

Intended and actual outcomes of hostel accommodation use for single
homeless people: a critical realist explanation.

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Abstract

Despite an expanding body of research documenting the harms associated with hostel accommodation, it continues to play a central role in response to homelessness across the United Kingdom and Ireland. While few would deny the existence of harmful hostels, many continue to extol the impact of ‘good’ hostels, arguing that they play a unique and important role in resolving homelessness and associated support needs; a role that some argue cannot be replicated in Housing First, housing led, or rapid rehousing models, despite a growing consensus regarding the efficacy of these approaches. This study takes as its starting point this contested terrain, with a particular focus on identifying and understanding the outcomes of hostel accommodation. Utilising a conceptual framework rooted in critical realism, the study seeks, first, to bring conceptual clarity to bear on what is signified by the term ‘hostel accommodation’. It aims to do so by setting out the constituent components of hostels, both necessary and contingent, with a view to understanding what it is about these components that sets a hostel apart from other responses.

The thesis continues to draw on critical realism to distinguish between three ontological domains of reality – the real, the actual, and the empirical - with this stratified ontology then allowing for a close exploration of the divergence between the intended and actual outcomes of hostel accommodation. Drawing on the testimony of national key informants – spanning hostel providers, commissioners, academics, and hostel sector representatives - the thesis identifies four ‘tensions’ arising between that which is intended and that which is actualised in hostel accommodation. These are the safety-harm tension, the independence-dependence tension, and the inclusion-exclusion tension, with these three tensions then functioning collectively as a fourth (meta)tension, namely the progress-entrenchment tension. The thesis is structured around these tensions which are expressed as hypotheses and then interrogated through a qualitative multiple case study design. The study design pursued cases of maximum difference across a range of hostel components – such as hostel size, support model, and target group – allowing for the perspective of hostel managers, staff, and residents to be explored across a broad gamut of hostel types.

The thesis concludes that the intended outcomes of hostel accommodation - safety, independence, and social inclusion – are vital to human wellbeing and that living environments that enable the actualisation of these outcome ought to be valued. The

necessary tendencies of hostel accommodation are, however, strongly oriented against the actualisation of these outcomes, toward their anthesis (in the form of harm, dependence, and exclusion). While hostels can (sometimes) generate intended outcomes, doing so requires purposeful and resource intensive efforts. Even with clear intent, consistent effort, and optimal conditions, hostels often actualise outcomes that are not only contrary to those intended but are (at least in part) generative of the need and demand that informs the basis of that intention. This means that hostel accommodation is not only ill-suited to generating its intended outcomes but is also generative of illusory and contingent versions of the need it seeks to address.

For Sadie and Jimmy McMordie

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Chapter 1: Introduction

The provision of shelter for (some) who are unable to secure or sustain their own housing has a long history in Europe. In the United Kingdom scholars have studiously traced the evolution of such shelter from the almshouses of the late sixteenth century, to the union workhouses of the mid nineteenth century, and on to the Public Assistance Institutions of the early twentieth century (for a detailed account see Crowther 1991 and Irving-Clarke 2019). Scholars have similarly delineated the emergence of Ireland’s Houses of Industry in the early eighteenth century through to their consolidation in county homes in early twentieth century (for a detailed account see O’Connor 1995) and beyond (see O’Sullivan and O’Donnell 2012 for accounts of institutional life in Ireland). It is not the intention of this thesis to rehearse or interrogate these histories, but to open with a brief glance at broad trends so that hostels might be positioned within their historical context.¹

These early accommodation-based responses were often large-scale, poor quality, and dormitory-style in form (Crane, Warnes and Coward 2012; Irving-Clarke 2019; O’Sullivan and O’Donnell 2012; Parsell 2018). Disquiet around the appropriateness of such provision (and associated impetus for change) often found a focus on the impacts of congregating people together in a communal environment. As Irving-Clarke (2019) citing Murphy (1991) explains:

“The biggest change [in the early twentieth century] . . . was in the treatment of people with learning disabilities and/or mental health problems. Such people . . . were seen as a source of major disruption in the union workhouses (Murphy 1991). Unruly and unpredictable behaviour was . . . a ‘burden to both inmates and staff’ (ibid: 34) . . . [with] workhouse guardians adding their voice to others for these individuals to be removed elsewhere.” (60)

The separating out of groups of people and associated need to offer distinct forms of accommodation, (at least in part) fuelled a rapid expansion of the asylum and later Mental Health Hospital system in the United Kingdom (for a detailed account see Jones 1972). Research undertaken in the early 1940s into the efficacy of this system *also* took issue

¹ This introduction builds on and expands work previously presented in the following publication: McMordie, L. (2021) Avoidance strategies: stress, appraisal and coping in hostel accommodation. *Housing Studies*. 36 (3): 380-396.

with its tendency to congregate people together in large-scale, communal environments (Irving-Clarke 2019). Here, concerns focused on the institutionalising effect of such settings, with specific criticism reserved for a widespread failure to enable people to move-on from these institutions to more independent living environments (Irving-Clarke 2019).

