Working with individuals who have experienced homelessness. Stresses and Successes.

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Working with individuals who have experienced homelessness . Stresses and successes.

Abstract

Purpose

Staff who work with vulnerable people with multiple needs are known to experience high levels of stress and burnout, as well as high levels of job satisfaction.This paper explores the experiences of staff working in a project with individuals experiencing long term homelessness in Lincolnshire.

Design/methodology/approach

An evaluation of a project working with individuals experiencing long term homelessness included a focus group set up to explore the experiences and well being of front line staff and managers. One to one interviews with staff were also held to provide more in depth data about the experiences of individual staff members.

Findings

Six key themes were identified from the discussions with participants. Decision latitude and the ability to follow service users on person centred journeys over long periods of time were positive aspects of the work which were highly valued and seemed to contribute to high levels of job satisfaction. Things which also made a positive contribution were elements of support provided by the employer and a number of personal coping strategies. Themes identified which had a negative impact on well-being related to high workloads and to the multiple and competing demands from service users and other agencies.

Originality/value

Few studies of any kind have explored the experiences and wellbeing of staff working in the frontline of homelessness services. This small scale qualitative study provides a number of suggestions for further research with this population. Findings cannot be generalised but match those of other recent studies which suggest high levels of stress but little evidence of burnout, and that carefully developed workplace support mechanisms play a key role in maintaining commitment to the role and preventing burnout.

Key Words Homeless. Rough sleeper. Stress. Staff support. Decision latitude.

Background

It is known that levels of stress, burnout and what has been termed 'compassion fatigue' are elevated in those who work in front line health and care, or human service roles (Maslach,2001). This has been shown in social work (Kinman and Grant, 2011), nursing (Adriaenssens et al., 2015), mental health work (Rossler,2012), medicine (Sherlock and John, 2016), teaching (Kokkinos, 2007) and other roles across a range of different countries and settings. At the same time people find these kinds of roles rewarding and often report high levels of job satisfaction (Collins, 2008).

One example of a challenging human service role is that of working with individuals experiencing homelessness. Working with this population of individuals who have often experienced multiple disadvantage and trauma, leaves workers at risk of secondary traumatic stress (STS) or vicarious trauma (Scanlon and Adlam, 2012). Frequent and intense contact with those who have experienced trauma has been shown in a number of studies to lead to secondary trauma and burnout (Shoji et al., 2015). STS occurs in up to 15 per cent of social workers, and 19 per cent of those working in mental health services (Shoji et al., 2015). In those working with homeless populations, some studies show significant levels of burnout and STS (Scanlon and Adlam,2012). A more recent study showed high stress levels in this population but no evidence of elevated levels of burnout and STS (Lemieux-Cumberlege, and Taylor, 2019).These authors suggest that protective factors, including various types of support, supervision, and CPD activities may be important in mitigating the potentially adverse effects of the work in this setting. A number of other studies have also elucidated the factors that can mitigate stress and burnout. These include: emotional intelligence, emotional support, resilience, and appropriate use of empathy (Kinman and Grant, 2011); also, greater degree of control over one's work (decision latitude) (Evans et al., 2005).

Resilience can be enhanced by a number of practices and support measures.The development of emotional literacy, effective supervision, and peer coaching are some measures that have been shown to facilitate resilient practitioners (Grant and Kinman, 2014). Decision latitude appears to be a key element in job satisfaction, resilience and preventing burnout.This element has also been shown to be a key factor in predicting health and mortality. For example, in some of the largest studies of their kind, analyses of long term outcomes for cohorts of UK civil servants showed that low job control was strongly predictive of increased coronary heart disease (Bosma et al., 1997). Oldham and Hackman (1980) showed that skill variety, autonomy, as well as feedback are key elements in predicting job satisfaction.The degree to which these elements occur in any given role are obviously dependent to a large extent on the particular job role, work place practices, and parameters set by employers.

Burnout and high stress levels can obviously lead people to leave jobs which are otherwise rewarding. Whilst other factors, including low pay and lack of career progression opportunities are also important factors, burnout, stress, and lack of control, are implicated in a good deal of the 'churn' of staff turnover in many human services roles (Franklin,2014).

