

South Eastern Youth Homelessness Forum

• *February 6th*

2003

• *March 28th*

2003

South Eastern Health Board Headquarters

Lacken, Kilkenny

Participant's Resource Handbook

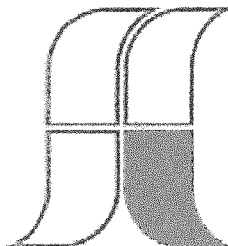
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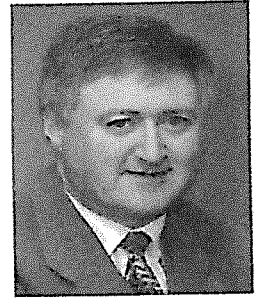
Children, their rights
and their needs



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Chairperson's Welcome



Dear Colleagues

It gives me a great deal of pleasure to welcome you to the first of two forums to help design the South East response to homeless young people and those at risk of becoming homeless.

It is a challenge rightly recognised by Government given the dire circumstances that children and young people can find themselves in if they become homeless. Quite apart from the separation from carers, children and young people will be particularly prone to poor health, drug or alcohol addiction and increased risk of being a victim or perpetrator of crime.

In convening and supporting these forums, The South Eastern Health Board recognises that it is only by pooling the wealth of knowledge and skills in the region that we can begin to adequately respond to the myriad of needs presented by this group of children and young people. The two forums in February and March of 2003 are only the start of this process.

It is clear from the national picture that our needs are somewhat different to those experienced in Dublin and surrounding conurbations. Even within our region, the nature of youth homelessness and ways of dealing with it may be radically different in our rural areas compared with our towns and cities. Given the profile of youth homelessness in the South East my perception is that a key aim should be to assist a young person and his or her family to avoid becoming homeless in the first place. Nevertheless when homelessness does occur it is important that the best, most appropriate and most timely response is delivered.

Finally I am grateful to Barnardos, Ireland ltd., the national child welfare organisation for assisting us at the start of this process.

I look forward to a purposeful first two events

Pat McLoughlin

Chief Executive

South Eastern Health Board

About the Youth Homelessness Forum

Sean Redmond, Regional Manager, Barnardos



The first two Youth Homelessness forums in February and March 2003 have been designed to facilitate the formation of broad strategic agreements and alliances between statutory agencies and voluntary groups to deal with youth homelessness in the region.

The forums have been configured in such a way to harness the evident *goodwill*¹ amongst participant agencies in designing a meaningful and common approach to dealing with young people who are homeless or who are at risk of becoming homeless. Indeed *goodwill* and *common purpose* are pre-requisites to designing any strategy. Moreover any strategy will be tested by the actual quality of service delivered to an individual young person.

Preparation for the forums

This document provides preparatory information for participants and is intended to give key information and highlight discussion points to assist the forum in its work. *The National Youth Homelessness Strategy* section is a prepared summary of the initial Department of Health and Children document outlining Government's analysis of the situation and intentions regarding the roll out of the strategy. *The Regional response* is a prepared summary of the response made by the South Eastern Health Board, identifying its broad strategic proposals across the region.

The ability to compare and learn from other regions can also be a useful reference point in strategic design particularly in identifying and overcoming barriers to strategic planning. *Making Partnerships Work*, is a summary of interviews commissioned for this forum, with two key people involved in different ways in their respective Youth Homelessness Strategies². We asked the participants to give an honest account of their experience of planning their strategy, the difficulties they faced and any advice they might have to offer. It is intended that these references will provide the critical human dimension to structural and framework deliberations, which may ultimately determine whether any strategy will succeed.

The **selection** of participants for the forum has also been a critical element in its planning. It is clear from the wide range of agencies, services and individuals involved directly and indirectly in dealing with young people who are homeless or at risk of homelessness that the forum cannot accommodate full *representation* if it is to be a working forum. Participants have been selected on what they can contribute to the strategy from their own experience.

¹As documented in the South Eastern Health Board Response to the National Youth Homeless Strategy

²In the regions covered by the Southern and Western Health Boards

However, it is recognised that it is important that perspectives from a broad range of agencies and between rural areas and urban centres across the region contribute to the designing of the strategy. The list of participants attempts to reflect this balance. It is also assumed that participants inform their perspective by consulting with individuals, services and agencies who are not directly involved in the forum. Arrangements will be made to ensure that the ongoing deliberations of the forum will be disseminated as widely as possible across the region.