Across the 1950s and 60s momentum gathered behind movements that sought to shift accommodation-based responses away from congregate, institutional settings. Ridway and Zippel (1990), described this movement as reaching its zenith in the 1970s, with a paradigm shift away from the homogenous grouping of people in congregate, institutional settings. Along with other scholars, they have carefully delineated the subsequent turn toward supporting people in their own homes and communities where possible; or, where independent living is not feasible, in small-scale supported accommodation projects which (ideally) seek to maximise opportunities for privacy and self-determination (Timonen and Doyle 2008; Ridway and Zippel 1990; Parsell 2018; Irving-Clarke 2019).

In the sphere of homelessness, evidence points to acutely negative outcomes where accommodation-based responses are large-scale or congregate in nature (Boyle and Pleace 2017; Busch-Geertsema and Sahlin 2007; Credland 2004; Fitzpatrick et al. 2010; Mackie, Johnsen, and Wood 2017; McMordie 2020; Mitchell et al. 2004; Watts et al. 2018; Watts et al. 2021). A recent meta-analysis of accommodation-based programmes for individuals experiencing homelessness found that certain forms of accommodation cause people harm:

“Interventions which are described as Basic/Unconditional (i.e., those that only satisfy very basic human needs such as a bed and food) harm people: they had worse health and housing stability outcomes even when compared to no intervention.” (Keenan et al. 2021)

There is also a growing consensus that (at least some) users view hostels as frightening and intimidating places (Homeless Link 2013; Johnsen and Teixeira 2010; Mackie, Johnsen, and Wood 2017; NIHE et al. 2016). The practice of exclusion (where an individual is evicted from hostel accommodation) and the phenomena of abandonment and avoidance (where an individual will sleep rough or squat when a hostel bed space is available for their use), represent a deep challenge to the efficacy of hostel accommodation at its most basic level, namely that of providing shelter. Considering this evidence, Mackie et al. (2017), along with others, have argued that hostel and shelter accommodation can deepen the impacts of homelessness and may even function as a

barrier to move on, rather than facilitating exit from homelessness as intended (Busch-Geertsema and Sahlin 2007; Johnsen and Teixeira 2010; McMordie 2020; Mackie, Johnsen, and Wood 2017).

Growing awareness of these impacts has led to (some) movement away from basic and large-scale provision. The Glasgow Hostel Closure and Re-provisioning Programme, for example, sought to ensure the “*re-provisioning [of] homelessness services in the city to eliminate the need for large scale hostels*” including the “*decommissioning of . . . three large-scale hostels*” (Fitzpatrick et al. 2010: 3). More recently the Scottish Government has committed to “*end the use of night shelter and dormitory style provision*” and all Scottish councils have developed rapid rehousing transition plans, which seek to ensure that temporary accommodation stays are either brief or bypassed entirely (Scottish Government 2020: 8). In the European context, Finland offers an example of a total shift away from hostel accommodation as a standard response to homelessness, albeit that much of the alternative provision developed retained a congregate dimension (Y-Foundation 2017).

Movement away from the use of shelters and hostels is – as a rule - far from paradigmatic in nature. Research on temporary accommodation in Scotland (Watts et al. 2018), for example, identified hostel accommodation as less dominant than in England, but still the second most common form of temporary accommodation nationally (based on snapshot data) and the dominant form of provision in two of the six case study areas covered. Writing on the future of hostel accommodation in England, Homeless Link (2018) note that hostels remain *the* default response to homelessness, accounting for “*96% of all accommodation projects and 96% of all bed spaces on the Homeless England database*” (11). The use of large-scale hostels also remains a notable feature of the sector. Homeless Link (2018), note that 20% of hostels in England have a capacity exceeding 40 beds, with 4% of all provision (over 50 hostels) having a capacity of more than 100 beds (Homeless Link 2018: 14). The use of shelters pre-pandemic also remained significant, and perhaps more so than is ordinarily captured and recognised in accounts of accommodation-based interventions:

“One striking – and shocking – point to have emerged during the pandemic is the extent to which dormitory-style shelters are still used to accommodate homeless people in at least some parts of England. There are no robust national statistics on the numbers of homeless people dependent on this kind of communal sleeping provision. But the challenge that some local authorities faced in quickly closing

down shelters as we went into lockdown indicates that they still remain a significant part of the accommodation support offered to people facing homelessness.”
(Fitzpatrick 2020)