Understanding clearly the factors which can uphold job satisfaction and reduce stress and staff turnover, is of real importance. Employers have ethical and legal duties of care

towards employees. The personal costs to individuals of burnout, in terms of short and long term effects on health, well-being and life circumstances can be considerable. In terms of workforce planning, recruitment and retention issues are central. Costs to employers of high staff turnover are significant. The Chartered Institute for Personnel and Development established the average cost of recruiting an employee in the UK as £2,000 (CIPD 2017).The public sector has particularly high turnover rates for staff. The rate in adult social care in England in 2016/17 was 27 per cent. This equates to 350,000 leavers (Skills for Care, 2017) and suggests costs of up to £700 million per annum to maintain just the social care workforce as it stands

There is less data about these issues in the homelessness sector. Organisations working in the sector have called for government and local authorities to gather data in relation to staff turnover in the sector, since at the moment this does not seem to have been done systematically in the UK. (Centrepoint, 2016). Reports from individual projects and some parts of the UK note high staff turnover rates for a variety of different reasons (Fitzpatrick et al., 2017) but the national picture is unclear. Studies in the US have also noted the scale of the challenges in measuring, providing training for, and retaining the workforce in the homelessness sector (Mullen and Leginski, 2010).

Studies have noted the benefits, in terms of retention and job satisfaction, and service user outcomes, when psychological support and spaces for critical reflection are provided for staff working in this sector (Homeless Link, 2014). It is also the case that providing training for homelessness service workers in psychological interventions, and understanding issues such as trauma and substance misuse, will help them to more effectively provide support to service users and also to be more effective and more satisfied in their role (Benson and Brennan, 2018). In recognition of the nature and demands of this type of work, and the kinds of support that may be helpful to both service users and staff, there have been initiatives to bring some of these support mechanisms and approaches into housing and homelessness agencies generally. The term Psychologically Informed Environments has been used with regard to these programmes (Department of Communities and Local Government, 2012), and this approach has been recommended and adopted in a number of agencies in the UK and elsewhere (Homeless Link, 2017).

The above notes some limited findings in relation to staff who work in the 'homelessness' sector. Overall, research findings in terms of the actual emotional health and levels of stress among homelessness workers, the support and training offered to them, and the demands and level of autonomy afforded to them, remain limited, varied and heterogeneous. We set out to add to knowledge in this area by exploring the experiences of one staff team who work intensely with a service user group experiencing long term homelessness. The project was the result of a new multi-agency initiative and involved a staff team who were able to work flexibly and intensely to provide dedicated support to entrenched rough sleepers in one county in England.This study of the staff group was part of a larger evaluation of the project. Because of the nature of the project, members of the service user group were experiencing multiple and entrenched problems. We were interested in the perceptions of staff as to the nature and impact of the project in terms of outcomes for service users but at the same time wanted to explore the impact of working on the project on staff themselves, in terms of stress and impact on well-being.

Methodology

In a focus group and a series of one to one interviews we explored with ten workers their experiences over the period of eighteen months since the start of the project.

Design

We set up a focus group with the aim of including all staff who worked on the project. In addition one to one interviews were conducted with each staff member, in order to provide opportunities for them to elaborate on issues raised in the focus group and to discuss other issues which they may have not felt comfortable expressing in the group.

Focus groups provide one of the best methods for allowing individuals to share and compare their experiences with each other and to explore issues of shared importance (Bowling and Ebrahim, 2005). Additionally, focus groups allow for the explicit use of group interactions as research data, as well as individual participant responses to researcher prompts and questions (Morgan, 1998). Willingness to fully engage in a group discussion is instrumental in generating useful data and can be achieved more readily within a relatively homogenous group (Krueger,1994).

The focus group involved 10 participants: 8 frontline link workers and 2 managers. This was the whole staff team that were working on the project at the time.The managers absented themselves for the latter part of the focus group discussion to allow for a more free expression of views by the link workers. The age of the participants ranged from 28 to 55. There was an even split of 5 males and 5 females. Two researchers took part in the focus group; one acted as moderator and the other note taker and observer. In addition the session was audio recorded and later transcribed.

The moderator posed a series of questions, and offered prompts to assist the group in exploring their experiences of working on the project, with particular questions about stress and impact on health and well being.

Semi-structured interviews include a set of fixed questions, but few or no response codes, and are designed to ensure that all participants are asked the same things, but also to allow room for the interviewer to probe and ask additional questions, and for the interviewee to raise additional issues (Bowling and Ebrahim, 2005).

The interviews were conducted by one researcher, audio-taped and transcribed verbatim. The interview guide and schedule used for this process was developed by the researchers following a comprehensive review of the literature and familiarity with the aims and context of the project

Questions asked in both the focus group and the one to one interviews included: 'what is working well so far in this project?', and 'what is not working well?' (for you as a worker?'); 'What do you do to support yourself, and to take care of your own mental health?'; and 'What support is provided by your employer?'