The Forum programme

The programme has been designed over the two days to maximise opportunities for participants to contribute to analysing youth homelessness in the region, to consider what the analysis of need requires from a strategy, to contribute to designing and implementing the strategy and to identify what strategic partnerships need to be in place to deliver a sustainable and seamless service. In this sense, the programme attempts to be sequential, whilst allowing sufficient capacity and flexibility to investigate key issues as they arise.

Following a **Chairperson's introduction**, there will be a short session on the **national and regional perspectives** with reference to youth homelessness. This will be followed by a more **detailed analysis within the region** by way of smaller, facilitated working groups. It is hoped that the detailed analysis³ will provide, when aggregated, a qualitative supplement to the research already undertaken by the Board and highlight the key strategic issues which need to be tackled.

The forum will then turn to identifying what solutions can be found within the region. It is hoped that the section in this document dealing with making partnerships work will provide a useful reference in this regard⁴. The forum will then revert back to small facilitated groups providing an opportunity to propose solutions and identify what steps need to be taken to deliver the solutions. A plenary session on the first day will summarise the issues raised, any solutions identified and what steps need to be taken.

The programme for the second forum has not yet been designed. Its structure depends partly on the progress made at the first forum, but also recognises that its configuration needs to be formulated around what works best for the forum in designing the strategy. Rather than prescribe a process for day two, I have made sufficient capacity available to consult with participants between the first and second forums and for further research and planning.

³ Configured community care area by community care area

⁴ At the time of writing, attempts are being made to give participants the opportunity to ask further questions of the individuals from the Southern and Western regions

The National Youth Homelessness Strategy

The National Youth Homelessness Strategy was formally launched at the end of 2001, and provides a two year framework for the development of services which will seek to achieve the overall goal of the Strategy, which is : ***“to reduce and if possible eliminate youth homelessness, through preventative strategies and, where a child becomes homeless, to ensure that s/he benefits from a comprehensive range of services aimed at re-integrating him/her into his/her community as quickly as possible”***⁵

The Strategy is set against the legislative framework of the Child Care Act, 1991, specifically, Sections 3, 5 and 45, which require the Health Boards to promote the welfare of children in its area, provide services to those young people who have no where to reasonably reside, and to provide support, advise and assistance to those young people who are leaving the care of the Board.

Setting the Scene

The Strategy articulates the context within which it was developed, identifying the numbers of young people out of home, and the factors that lead to homelessness. In relation to the SEHB, the report notes that:

1. 110 young people presented to the Board in 2000 due to being out of home, representing 18.71% of the national total.
2. The Board *“provides a dedicated service for homeless girls which is based in Waterford. When homeless young people present to the Boards social work department, they are first assessed and where possible a return home is negotiated. Alternatively foster care, supported lodgings, or residential care is provided as appropriate”*⁶

Identification of existing Gaps

Whilst the Strategy identifies that a large amount of work is being undertaken across the regions to prevent youth homelessness, or respond to those young people who become homeless, it also outlined some of the organisational and operational deficits that exist and which require to be addressed:

1. There is inadequate information about the actual level of youth homelessness
2. There is a lack of co-ordination between and within the primary providers of services to young people out of home, from both the Statutory and Voluntary / community sectors
3. Core funding has been inadequate to meet the needs of this population of children at risk, particularly in respect of resourcing accommodation options and the recruitment of staff.

⁵ Page 3

⁶ Page 15

4. There is a lack of user friendly information about the services available to young people, and the location of services are too centralised and inaccessible,
5. The lack of Aftercare facilities significantly contributes to young people becoming homeless
6. Overall, the services are too focused on reacting to homelessness and failing to invest in preventative measures and early intervention.

Flowing from the overall goal of the Strategy are twelve core objectives, each with their own specific actions for implementation. These reflect the “*comprehensive nature of the response required to deal with the needs of young people out of home, and recognise the importance of the family and the wider community in realising the goal*” of the strategy.

Health Boards were required to draw up a regional plan outlining how they would respond to these actions over the two year lifespan of the Strategy.

