of participants becoming rough sleepers. For some the addition of a job loss, eviction from a rental property and leaving care or prison compounded the situation. The most tragic finding is that childhood abuse fuelled by mental health problems, alcoholism and drug addictions was all too common. One of the participants told me straight after we had finished the interview, that both of his parents were heroin addicts, and aged seven he found his dad dead in the bath. He started self-medicating with drink and drugs aged 11.

Over the past 20 years hostels have changed, and getting a bed in a church hall or hostel is now very difficult. Instead, the shocking truth is that sleeping on the street is forced upon some homeless people. The reality of street life is immediate, where there is no safety, and some of the public explicitly show their lack of compassion with verbal abuse. Some



rough sleepers get occasional reprieve with a night sofa-surfing, in a trap house, squat, car or on a boat, but this is always temporary. Life on the street is fraught with abuse and potential violence, where survival is the main objective. Trauma has led to rough sleeping, and further trauma is experienced on the street, resulting in overwhelming feelings of vulnerability and insecurity. Add to this the loneliness, stigma and self-stigma, and it is understandable to see why mental health problems, alcoholism and drug addictions are widespread. The most poignant fact is that it can be so scary, shocking and cold that some rough sleepers feel the best option is to commit a crime, to be sent to prison.

There is support for rough sleepers, where members of the public and charities give food, and there are also day centres that provide warmth and offer facilities for getting clean. Unlike hostels, the support is unconditional and rough sleepers really appreciate the help, as it shows them that some people are compassionate. Some rough sleepers have severe addictions and beg on the streets to get money for their drugs or alcohol. This divides the rough sleeping community, as those who do not beg are tarnished with being addicts too. The media perpetuate this narrative which fuels some of the public's abuse.

Mental health problems are a factor in becoming homeless, and a factor in sustained rough sleeping. Combine this with the indignity of sleeping on the streets, and the result is a poor self-identity that leads to feelings of serious worthlessness. Whatever the degree of mental health problems and poor self-identity, all rough sleepers want a home, nobody wants to sleep on the streets. A home facilitates a return to normal life, where they can feel warmth and resurrect relationships with their family.

The findings are important as they dispel the myth that rough sleeping is a lifestyle choice (Watts et al., 2018). Children do not choose their parents or caregivers, and do not want traumatic childhoods. However, that is what some vulnerable children experience. As they progress through adolescence with trauma, they find it difficult to navigate the plethora of challenges experienced by many young adults. This research highlights the inequality experienced by young people. If fortunate enough not to have had a traumatic childhood and

adolescence, navigating through work, housing and relationships is manageable; having had a trauma can result in a failure to sustain these usual life events. Whilst much of the previous research was undertaken with homeless people who lived in hostels or temporary accommodation, this research was conducted only with people sleeping on the streets. However, many of the findings are the same or similar. This research substantiated Bender et al., (2015) and Cromarty's (2018) findings, that childhood trauma is more often than not a predetermining factor in rough sleeping. It also substantiated Quilgars et al., (2008) study that the main circumstance instigating homelessness is relationship breakdown. These research findings also validated Bramley and Fitzpatrick's (2018) research, concluding that whilst not all people are susceptible to homelessness, poverty and a lack of support in early adulthood, these factors greatly increase the risk of rough sleeping. Williams and Stickley's (2011) study found that the personal identity of rough sleepers is negatively affected by living on the streets; the findings from this study concluded the same and also concurred with Desjarlais-deKlerk's (2018) study, that some rough sleepers distance themselves from other rough sleepers, where they perceive they are negatively affecting their identity. As the participants in this study so passionately explained, they feel a home would increase their ontological security (Giddens, 1991) self-esteem and wellbeing.

There is a growing crisis in the country today, where some people have no choice but to sleep on the streets. The findings of this research and the past research discussed, should be used by decision makers in councils and Government, to solve the societal problem of homelessness. This report gives fact based knowledge to facilitate good policy making. There are two areas where policy can be changed; firstly, prevention where strong social support networks and social welfare measures supporting those children experiencing child abuse are urgently required. This involves solving the mental health crisis too. The other area policy makers should divert funds to is the Housing First model. As research has shown, the model is effective and as the findings show here, a home would facilitate

improved self-esteem and is a prerequisite for normality. The model, once adopted, needs to focus on resolving childhood trauma.

A large percentage of rough sleepers are alcoholics and have drug addictions, which means they are not 'compos mentis' for much of the time. With this in mind, the decision was taken not to interview those people in this study. This means a large number of the most vulnerable people's experiences and feelings were not taken into consideration. Future research should consider if it would be possible to include alcoholics and drug addicts, as they are such a large group within rough sleepers; not including them means their particular situation and needs are currently overlooked. Also, this study highlighted the fact that rough sleepers have a very negative opinion of hostels, due to the cost and stringent rules imposed. The Housing First model has proved to be effective and future research could quantify the success of both approaches side by side.

## **Conclusion**

Rough sleeping is one of the most visible societal problems, which has spiralled out of control in recent years, and there is no sign of it abating. This research has shown that whilst it is multifaceted, rough sleeping only affects the most vulnerable people in society, and requires a change of approach to resolve it. Homelessness and rough sleeping often start in childhood due to trauma created by abusive or negligent parenting; the mental health problems that develop at such a young age often result in a negative identity and an inability to cope in early adulthood. This study concludes that the Housing First model needs to be adopted as a matter of urgency as it is a prerequisite to a return to normality for current rough sleepers, where a home and compassionate support can start to heal long standing trauma.

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