The logic underpinning broader shifts away from congregate accommodation responses has, though, had *some* impact across the homelessness sector (for a more detailed account see Busch-Geertsema and Sahlin 2007 and Crane, Warnes and Coward 2012). Specific capital funding streams for the remodelling of homeless provision such as the Hostel Capital Improvement Programme (2005), Place of Change Programme (2008), and Homeless Change Programme (2011), have been lauded as instrumental in enabling (some) movement toward smaller-scale hostels and increases in specialist services, with these generally viewed as an improvement (Busch-Geertsema and Sahlin 2007; Crane, Warnes and Coward 2012; Homeless Link 2018). That is not to say that smaller-scale, specialist provision is the norm. As noted above large-scale hostels persist, and, according to a Homeless Link (2018) study, specialist provision constitutes only 7% of all hostels in England. Crucially, even where smaller-scale hostels *are* developed, they are frequently set within a transitional continuum, where access and move-on is determined by ‘housing readiness’, with an underpinning ‘treatment first’ philosophy often prioritising stability or recovery as a prerequisite of move on (Busch-Geertsema and Sahlin 2007; Ellison, Pleace, and Hanvey 2012; Johnsen and Teixeira 2010; Mackie, Johnson and Wood 2017; Sahlin 2005; Stewart 2018). Such transitional modelling can function to divide the homeless population into two distinct groups: those who can evidence change and progression and those with more complex needs who become *entrenched* within, or *excluded* from, the transitional pathway (Benjaminsen 2016; JRF 2016; Johnsen and Teixeira 2010; Kuhn and Culhane 1998; Mackie, Johnsen, and Wood 2017).

The expanding body of research documenting the harms associated with hostel accommodation – in both large-scale and small-transitory forms – sits against a robust body of evidence that supports the efficacy of Housing First and housing-led responses, where the rapid provision of permanent housing coupled with access to flexible support (if needed and wanted), bypasses or significantly reduces any need for hostels in the first instance (Boyle, Palmer and Ahmed 2016; Johnsen 2013; Padgett, Henwood and Tsemberis 2016). Despite this evidence, opinion (particularly in response to observable increases in homelessness) will often sway toward the expansion of hostel and shelter provision, including the opening of vacant buildings for congregate use by those rough

sleeping (O’Neil et al. 2017). This phenomenon is especially evident in public responses to street deaths, perhaps unsurprisingly so given the highly visible and urgent need for shelter of those affected (Busch-Geertsema and Sahlin 2007).

Similar trends are evident in the recent procurement of vacant hotels for the purpose of accommodating people sleeping rough or at risk of sleeping rough during the Covid-19 pandemic. There are, of course, differences between hostels and hotels - in building design, staffing and available social supports – but the shared idea is that congregate accommodation is a viable response to homelessness, and one worth pursuing. This (almost) default response of expanding congregate settings in response to homelessness extends far beyond its crisis driven origins; as housing or public health emergencies abate, ad-hoc congregate responses are often formalised into more permanent solutions. In Scotland, the Everyone Home Collective note that avoiding such formalisation requires purposeful preventative intention and activity:

“We must not inadvertently ‘design-in’ the sustained or increased use of hotel rooms, adding an additional layer to already complex housing and homelessness systems locally, beyond the short-term (2020-21) option they offer. This will not move us forward.” (Everyone Home Collective 2021 :9)

Where this purposeful intent is absent, hostels continue to be funded, re-commissioned, even expanded, and entirely new hostels continue to be developed. Greater Manchester’s A Bed Every Night programme, launched in 2018 in response to rising numbers of rough sleepers, has involved the development of multiple new shelters and hostels (Watts et al. 2021). The London Mayoral Housing Covenant (2018) - while positing a preference for the refurbishment of hostels - also encouraged the submission of proposals for viable *new build* hostels:

“It is expected that there will be a focus on the refurbishment of existing hostel provision, rather than developing new-build facilities. However, proposals for new-build schemes which are deliverable within the programme timeframe and can demonstrate sufficient value for money are encouraged.” (14)

Providers of hostel accommodation are also often proactive in guarding against any contraction in existing hostel provision. St Mungo’s (for example) led a lobbying campaign entitled Save our Hostels (no date), which sought to establish a “*safe, secure future for homeless hostels.*” Hostels - as envisaged here - are not a crisis driven,

emergency response, but are instead a highly beneficial, therapeutic environment in which people can recover and rebuild:

“[Our]supported housing projects - or hostels . . . give people with complex or multiple physical and mental health needs an environment in which to recover and rebuild their lives.” (St Mungo’s no date: 4)

While we can trace disquiet around the outcomes of congregate accommodation from the early twentieth century, it is not at all the case that hostels are universally held as ineffective or undesirable. On the contrary, many commissioners and providers consider hostels to be not only an appropriate and effective response to homelessness, but one that is both vital and necessary, with outcomes that justify the passionate defence *and advancement* of their existence. This has led to conflicting agendas with respect to the future of hostel provision, with some actors within the homelessness sector seeking their rapid dissolution and banishment, while others advocate for their continued existence and expansion.

1.1: Research Questions

The purpose of the research is to explore and clarify the terrain outlined above, with a particular focus on what the constituent components of hostel accommodation are and what it is about these components that actualise outcomes for particular people.

Six research questions have been identified. Each research question is here expressed in two distinct forms: the first using regular language and the second being conceptually driven by the study’s underpinning critical realist metaphilosophical position.