The same questions were consistently asked of each participant. One of the ten participants from the focus group was unavailable for interview.

Ethical issues and approval

Permissions for the study were given by the University of Lincoln School of Psychology research ethics committee. All participants gave written permission for their data to be used, following provision of detailed participant information sheets. These included guidance on confidential support on offer, independent of the employing organisation, for any participant affected by or wishing to discuss further issues raised in the interviews or focus group.

Data Analysis

We used thematic analysis to assess the total data set gathered from the focus group and individual interviews. This approach is suited to questions relating to people's experiences and to the ways in which people construct meaning from their experiences. Its purpose is to identify patterns of meaning across a data set . We used the six steps advised by Braun and Clarke (2006), which include first becoming familiar with the data set, then identifying initial codes, searching for themes which emerge, reviewing those themes, and then settling on the final themes before writing up.

To ensure the credibility and reliability of coding, transcriptions were independently reviewed and coded by both the first and second author and discrepancies and key themes were discussed. One of the researchers had previously conducted a lot of interviews with service users of this project. The other has particular interests in the issues of stress and burnout in helping professions. To ensure a degree of reflexivity, the two researchers discussed pre-existing knowledge, perceptions and biases in relation to the subject before assessing the data. N Vivo software was used to assist in managing the data, coding and identifying themes

Findings

A number of themes were developed after analysis and discussion of the data. Initial themes were revised to arrive at the following six separate but clearly related themes. Quotes are attributed to either a participant in an individual interview (e.g. IP1) or a participant in the focus group (FGP1)
Checks were made for consistency between statements made by individuals in the focus group and the same individuals in interviews. There were no significant discrepancies in this regard.

Decision latitude

Asked about what worked well, a number of participants pointed to the degree of flexibility and latitude in terms of decision making that the role afforded to them. In practice this meant that the participants were able to accompany service users to appointments and

change plans, often at short notice to suit the needs of service users. They were supported by managers to be able to do this.This was perceived as being both beneficial to service users and also for job satisfaction.

> Having that flexibility, having that time to be able to go out and complete and do those interventions with those people....being able to be at each step of their journey really (IP10).

> It's our availability and our latitude. From the clients point of view you are available frequently.... and we have such scope to wiggle our diaries (FGP8).

Workload stress

In depth interviews allowed for a more detailed understanding to emerge of the nature of the stresses and challenges faced by staff who undertake this kind of work. Common comments related to high workloads, and the consequences in terms of this spilling over into personal time. Caseloads had in some cases doubled from the allocations which were given at the start of the project. Inevitably this led to individual workers completing administrative tasks in their own time

> The workload it has gone up quite a lot from what was originally detailed. I got interviewed and was told there between 8-10 clients maximum. I think I am currently on 20, …..it is going to go up another 4 people, another 4 personalities you have got manage and another 4 set of notes you have got to do, another 4 set of journeys you have got to help people along at varying different levels of support needs..... So you have got to balance your time from actually seeing your clients and working with the people you are working with and then time to do your office work which a lot of people I know end up doing it from home (IP9).

Even if not carrying out work tasks outside of work time, participants reported thinking about uncompleted tasks or just the welfare of the service users at weekends.

> I know it has impacted on me personally when I have got a client when I go home on a Friday, a client I have not managed to see that week or something that I said I was going to chase up and I have not been able to do it. It really gets to you a bit and you go home thinking: shit, I hope he is alright over the weekend. I don't know about the others but I certainly feel that we carry work home a lot more than we used to (FGP5).

Some were clear that the demands of the role meant that they never switched off from either being at work or ruminating about work.

> I don't think you really ever shut off. Note pad and pen next to my bed. Even at the weekend. There might be something that pops into your head and I need to do that Monday because if I don't write it down then I will forget and things like that. It is full on and I am quite open with [colleague] that it is quite full on and yeah just giving me dark shadows under my eyes [laughter] (IP5).

Stressful but rewarding

A frequently expressed view was that the stresses were a worthwhile price to pay since at the same time it was very rewarding work in a number of ways, particularly when observing positive outcomes for service users. Participants frequently referred to the motivation to do this kind of work and wanting to 'make a difference'. Whilst this was not always possible when working in this sector, several participants suggested that this particular project did allow for real measurable differences to be observed following their interventions with service users.