Preventative measures

The first four objectives require Health Boards to implement a range of preventative measures, in partnership with other Statutory and voluntary providers, so as to target those at risk of becoming homeless, and providing them with the relevant supports to prevent the young person actually leaving home.

- Development of Family support and early years initiatives aimed at children at risk of homelessness
- Identification of those children at risk of becoming homeless, and the range of measures required to prevent family breakdown and homelessness
- Promoting the roles of schools in the early identification and monitoring of young people at risk of homelessness
- Ensuring that community development initiatives and strategies have regard for the issue of youth homelessness, and factor in the needs of this group into local and regional plans.
- The strengthening, development and implementation of designated Aftercare facilities and services, thus ensuring the successful transition from child care services to independence.

Responsive Services

Objectives 5 to 8 outline the actions required to implement a range of services that will be responsive, accessible and flexible to meet the needs of those young people who present to the Health Board as being out of home.

- The provision of a range of emergency responses, including accommodation, outreach and access to multi disciplinary supports as required

- The introduction of a multi disciplinary comprehensive assessment process that will promptly identify the needs of the young person and produce a care plan that will be implemented in respect of meeting the identified needs
- The provision of a range of accommodation options, including centre based, supported accommodation, foster care and independent living options, depending on the needs and abilities of the young person
- Providing a range of supports to meet the child's health, educational, emotional and recreational needs based on the comprehensive assessment.

Planning and Administrative Supports

To ensure that the Strategy is implemented in a co-ordinated and supported manner, the strategy requires Boards to undertake specific initiatives to do this:

- Health Boards will have the lead role in the implementation of this Strategy, and are required to establish a Youth Homelessness Services Forum, a multi agency forum for the planning, development and monitoring of services for young people out of home.
 - Health Boards are to ensure ease of access to services for young people out of home through the development of good advice and information systems
 - There is to be a national standardised integrated database providing information on the level and nature of young people out of home
 - Ongoing evaluation will be conducted at both local and national levels as to the effectiveness of the interventions to prevent homelessness, and of the services aimed at assisting and supporting those young people out of home.
-

The Regional Response

In meeting the requirements of the National Youth Homelessness Strategy the South Eastern Health Board produced its own strategic response in February 2002, which identified in a broad framework the initiatives the Board was committing itself to, in seeking to address the issue of young people out of home and those at risk of homelessness.

The South Eastern Health Board firstly identified its own aims and objectives in responding to the NYHS, namely:

§ **The first aim is to prevent young people from becoming homeless this will in the first instance be facilitated by:**

- a) Developing an audit of existing responses to the needs of young people out of home
- b) Identifying current service gaps
- c) Facilitating and supporting multi-disciplinary and multi-agency approaches that will provide fully coordinated youth and family support services
- d) Developing and implementing a programme of support for those leaving the care of the Board

§ **For those young people who do become homeless despite the application of preventative measures, the SEHB aims to provide a range of additional services, including:**

- a) Immediate and longer term responses from trained personnel
- b) A range of accommodation options
- c) A range of support services, both practical and therapeutic

The SEHB Strategy identifies that in order to achieve the implementation of the programme of initiatives and actions required by the NYHS, it will seek to implement structures that will ensure that the process of delivering is underpinned by a number of basic principles

- § Partnership with all the providers
- § Integration and co-ordination of service delivery
- § Maximising existing resources
- § Planned and evidence-based approaches to service development and delivery, which will be subject to ongoing monitoring and evaluation
- § Cohesion of vision and purpose

In drawing up the Strategy, the SEHB consulted widely with relevant stakeholders in the region, who directly or indirectly had a role to play in delivering services that would either prevent youth homelessness, or respond when a young person left home.

This enabled the Board to identify existing service needs, and map out a proposed service delivery model that formed the framework for the strategy action plan, which is congruent with the broad strategic plan and objectives of the NYHS.