1) What is a ‘hostel’?

Or what are the individual components (both necessary and contingent) that collectively constitute hostel accommodation?

2) What are the intended outcomes of hostels?

Or what phenomena are hostels intended to actualise?

3) What exactly is it about hostels that is expected to bring about intended outcomes?

Or what causal mechanisms are postulated as being capable of actualising the intended phenomena of hostels?

4) What are the actual outcomes of hostels?

Or what phenomena do hostels actualise?

5) What exactly is it about hostels that produces such outcomes?

Or what are the causal tendencies of hostel accommodation and how do these tendencies actualise the observed phenomena?

6) What are people actually able to be and do in hostels?

Or, to what extent is human flourishing possible in hostel accommodation?

The first research question aims to resolve hostel accommodation into its constituent parts (that is, the individual components that collectively constitute a hostel). It is, in the first instance, concerned with conceptual validity and clarity: ensuring that the object of study (hostel accommodation) is neither a “*chaotic conception*” nor a “*bad abstraction*”, but instead a “*realistic category*” that is amenable to causal analysis (Sayer 1992: 138; Fitzpatrick 2005: 11). The second, third and fourth research questions aim to recontextualise and redescribe the necessary and contingent components of hostel accommodation in an explanatorily significant way: first (at question two and three) in the context of intended outcomes and then, (at question four) in the context of actualised outcomes. In this respect, they have a particular fit with the retroductive process (the linking of constituent components to identified phenomena) and are thus derivative of critical realism’s principle retroductive question: “*what would, if it were real, bring about, produce, cause or explain a phenomenon?*” (Bhaskar 2016: 3). The final question is concerned with what people who are homeless are able to be and do in hostel accommodation. It is closely aligned with theories of human capabilities but is also concerned to address both the hypothesised outcomes (established at question two and three) and the actual outcomes (established at question four) of hostel use in the sense of exploring what is *possible* in hostel accommodation.

1.2: Thesis Structure

Chapter two opens with an exploration of existing definitions of hostel accommodation with the aim of postulating its necessary components, alongside those that might be considered more contingent in nature. It then moves to explore several key interventions that have informed and influenced support provision in hostels. These are referred to as support models. This is followed by an account of structural models: that is, how hostels are positioned in relation to one another and other accommodation-based interventions. The closing sections of this chapter outline the existing evidence regarding the efficacy of hostel accommodation, before closing with exploration of what this evidence reveals about the intended and actual outcomes of hostels.

Chapter three provides an account of the meta-theoretical position adopted in this study: namely, critical realism. The discussion sets out the core assumptions of critical realism with respect to ontology, epistemology, and causation. It also sets out the theoretical synthesis that enables the retroductive activity detailed in chapter three. The first, a transactional theory of cognitive appraisal, emotion, and coping, which asks “*what must be going on in the mind to influence people to act and react as they do?*” (Lazarus and Folkman 1984; Lazarus 1993; Lazarus 1999). The second, a theory of identity, agency, and choice, which asks “*how do imposed homeless identities differ from the subjective experience of people who are homeless?*” (Parsell 2018). Finally, a theory of human capabilities, which asks “*what are people actually able to be and do?*” (Nussbaum 2011). Chapter four begins by providing a rationale for the adoption of a qualitative research strategy, with a particular focus on its overall fit with the aim of identifying and explaining the generative mechanisms of outcomes, rather than their predicted volume or frequency. This is followed by an overview of the research design (multiple-case study), and its relevance in allowing for the examination of the operation of generative mechanisms in contrasting contexts. This includes an account of the rationale adopted in defining, bounding, selecting, and locating the case study hostels. The chapter then looks at the ethical considerations of the study, before detailing the various phases of fieldwork undertaken. It concludes with an account of the approach taken to data analysis, with a particular focus on critical realist meta-methodological strategies.

Chapters five to eight present an analysis of the research findings structured around four key tensions that initially emerged from analysis of national key informant interviews. These tensions were tested and refined across the subsequent fieldwork stages. They pertain to a disjuncture between the intended and actual outcomes of hostel accommodation: namely, the safety-harm tension (chapter five), the independence-dependence tension (chapter six), the inclusion-exclusion tension (chapter seven), and the progress-entrenchment tension (chapter eight).

Chapter nine concludes by offering an account of the core findings of the study. Where the empirical chapters set out to explore intended and actual outcomes in tension with one another, in this concluding chapter they are taken more fully out of their ‘tensions’ and considered in two separate groupings: first, intended outcomes (safety, independence, social inclusion, and progress) and, second, actual outcomes (harm, dependence, exclusion, and entrenchment). This move allows for a consideration of intended outcomes in relation to one another (and so too for actual outcomes) but also provides a

structure within which a direct response to each of the studies core research questions may be offered. This chapter also looks at the limitations and implications of the study's findings, before concluding with some suggestions for future research.