> It is stressful quite a lot of the time. A lot of pressure from clients and other agencies to get things done, um, to get their ambitions met, to get that trust initially and that can be quite stressful but at the same time it is very rewarding when you do get them outcomes (and we do get them) (FGP4).

> Exciting, stressful, more stressful [laughter] but no it is really rewarding, insightful yeah it can be really stressful but it is really good at the same time when you look at where the people you work with started from where they are......what I really like about it, I like knowing you can make a difference and you generally and I know it is a cliché thing to say but a lot of people say 'you are making a difference' you don't always necessarily feel like you have but the thing I find in this team is that I think I actually am because there is a difference.(IP9).

Another element which as identified as contributing to job satisfaction was the partnership working inherent to the project. The project had been carefully designed to include collaborations with a range of agencies, including : county and district councils ; health and mental health agencies; and police and criminal justice agencies. In practical terms, this meant the involvement of representatives from these agencies on the steering group for the project; workers from some of the agencies being seconded to work on the project; and in the case of district councils providing housing stock.

> But actually this genuinely feels like a partnership collaboration across both housing and health, and whilst there are and have been frustrations still actually we have been able to unpick a lot of those because of that partnership or those partnerships we have in place. ….. one of the primary reasons why it has been successful not only have we got the resources and the commitment from the districts and the partners in doing things differently .... the ability to follow a person wherever they may be on their journey and not be restricted by whether they be on the streets, in someone's home, in their own home, in prison, in hospital and I think what that has enabled the staff to do is to build a relationship, break down barriers with the people they are working with. (IP8)

The satisfaction of following long term person centred journeys

The decision latitude discussed earlier meant that workers not only had flexibility in terms of how they worked but could also follow individuals over periods of two to three years and witness significant improvements in the lives of those individuals. This aspect was seen as

particularly rewarding. A number of the workers had previously worked on other programmes in the same sector and in some cases with the same individual service users. They were able to observe and comment on the differences in the approach offered by the current programme.

> one of the advantages from a personal level, so these people I was a Street Outreach Worker from 2011 and so nearly all of these people are a part of this project I found sleeping in various different sites myself whether it be carparks or what no so I have seen some of what they have been through on the street....to see those people's personal journeys that I say whether it be under a bridge, in a carpark, in a door way when I first met in 2011 is great (IP8).

This intensive work over periods of time meant that the work was perceived as more person centred. Rather than focussing on one aspect of the needs of a service user, the project allowed for a broader and more holistic focus, and also to offer real continuity and commitment. A common experience for service users is for a service to stop offering support if the user either fails to attend an appointment or if another need is seen as more pressing. For example, typically mental health services cease support if substance misuse is seen as a more significant problem, and vice versa.

> I think we are a lot more 'person-centred' a more 'person-centred approach' than other providers or what services do from my experience anyway. We know for a fact we are working with people with the most complex needs whether that would be substance issues, mental health issues, or whatever these people have been very let down by services including us in the past which now which means while they can be quite sceptical sometimes aggressive towards us well I think all the staff know especially on this team know who they are working with, know the client base that they are working with and they are aware of that risk and will persevere but that is what is different to other projects that I have witness compared to this one, probably yeah we are more 'person-centred' and we are more than happy and willing to continue to support and getting the trust and hopefully having a beneficial relationship out of them (IP2).

Workplace support/emotional support

The organisation which designed and set up the project was careful to build in a number of support mechanisms for staff. They were able to use significant previous experience in the sector, to develop an understanding of what is necessary and what works best in providing support to staff. One element of this involved experienced managers who offered regular formal supervision and were available daily as a sounding board. This was highly valued by a number of the participants

> That individual will not give herself credit, she holds this. You are all brilliant but she holds it, she is like the fulcrum (FGP2).

> She has to listen to eight of us rant at her on a daily basis, never whinges, takes abuse off us as well (FGP4).

> X is very attentive to if you are sounding still stressed when you are checking in, then

that conversation does not end until you have been given a bit of time to speak about it so she really does look after you (agreement throughout the room) (FGP6).

Another key element of the support was the buddy system which involved support workers being paired and as a matter of course checking in with each other on a daily basis.

We also have our buddy system management working so we are in touch with our buddies repeatedly during the day. I am in touch with my buddy and we are able to vent to each other during the day, and at the end of the day we check in to say safe at home, and when there has been a tricky day we phone each other (FGP8).

Additionally the organisation put on a range of team building and social events to support morale and foster cohesiveness in the team

We have a thing on the phone, we do lots of team building events, there is lots of support within the team, yeah we do lots together as a team because we don't spend a lot of time working together. Sports days, team lunches…. (IP4).