Numbers of Young People Out of Home: As an integral part of the Boards strategy, an audit of the numbers of young people that had presented to the Boards child care services as out of home was attempted to be identified. Statistical figures available indicated the following extent of youth homelessness:

1998	65
1999	78
2000	110

From the consultation undertaken in drawing up the Strategy, it was concluded that the incidence of youth homelessness had been significantly under-reported across the region. Differing interpretations of what constituted homelessness, the fact that not all those out of home turned to the Board for assistance, and the population of those young people intermittently out of home which made their identification difficult, were all identified as reasons for this under-reporting. The Strategy seeks to specifically address this need for good information about the nature and extent of youth homelessness⁸.

Key Gaps Identified

The production of the SEHB Strategy for youth homelessness enabled the Board to undertake a service audit, which identified the existing range of services, and the areas that required to be developed. These included:

- § A lack of regional cohesion and coordination in the delivery of services
- § The shortage of youth and early school leavers supports,
- § The absence of a full range of accommodation options
- § A coordinated preventative service in relation to teenage sexual health
- § The absence of a designated After care service
- § Lack of detailed information about the extent of youth homelessness, which impacted on the Board's ability to plan services and identify needs in terms of accommodation and aftercare supports

⁸ Action 11

Funding requirements

The Strategy is an ambitious plan that seeks to realize the Boards aims and objectives. A number of the proposed initiatives are budget neutral, focusing on enhancing communication, information exchange, partnership processes and referral pathways. Others however require a significant injection of both capital and revenue for them to be implemented.

Year	Projected funding requirements
2002	€571,000
2003	€830,497
2004	€1,184,499

(Full details of the breakdown of this funding requirement can be obtained from the Strategy)

A number of initiatives that are part of the integrated response to young people out of home, including an out-of-hours service, and the option of developing new accommodation resources are not included in these figures.

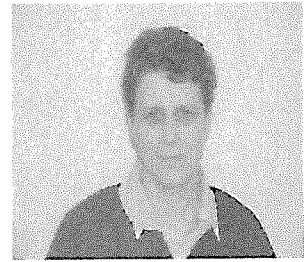
During the consultation process, a wide and varying range of needs were identified, required the Board to prioritise year one allocations (2002). The options identified for 2002 are *“consistent with the NYHS, are logical, will provide the necessary foundations for future service developments, and are in line with the overall service delivery model that the board is putting in place within the wider context of its Child Care and Family Support services”*

Programme details for Youth Homelessness Forum February 2003

- 10.00 **Welcome**
- 10.15 **Presentation**
The national and regional perspective
- 10.45 **Questions**
- 11.15 **Coffee**
- 11.45 **Small group discussion**
Identifying local and regional issues
- 12.45 **Plenary**
- 1.15 **Lunch**
- 2.15 **Making partnerships work – live discussion**
- 3.15 **Coffee**
- 3.30 **Small group discussion**
Identifying solutions and required steps
- 4.15 **Plenary**
- 4.45 **Close**
-

Making Partnerships work 1

Interview with Sr. Martina Deasy – Director of Services, Good Shepherd Services, Cork



What is your specific role or function in terms of young people out of home?

The Good Shepherd Services is a voluntary service providing accommodation, support and outreach to women and children who are experiencing homelessness in Cork. In relation to young people, we have a dedicated emergency accommodation facility in Edel House for 4 girls under 18 who are homeless, we also have a 6-bedded medium term hostel for homeless girls and a FAS Training Centre - Bruac. The Health Board funds these facilities

Give me a pen picture of youth homelessness in your region? What are the key characteristics of that population – age, gender, other factors or emerging issues?

If I were to identify the characteristics of the young women who use our services, they would include the fact that most have been in care of the Health Board, or at least had social work help, are between 15 and 18, they lack social skills and emotional maturity, are street wise, engage in risk taking activities without any understanding of the effects, and have probably been exposed to periods of homelessness with their own families as they were growing up.

Why do you think it's like that?

Because their own issues, or that of their families, have gone largely unaddressed, they are early school leavers, so do not benefit from all that school may offer, they lack motivation, and have been failed by society, forgotten about in areas of poverty and poor environment.

What were the three biggest barriers to you participating in /creating a homelessness strategy? What in your opinion created those barriers? Did you overcome them? If so, how did you do that?