Chapter 2: Definitions and Designs

Introduction

This chapter opens with a discussion of existing definitions of hostel accommodation, with a view to postulating its necessary components, alongside those that might be considered more contingent in nature. It then moves to explore several key interventions that have informed and influenced support provision in hostels, including linear residential treatment models; communal therapeutic and psychologically informed environments; and, harm reduction, housing ready, and non-interventionist approaches.² The next section of this chapter discusses how hostels are positioned in relation to one another and other accommodation-based interventions, including: bipartite, staircase, continuum, non-linear and complex web models.³ These are referred to here as structural models. The closing section of this chapter provides an account of existing evidence regarding the efficacy of hostel accommodation. It then moves to explore the intended outcomes of hostel accommodation provision, before closing with an account of the existing evidence around the actual outcomes of hostels.

2.1 Definitions

Several scholars have sought to define hostel accommodation (see for example Rosengard 2001, Warnes et al. 2005, and Busch-Geertsema and Sahlin 2007) and to situate such definitions within broader typologies of accommodation-based responses to homelessness (see for example Edgar and Meert 2005). Common across most such endeavours is an acknowledgement that the term “hostel” is a very broad register, with *“differences in nomenclature and understanding between [and within] countries”* complicating the formulation of rational and helpful definitions (Edgar and Meert 2005:15; Rosengard 2001; Busch-Geertsema and Shalin 2007). This is, of course, in part a reflection of the geo-historical transience of descriptions (in a general sense), but many have argued that hostels – and indeed accommodation-based intervention in general – are especially chaotic and disordered. In a recent meta-analysis of accommodation-based programmes for individuals experiencing, or at risk of experiencing, homelessness, Keenan et al. (2021) lament:

² These various interventions are referred to throughout this chapter as “support models”.

³ These various configurations are referred to throughout this chapter as “structural models”.

“The number of [accommodation-based] interventions which now exist, coupled with inconsistent descriptions of interventions and their elements . . . has rendered current categorisations meaningless.” (9)

Rosengard (2001) found that providers and other key stakeholders rarely questioned the use to the term ‘hostel’ in relation to large, traditional hostels but that *“otherwise consistent definition was lacking and at times different definitions were used within the same agency”* (131). Individual providers sometimes have entirely bespoke terms for hostels, some of which function to split hostels out across different categories, while others group hostels together with other accommodation-based responses. The Salvation Army, for example, refer to all hostels as Lifehouses in the hope that doing so indicates that *“they are more than a place to stay”*; but not all Lifehouses are hostels, with the term encompassing all Salvation Army *“supported accommodation”* projects (Salvation Army, no date).

This subsuming of hostels under the rubric of supported accommodation/housing projects is a common theme. Homeless Link (2018), for example, use *“hostel”* as a direct referent for *“supported accommodation projects”* and St Mungo’s (no date) use similarly interchangeable terms, speaking of their *“supported housing projects”* as *“hostels”* (3) and vice versa. Holding to this interchangeability is challenging, though, because supported accommodation is often thought to encompass a much broader range of accommodation intervention than that of hostel provision. For Crisis (no date), supported accommodation *‘might mean a hostel or other short-term shared housing . . . [or] it might mean longer-term housing’* (1). Supported accommodation has its own plethora of synonyms. In a review of accommodation-based services for people with mental health problems, for example, Gustafsson et al. (2009) *“identified 307 unique terms for supported accommodation across 400 articles”* (cited in McPherson, Krotofil & Killaspy 2018, 2). To complicate these definitional matters further, diverse homelessness accommodation services may also be provided on a single site: one building might be home to a shelter, a hostel, and a few transitional flats, but still be referred to as a hostel (Benjaminsen 2016; Edgar and Meert 2005; McMordie 2018). The distinction between shelter and hostel is also often subject to elision of difference. Busch-Geertsema and Shalin (2007), for example, understand *“shelter”* as a *“somewhat less specified concept”* than *“hostel”*, and indeed sometimes make use of the term shelter as a direct *“synonym”* for *“hostel”*. (72).

Breadth of meaning is not without its uses. As Irving-Clarke (2019) conceives of it, “*supported housing*”, for example, does not function as a definition at all, but as a broad umbrella term that helpfully allows for a roaming consideration of many accommodation-based interventions.

“one of the problems in talking about “supported housing” is that it is a nebulous term covering a vast range of accommodation types . . . the approach I take . . . [is to treat it as an umbrella term]. The reason for this is exactly that it is a nebulous-enough term now, and I intend this book to reach back into past centuries . . . into the present and then into the future . . . [and] to cover a range of interventions and services.” (2)

Nonetheless, the search for conceptual clarity with respect to what constitutes a hostel remains important (to this thesis and to a critical realist agenda) for several reasons. Sayer’s (1992) concept of “*bad abstraction*” clarifies why. He explains:

“A bad abstraction arbitrarily divides the indivisible and/or lumps together the unrelated and inessential, thereby ‘carving up’ the object of study with little regard for its structure and form.” (138)