Coping strategies

Each individual was asked about their own particular strategies for coping with the demands of the role. A range of individual and collegiate activities and mechanisms were highlighted. Different forms of exercise, spending time in nature, personal relationships, cooking and various hobbies were named; also the support from colleagues and other mechanisms provided by the employer, including a confidential telephone counselling service and organised well-being days and events. The extent to which individual elements were valued varied across the team but each participant found some element useful.

For a few personal exercise and other regimes were most valued.

I have struggled with my own mental health at times as a result of this work. Not being able to switch off from worrying about people. In terms of my coping mechanism I have started yoga which I have found to be incredibly helpful'(FGP2).

Others combined personal regimes with support from others.

gardening, give me a little bit of time to water my plants at the end of the day or something like that and having a chat with [undisclosed colleague] and I think having a really good team (IP5).

I am very good at taking my hat off when I leave. I think I am quite a resilient person I think that has got me through my own life experiences but it is not saying that I am human either [laughter]. I like the gym, I do go to the gym but I have also got family so I like my family time my kid time and I am very good at what happens at work I leave at work. I go home. (IP7).

Gym, surrounding myself with friends and family. It is quite difficult when you work for an organisation working with vulnerable people because obviously it is not something you can go home and necessarily talk to people about 'oh I spoke to so and so today' because it is all confidential service but no attending team meetings, talking to our team leader if I needed to, talking to (other agencies) if I felt like I needed to and personally for me going to the gym and surrounding myself with positive people (IP10).

In most health and social care settings, reflection is valorised as an important process. This is often formalised via supervision processes but is also recommended as something to be used more informally either individually or with colleagues, as a way to learn from work experiences.A few participants referred to processes of reflection, which helped them to process elements of their working day-to-day

That drive home even. You can be in reflection, I probably have things going through my head at that time but the time you get home that is it. You know what you are doing for the next day so I am quite good at being able to do that. I am not I would never be, if I was unsure about anything I would always be the first to go to [undisclosed colleague] anyway because they are both really good, they are really approachable and they do listen and they are really supportive (IP7).

Whilst periods of reflection can be provide useful learning process, continued thinking about workplace experiences can become unhelpful rumination if thoughts about work come to dominate non work time. As noted earlier in relation to workloads some individuals found it difficult to switch off, despite a number of coping strategies.

it is hard to switch off to be fair yeah. I have always, but you have got to find a way so I make sure I have locked the front door, unless I am on call, work phone is switched off. Badges off. Just do what anyone normally does really just try and chill out, I have got my dog, I have got my partner so that helps yeah do stuff at the weekend, try and take my mind away. It is quite hard to sort of switch off because where I live, there is a lot of clients who I work with and I normally see them on a weekend and sometimes I saw one of them at the weekend who I don't work with anymore but the Outreach Team does and they were like 'ring [undisclosed colleague] and I was like 'it is Sunday mate she won't be answering the phone'. I can get a bit. It is my fault for working where I live. (IP9).

Discussion

One of the ways that this project clearly differs from other housing and homelessness projects is the degree of autonomy and flexibility offered to workers to allow them to work intensively and in whatever way is required to best achieve outcomes for the individual on their case load who has a history of long term rough sleeping. As noted earlier greater control over work issues (decision latitude) is known to be a mitigating factor against stress, and this remains the case even where workloads are high or excessive (Heinrich et al., 2019). The data from this study seem to be bear this out, with a number of individuals pointing to the degree of decision latitude that they are afforded providing one of the key elements of job satisfaction.

In addition to the day to day autonomy another key factor seems to be following individual journeys over a period of time and being able to witness positive outcomes at the end of those journeys. The reasons for setting up the project in this way related to the perceived needs of the population that the project was set up to serve. Experience of the service

providers and previous research suggested that to achieve successful outcomes for long term rough sleepers, both in terms of housing and in terms of personal health and well-being, intensive and long term support would be required (Nelson et al., 2015; Johnstone et al., 2016). Also that a flexible way of working would be required that enabled link workers to respond in whatever way necessary on a given day or week so that individuals with multiple and varying support needs could most effectively be helped.