I am involved in the Adult Homelessness Forum, and was involved in the Strategy development group for the Boards Youth Homelessness Strategy. The biggest barriers in these experiences has been the ability to commit to the time required to be meaningfully involved, the lack of continuity of personnel on the Forums, particularly from the State sector, a lack of commitment from some of the participants, the fact that such initiatives are not given adequate priority, and that there is often a lack of clarity around roles and responsibilities – who is supposed to do what. Sometimes, the actual coming together can be quite a barrier, as all too often the only agenda is the individual agency agenda. These barriers are caused by lack of trust, a lack of leadership, and a lack of shared understanding and agreement about roles. Another real barrier has been that despite the work of the Forum, the core decisions are made outside the Forum by the State agencies management, which can be quite disheartening, particularly when these decisions are not appropriately communicated to members of the Forum.

In the Forum, we have attempted to overcome these issues by “naming” what the difficulties actually are, by identifying designated people from each of the agencies who are responsible for specific actions of their agency, by making clear who is supposed to do what, and who is actually leading the process. These have actually reduced the effects of these barriers. In the Youth Homelessness Strategy development group, much of these barriers were overcome by clarity of roles and purpose, clear task-focused groups, a deliberate and focused goal, and clear time frames being established.

In your experience what makes groups work well together.?

A number of things – principally, good leadership, a shared purpose, time for “getting to know you”, and an environment that allows open questioning – “why am I here – whilst I am here to represent my agency, I need to be able to listen to others”. There needs to be greater creativity and flexibility in the responses from the statutory services, and less “buck passing”.

Do you feel inter-agency working in the area of youth homelessness is an effective means of developing and monitoring services – if so, why?

Despite some of the ongoing difficulties, I genuinely believe that the Forum has and is making a difference to the services on the ground. Inter agency working has great potential in this area. It prevents isolation, it allows us to remain focused on the target group, helps us realise that no one agency can deliver all that is needed by this group. It increases accountability of services, and allows a forum where we can learn from each other. There is real value in taking on the learning from other agencies.

How should inter-agency forums deal with the issue of funding / in your experience, has having the issue of funding as a focus of a committee hampered or helped the working relationships of the committee?

In the Adult services forum, the issue of funding is just “presented” to us, without too much discussion. Too often, it is difficult to discern whether decisions about funding are more about serving the needs of the strategy, the individual agency, or the homeless person. There really is very little in terms of partnership when it comes to funding. There is also little consultation about the funding implications – “is this what we actually need”, “Who are the best service to deliver on this need” – funding decisions need to be more closely scrutinised by a Forum to ensure that they are based on what is actually best for the young homeless person, not for the agency.

What would you deem to be “effective” in terms of an outcome for such forums?

I would see an effective committee as one who met the targets it set itself, the effectiveness of the outcomes as well as the process, whether it actually effected change on the ground, the nature and extent of the relationships that were formed, and whether these are sustainable.

Have you been part of an evaluation of an inter-agency forum – what were the key findings, and how were the recommendations put in place, if at all?

Yes, the Adult Forum was evaluated externally. The product was a report that made a number of clear statements about the working of the forum – it found that there was a lack of clarity about roles, a lack of leadership, a lack of focus on the real issues, and an imbalance of power between the State agencies and the community / voluntary representatives. The evaluation made a number of proposals on how the forum should overcome these issues, including the development of clear terms of reference, a facility for ongoing review of the work, the reduction of representatives on the Forum, as it was too big, and the making of firm commitments by the representatives of the new forum to engage in the Forum.

What have been the two biggest successes of your strategy / being involved in the strategy ?

The first success is that we are still there, working on the issues. The second is that it most certainly has brought people together, and there is a greater cohesiveness at certain levels.

Do you see the expansion of providers in the area of youth homelessness as a helpful development or one that can / has created a greater possibility of young people to “fall between the gaps”?

That’s a difficult one. It can be argued whether having more agencies meets a gap, or actually creates another one. What might ensure that this doesn’t happen is that service development and expansion is based on evidence and planning. There needs to be ongoing critiquing of what needs are actually being met by new services and developments, and how such initiatives integrate to form a more seamless service, and not end up in territorial warfare, fighting over resources, and being protective and exclusive of who’s needs they will meet, and who’s they won’t.

How do you prevent forums of an inter-agency nature becoming mere talking shops?