Sayer would likely agree with Irving-Clarke (2019) that a bad abstraction may be useful for descriptive purposes and that it may at times be deployed as such with little (if any) negative effect. Where Sayer would take issue, is in the attribution of “*unitary causal powers*” to “*objects falling*” within such an abstraction (Sayer 1992: 138). In the context of accommodation-based intervention, such attribution often sees diversely named services held to behave in similar (or indeed different) ways, with limited consideration being given to their internal hetero- or homogeneity. There is, of course, a legal and regulatory dimension to naming, and - in the search for conceptual clarity - such definitions might prove helpful. The Housing Benefit Regulations (2006), for example, define a “hostel” as a building in which:

“there is provided for persons generally or for a class of persons, domestic accommodation, otherwise than in separate and self-contained premises, and either board or facilities for the preparation of food adequate to the needs of those persons, or both.” (5)

Here, a hostel must also provide care, support, or supervision “*with a view to assisting those persons to be rehabilitated or resettled within the community*” (5). This might helpfully offer the basis of a broad definition of hostel accommodation. Yet, while the

regulations outline some services as being distinct from a hostel (i.e., a hostel is not a care home, an independent hospital, or an Abbeyfield home), they do not provide clarity with respect to how (or if) a hostel ought to be distinguished from other categories of homelessness accommodation, such as shelters, supported housing and transitional accommodation.

Pre-existing administrative categories may also prove helpful. Indeed, several eminent and influential studies on the patterns and risk of shelter utilisation draw on data from publicly administered client registration systems (Kuhn and Culhane 1998; Benjaminsen 2016). Kuhn and Culhane (1998), for example, provide little insight into the particulars of shelter accommodation, other than to distinguish between publicly and privately funded shelter provision. Here, what constitutes a shelter appears to be that which qualifies as such by the administering body. Benjaminsen (2016) similarly relies on administrative categories but does offer some further descriptive material: “*almost all*” the shelters included in the study offer emergency shelter, the reader learns, but often do so in individual rooms where “*longer stays*” are (sometimes) possible. Benjaminsen concludes that “*compared with similar functions in other countries*”, shelters included in the study also widely fulfil “*the function of providing short-term temporary accommodation*” (2016). It is not clear whether shelter and short-term temporary accommodation (in this context) are held as synonyms for services with broadly similar functions, or whether they signify conceptually distinct services that happen to be so intertwined in their given operational context that separation is not feasible.

The housing-based European Typology of Homelessness and Housing Exclusion (ETHOS), offers a means of distinguishing between the conceptual and the operational. First, it distinguishes between four conceptual categories of homelessness and housing exclusion (rooflessness, houselessness, insecure housing and inadequate housing) with each conceptual category then subject to further categorisation based on operational distinctions (Edgar and Meert 2005). Here, shelter and hostel accommodation are positioned as *conceptually* distinct from one another, with the former being categorised as a form of rooflessness and the latter as houselessness. Shelter accommodation is defined as “*night-shelter*”, “*low-threshold direct access shelter*” and “*short-stay [non-homeless] hostel*” and is *operationally* aligned with rough sleeping (Edgar and Meert 2005: 16). Hostel accommodation is defined as ‘short-stay homeless hostel’ and is *operationally* aligned with ‘temporary housing’ (Edgar and Meert 2005: 16). Here, the Ethos typology would take issue with the elision of difference between shelter and hostel

accommodation (as put forward by Busch-Geertsema and Sahlin 2007) and that between shelter and short-term temporary accommodation (as put forward by Benjaminsen 2016). Yet, despite the conceptual and operational distinctions drawn, Edgar and Meert (2005) openly highlight the considerable difficulty they faced in sustaining a distinction between the two in practice, with the overlap being such that their consideration of shelter and hostel accommodation ultimately elides the distinction entirely, categorising both under the rubric of “*people living in accommodation provided for the homeless*” (18).

Considering this slippage between shelter, hostel, and supported accommodation, Keenan’s attribution of “*meaninglessness*” to current categorisations of accommodation-based interventions, holds considerable weight - at least in the context of establishing coherent categories. This seems particularly true of the category of hostels, which as Rosengard (2001) rightly laments, is subject to a “*confusing array*” of,

“definitions employed by the law, by service providers and by researchers . . . [driven by] the diversity of purposes and types of hostels . . . an overlap between the characteristics of hostels and other types of provision . . . [and] stigma, so that whether or not a service is called a hostel may vary over time, between service areas or between districts and countries.” (21)

The critical realist approach adopted in this study will purposefully seek to get beneath these disputations over nomenclature, by orienting discussion toward the tendencies of clusters of components, rather than how particular interventions are named: what matters in terms of uncovering generative mechanisms, I will argue, is not (only) the naming of homelessness interventions but rather understanding the constituent components and their various interactions.