This kind of long term intensive support appears to have also provided a work experience that provides high levels of satisfaction and intrinsic reward for workers, despite the stress and high workloads. There is no doubt that stress and high workloads do have an impact on well being, particularly over time (Sharma and Cooper,2017). In the growing literature on 'well being' a number of authors have explored how emphasis on individual coping can mask organisational responsibility and can also divert from a wider structural or political analysis of what drives the demands on those working in public services (Collins, 2008;Garrett, 2016). In an era of austerity,workloads have clearly increased for many who work in public services. The impact on workloads is generated both by cuts to workforces, and also by the increase in demand as austerity and welfare cuts impact on service users (Iacobucci, 2014).The impact has been particularly visible in the increases in numbers of individuals who experience both short and long term homelessness (Loopstra et al., 2016). A more detailed structural and political analysis of the ethics and impact of the 'austerity' agenda is beyond the scope of this paper, but has been well rehearsed in this journal.

As for organisational responsibility, in this case, a number of steps taken by the organisation to support staff were valued.The different elements of support were seen as useful to varying degrees by individual staff. The element which was valued most highly was the buddy support system. This echoes a body of literature which points to the benefits of peer support structures (Agarwal et al., 2019). Peer support programs can prevent behaviours such as disengagement, absenteeism, and intentions to leave the organization (Whybrow, Jones, & Greenberg, 2015).This buddy system was planned from the outset as a key element, with two purposes. The first was for risk minimisation; the system ensured that each staff member checked in with a paired link worker at the beginning and end of a working day. The second was a recognition that things can build up over the time interval between formal supervision sessions, which can be a number of weeks. A daily check in with a buddy allowed for the offloading and sharing of issues on the day that they occurred, thus preventing lengthy rumination before opportunities for discussion.

The formal supervision was also seen as a key element by participants and the project manager was very committed to this, noting what is reported in a lot of literature, that regular planned and structured supervision offers a range of benefits to all concerned and is important in health and care work (White et al., 2010).

The degree of autonomy afforded to workers together with the support mechanisms on offer appear to have contributed to a project in which despite highly demanding work, there has been little staff turnover, and job satisfaction remains high. It was reported that the few staff who did move on during the first year of the project, did so mainly as a result of planned career moves. Only one person left due to the work being more intense than they anticipated.

Some caveats need to be applied to these findings and interpretations. The focus group involved the whole staff team, including managers. Although managers absented themselves for part of the session, it may still be the case that individuals selected what to

verbalise based at least in part on what they thought managers might want to hear, or on what they thought other colleagues might want to hear. The findings showed that staff valued the project and the leadership and this may have predisposed them to be kind and to edit out any criticisms or negative perceptions that they did have.

Focus groups and one to one interviews are methodologically different and some researchers suggest that this means that they tend to produce quite different findings (Robson, 2002). In this small study, there were no particular discrepancies between the two sets of data. This could be interpreted as increasing the validity of the findings or alternatively as showing that individuals did not want to be seen to contradict themselves by saying things in interview which differed significantly from what had been expressed in front of the same researcher in the focus group.

The findings reflect the views of a small team of staff about their work. We cannot assume that their perceptions of the work with service users are shared by those service users. However, the focus of this particular study was specifically on staff experience rather than service user experience, and the nature and scope of the study did not permit inclusion of service user perspectives. A large number of interviews with service users have been conducted as part of the programme evaluation and these will be reported elsewhere.

Our findings suggest little evidence of burnout, despite the levels of stress. This may be genuine and relate to the job satisfaction reported, but it may also be the case that individuals were either not aware of signs of burnout or did not wish to reveal them in front of co -workers or researchers.

Conclusion

This was a small scale qualitative study with a group of individuals working in a fairly unique project. Therefore caution needs to be exercised in making any generalisations to other settings and other groups of staff. However, our findings match the recent findings of Lemieux-Cumberlege, and Taylor (2019) in relation to the emotional well-being of workers in the sector. That is, despite high workloads and stress levels, there was no evidence of burnout, and this was probably due to the protective factors afforded by support mechanisms. A combination of daily peer or buddy support together with effective and regular supervision provided by managers seem to provide useful holding mechanisms for containing the stress and demands of the role.

In addition, it is clear that one of the factors that made the work for the participants different to many other homeless projects was the level of autonomy or decision latitude afforded to them, as well as the ability to work with people over relatively long time spans (2-3 years). Job autonomy is strongly linked to health and well-being and dedication to a role. High staff turnover impacts negatively on organisational costs, the experience and outcomes for service users, as well as the well-being of staff. From the perspective of all stakeholders, improving staff job satisfaction and staff retention, is a valued good. It seems that providing as much role autonomy as possible seems to be a particularly useful way of maintaining engagement and job satisfaction among those engaged in this kind of work.

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