The real issues and needs can so easily be lost in these forums, and too easily get tied up in agency needs. The question “ what difference will that process, this service, that group, actually make to the homeless person” must always be used to inform our discussions.

Operational issues – the day-to-day business of running a service across a number of providers, also gets lost. If these issues are not for the Forum, it needs to be made clear where they can be discussed. A sub group of the Forum should concentrate on these issues, to enhance shared learning of the realities of day to day service delivery, and the exchange of policies and procedure. Service agreements also help keep Forums focused, as well as the individual agencies, and can prevent “drift”

Making Partnerships work 2

Interview with Mr. Pat Dolan, Regional Co-ordinator of Family Support Services and Course Coordinator in UCG in the Masters in Family Support.



Can you give me a pen picture of youth homeless in your region – the key characteristics?

There seems to be two “groups” of young people who present as out of home in the region. There are those who have a home but are not using it, known to services, normally the regulatory ones like probation, the Gardai, social services. Most leave home after an “event” that triggers them leaving, where they abscond, and entrenched positions are quickly adopted. Early intervention and “repair” work aimed at getting the young person home can be done, and can be successful – this can be done by a JLO, social worker, community support worker. These young people can often “age out” of their difficulties, and make the onward transition into adulthood successfully.

However, the other group are those who have protracted periods away from home. They often have very poor networks of support or friendships, have no sense of connection, and a range of accompanying difficulties that can significantly compound the problems of being out of home. These can include mild learning difficulties, ADHD, issues around their sexuality, poor social presentation. These are children who don’t just suddenly appear – they have been on the circuit” of services for many years. This group, whilst a small percentage of the adolescent population, take up a disproportionate level of services, partly due to the manner of how they are perceived by the services – often they are demonised, and their behaviour becomes the focus of intervention, not their actual needs. They become “*famous for all the wrong reasons*”

Why do you think it is like that?

One of the reasons why this is like it is, is the persistent failure of services to invest and refocus on preventative services. Health Boards have adopted a “rescue” approach with children, reacting to the most urgent and chronic of situations, whilst on the other hand, the voluntary sector have tended to adopt a view that anything other than a universal approach to help is not for them to be dealing with. Children seem to fall from the latter universal support to the most chronic very quickly, because there is no shared ownership by all those involved in seeking to support and address the emerging issues. We end up merely paying out for the mistakes that we make. To add to this, the blame culture and fear of risk taking has meant that we have developed an inability to work with young people effectively.

In terms of working in inter-agency processes, what have you identified as some of the key barriers to them being successful?

The barriers we experience here are certainly no different to those experienced across the country. A primary barrier undoubtedly is that we continue to see child welfare services being delivered in a discipline based approach, which has very little to do with actually addressing the **needs** of the child. If those needs are not central to all that we do, it is unlikely that we will be in a position to effectively intervene. In inter-agency forums, all too often people work to the agency, not to the task. In essence, what we are asking families to do, in terms of putting aside their own positions, listening, agreeing to work on specific tasks, respecting each other etc, is what forums seem to be unable to do. It too often becomes an agency issue forum, not a child issue one.

Another barrier has been the failure to ask “what works best in this situation” – it is not so much about the who and the where, but the how, - what has been tried and tested and has demonstrated that it can effect change in a given situation? Professionals may need to acknowledge that perhaps the best person to work with a young person is a local advocate or mentor – this challenges professionals, but the basic concentration must be on providing **practical** supports for young people out of home. Because they are a mobile population, and therefore engage in a range of services, they have a tendency to highlight and expose the ineffectiveness of inter-agency relationships and processes more than other populations of young people.

Another barrier has been the inflexibility of services, and there inability to think outside the box.

How have you tried to overcome some of these barriers?

One of the ways we have got around some of the traditional barriers of inter-agency working, which tend to be around issues of accountability, control, and a sense of not being valued and that “Big Brother” is watching, has been to actually establish and manage services together. A joint approach to the implementation, funding, staffing and management of projects in the West has had significant impact on the ability of the various sectors to actually work together. Too often strategies single out “lead” agencies to take on specific tasks, or to be the lead player. This is a dangerous approach, as that agency / service might not have any ability or track record in actually working with other providers in delivering services. What should happen is that agency X,Y and Z are identified as the most appropriate agency to work on a particular issue, and from them agency X and Y are best placed to actually deliver.