While Rosengard (2001) did not adopt an explicitly critical realist approach, they did attempt to resolve (or bypass) definitional confusion by offering a characteristic-based framework for identifying hostel accommodation. Warnes et al. (2004) utilised this framework for a study of hostel accommodation in London, with some minor modifications. Edgar and Meert (2005) then formulated the various characteristic (along with their own modifications) into a tripartite typology encompassing the physical, social, and legal domains. Here, there was again slippage in category coherence, with Edgar and Meert suggesting that the characteristic-based framework could be used to identify not only hostel accommodation, but the more generic “*accommodation provided for the homeless*”, with this encompassing night shelters, homeless hostels, and temporary accommodation. Busch-Geertsema and Sahlin (2007) returned the framework to hostels

only, retaining Edgar and Meert's tripartite structure while proposing amendments to the characteristics falling within each domain. A comparative table, detailing the respective propositions of each study is provided below at Table 2.1.

Table 2.1: Characteristics of hostel accommodation

	Rosengard (2001)	Warnes et al. (2004)	Edgar and Meert (2005)	Busch-Geertsema and Sahlin (2007)
Physical Space	Either or both, board or shared facilities for the preparation of food.	Provides board or shared facilities for the preparation of food.	Shared space (living, eating, food preparation and/or bath/toilet).	Shared space (living, eating, food preparation and/or bath/toilet).
	Accommodation for a minimum of six residents	Accommodates a minimum of six residents.		
			Communal in form (normally larger than normal dwelling).	Communal in form (mostly, but not always larger than a normal dwelling).
Social Space	Staff services, ranging from supervision to housing advice and support services.	Staff services range from supervision to housing advice and support services. 24-hour on-site staff cover (waking or sleeping shift at night).	Staff supervision on premises.	Some kind of supervision.
			Limited (or no) private space (i.e., from which others can be excluded).	Limited (or no) private space (i.e., from which others can be excluded).
Legal Space	Temporary or transitional accommodation primarily for single homeless people.	Temporary accommodation primarily for single homeless people aged 16 years and over.	Temporary occupancy.	Temporary occupancy intended.
	Service users do not have a tenancy agreement but some other form of contractual arrangement such as an occupancy contract (or possibly no written contract at all).		No tenancy or occupancy agreement.	No regular tenancy agreement.
			Exclusion (eviction) without court action.	Exclusion (eviction) without court action.
				Institutional control of access.

The framework outlined above offers a useful heuristic for a preliminary discussion of the necessary and contingent components of hostel accommodation. Beginning in the physical domain with the **shared facilities component**, there is broad agreement that hostel accommodation involves the sharing of some domestic amenities and services, with a particular focus on shared facilities for food preparation (or the provision of meals in the absence of such facilities) (Rosengard 2001; Edgar and Meert 2005; Warnes et al. 2005; Busch-Geertsema and Sahlin 2007; Homeless Link 2018; Watts et al. 2018). Closely related to the shared facilities component, is the **communal living component**. Although not specifically isolated as a unique component in early iterations of the framework, it emerges as consistent characteristic across later definitions (Busch-Geertsema and Sahlin 2007; Homeless Link 2018; Watts et al. 2018). The same level of agreement is not evident with regards to the **dwelling size component**. Rosengard (2001) and Warnes et al. (2005) are quite prescriptive in defining size criteria, with both proposing that hostels must have a minimum of six residents. Rosengard is here following regulatory criteria for supported housing (as stipulated by ScotsPEN), and Warnes et al. (2005) may be simply following Rosengard. Edgar and Meert (2005) are less specific, claiming that hostels are “*normally*” larger than residential dwellings. Busch-Geertsema and Sahlin (2007) opt for the more ambiguous “*mostly but not always larger*” caveat, on the basis that hostel-like services may be delivered in small building to a few people, under the same social and legal circumstances as might be found in larger hostels.

Moving to the social domain, Edgar and Meert (2005) propose a **limited private space component** (i.e., from which others can be excluded). This postulation holds clear weight in the context of dormitory type provision, but even where accommodation takes the form of individual rooms, the requirement to permit access to the hostel staff (under certain conditions) represents a significant limitation on private space (Busch-Geertsema and Sahlin 2007; Watts and McMordie 2021). The **staff supervision component** also holds weight, although attempts to specify levels or forms of supervision (such “*on-site*” or “*24-hour*”) are less convincing. As Busch-Geertsema and Sahlin (2007) contend, supervision varies significantly between hostels, with some being continuously supervised, while others offer “*ambulatory, time-limited or minimal supervision*” (71). The **support component** may equally be understood as subject to wide variation, encompassing support that spans a vast spectrum from the generic through to highly specialist provision. Support (like supervision) may be continuously available on-site or it may be limited to pre-agreed times; support may equally be unconnected to the hostel itself, or may be

available only in a peripatetic, ambulatory, or off-stie sense; and of course, support may be entirely absent (Busch-Geertsema and Sahlin 2007; Watts et al. 2018; Watts et al. 2021).