Do you feel that inter-agency working in the area of youth homelessness is an effective means of developing and monitoring services?

Inter-agency Forums are not necessarily the best means of delivering services. If they deal purely on operational matters (an inter-agency approach to individual children) then they can be quite effective, but my experience has been that anything outside of this, it just becomes too difficult to pull it all together. There are too many variables over which forums have little or no control, they depend too heavily on good will, on insight, and on the ability to form meaningful

networks. It is naïve to believe that these forums can do all that – the more sophisticated they are, the more likely they are to run into problems.

Should inter-agency forums deal with the issue of funding?

Putting funding on the agenda of inter-agency forums is the greatest disaster of all. Getting a group of agencies together, and then telling them to sort out the funding between them is disastrous. There are too many biases, and too little concentration on value for money.

How would you define effectiveness in terms of inter-agency forums?

What makes an effective inter agency approach is where there is a focus on quantitative outcomes. There must be agreed objectives, which can translate into tangible actions. There should be an awareness and agreement of what the end picture will actually look like, in terms of services on the ground, and an agreement on how we are to get to that position. A useful evaluative tool is for such forums to actually take a case by case review of the children using the service – are things better for the child as a result of our activities – if so, how, if not, why not? If the inter agency forum is not effecting change for the young person, it should be disbanded.

Further, forums that are set up should have a definite life span, with an identifiable timetable of meetings and operational procedures.

If you cannot touch it, feel it or know it, it should not be included.

How do you see the expansion of service providers in terms of meeting the needs of the young person out of home?

The expansion of service providers has huge potential to be a disaster. It has increased the teams, but not the team work. One area that does however require expanding is the expertise around ***engaging*** with these young people. It doesn't matter how many agencies we have, how sophisticated their intervention program, or how qualified their team is, if they cannot actually engage with the young person, all the rest becomes ineffective. One of the very useful ways that we have overcome this is in the development of "**project worker**" posts – we have dropped the labels, and started to be "workers". This approach has had a significant impact on our ability to engage with young people.

How have you dealt with the issue of meeting the needs of young people out of home who come from the rural areas of the region?

Most of those from the rural areas are in the older age range (17-18), and it is a seasonal element. In areas where it is not sustainable to put dedicated services in place, one of the initiatives we are considering is the option of having mobile support services – in England they are called Peripatetic Services. We are interested in developing this further, and would welcome the opportunity to look at a joint Health Board approach to piloting it.

Notes

Appendix 1

Incidence of Youth Homelessness: South Eastern Region – 2002

Previous Research findings:

- The largest population of young homeless people were those *intermittently out of home*
- The primary reason for leaving home was *“family problems”*
- Anecdotal evidence suggested that there was an amount of *“hidden homeless”*
- The incidence of youth homelessness in the area was significantly under-reported, due to
 - a) differing interpretations of the definition of youth homelessness
 - b) variations in “counting” methods
 - c) the fact that not all young people out of home presented to the support services
 - d) those intermittently out of home were not included in the data
- There was a growing awareness of the difficulties faced by young people out of home, particularly from the rural areas, where due to lack of services engagement was minimal and access to information about their needs was hard to gather
- There was an increasing number of non – nationals coming to the attention of the services, and an identification of the limited resources available to deal with their presenting needs’

“It was clear that the statistical information available did not reflect the reality of those working on the ground with these young people”

Research Findings into Incidence of Youth Homelessness in the South Eastern Region

In 2002, the South Eastern Health Board undertook research into the “true extent” of youth homelessness in the region. The core findings were:

Kilkenny /Carlow	Wexford	Waterford	South Tipperary	TOTAL
35 (2)	41 (20)	21 (13)	45 (22)	140 (57)

- More females than males presented as being out of home (62% to 38%)
- The majority of those were between the 16 – 18 age group
- Most of those out of home found accommodation with friends or relatives. Females are more likely to be offered emergency accommodation
- The primary reason for leaving home was *“family problems”*
- One third of young people are out of home *for more than three months* – this is an increase on previous research findings
- The winter months show a greater number of young people out of home, specifically the months of January and February

Questions for live interview session