Considering the legal domain, the proposed **temporary occupancy component** is complicated in practice, in that homeless households and individuals may stay for considerably longer than anticipated (Rosengard 2001; Edgar and Meert 2005; Warnes et al. 2005; Busch-Geertsema and Sahlin 2007; Homeless Link 2018; Watts et al. 2018). Edgar et al. (2007) propose that what matters, in this context, is not the actual length of stay but, rather, the *intended* length of stay. Busch-Geertsema and Sahlin (2007) agree and besides placing an additional emphasis on intention, leave this characteristic largely untouched. The proposed **limited tenancy rights component** also proves tenable. While some form of occupancy agreement may be signed, the rights afforded hostel residents are characteristically highly restricted in comparison to tenancy rights in regular housing (Rosengard 2001; Edgar and Meert 2005; Warnes et al. 2005; Busch-Geertsema and Sahlin 2007; Homeless Link 2018; Watts et al. 2018). Indeed, access to hostel accommodation is often dependent upon prior (formal) agreement to comply with the rules and routines of a given hostel, with hostel residents subject to (potential) eviction or exclusion if they are unable or unwilling to comply. That such eviction generally occurs outside the bounds of legal and statutory frameworks, lends credence to the **eviction without court action component**. Busch-Geertsema and Sahlin (2007) propose an additional component of hostel accommodation falling within the legal domain: **institutional control of access component**. This control pertains to initial referral and referral outcomes and often functions to precludes resident control or influence over who they are accommodated with. In many hostels, institutional control of access also pertains to every (re)entry to premises during a period of stay and includes provider control over who may or may not receive visitors on premises (Watts et al. 2018; Watts and Blenkinsopp 2021).

Having considered the nature of the proposed characteristics of hostel accommodation, Table 2.2 below details (provisional, hypothesised) necessary and contingent components of hostel accommodation, subject of course to further exploration and empirical testing.

Table 2.2: Necessary components of hostel accommodation

	Necessary Components	Contingent Components
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Physical Space	Shared Facilities Communal Living	Dwelling Size
Social Space	Limited Private Space Staff Supervision	Support
Legal Space	Temporary Occupancy Limited Tenancy Rights Eviction without Court Action Institutional Control of Access	

2.2 Support Models

This chapter now moves to explore the key interventions that have informed and influenced support provision in hostel accommodation. These various interventions are referred to here as support models. The complexity of hostel accommodation provision rests (in part) in the interplay between these support models and the way in which hostels are positioned within wider homelessness service provision. The latter are referred to here as structural models. Structural models are often associated - or indeed conflated - with support models and understandably so, given that one is sometimes a prerequisite of the other. Given this complexity, Table 2.3 outlines how the various models are positioned for the purpose of this discussion.

Table 2.3: Support and structural models

Support Models	Structural Models
Linear Residential Treatment	Bipartite Model
Communal Therapeutic Environment	Staircase Model
Psychologically Informed Environment	Continuum Model
Harm Reduction Approaches	Non-Linear Pathway Model
Housing Ready Approaches	Menu of Options Model
Non-Interventionist Approaches	

2.2.1: Linear Residential Treatment

Linear residential treatment models have their origins in the shift away from traditional, institutional responses to health and housing crises (Ridgway and Zipple 1990). Such models often have a primary focus on health-related interventions, but often include elements of homelessness service provision⁴ and have influenced the evolution of supported accommodation, including hostels. Linear residential treatment programmes are generally comprised of a range of residential projects offering differing levels of restrictiveness, supervision, and intensity of treatment. People accessing such services are (ideally) expected to progress (in a linear sense) from the most restrictive form of provision to services that are increasingly “normal” in form, learning specific skills and engaging in specialist treatment within each unique setting. The model has much in common with the Staircase Model of provision detailed below but differs in those entry-level services are characterised by intensive support and treatment interventions, often within a clinical setting. The underpinning rationale though is broadly similar: the intervention (ideally) allows people to become increasingly stabilised and - as personal functioning improves - the need for a specific service lessens and the person moves to the next stage, until the individual:

“‘graduates’ and . . . achieves a high level of functioning and moves out of the residential continuum. He or she achieves independent living status . . . and is viewed as requiring little or no formal services.” (Ridgway and Zipple 1990: 13)

The environmental setting of individual services within the linear residential treatment model are often communal in nature, and while this is no doubt influenced by practical considerations, such environments are also theorised by some as having unique therapeutic properties.

2.2.2: Communal Therapeutic Environment

Akerman (2019) traces the origins of the communal therapeutic environment to the “*moral treatment movement*”, which placed great value on the therapeutic benefits of interpersonal relationships (amongst other things) (1). In a communal setting, the therapeutic benefits of interpersonal relationships are thought to coalesce, so that “*the social environment [emerges as] the agent of change, rather than any single intervention used within it*”, a phenomenon neatly coined in the phrase “*community as doctor*”

⁴ See, for example, Carlisle House in Belfast <http://www.carlislehouse.org/treatment/supported-living/>

(Akerman 2019: 1-2). Here, Ridway and Zipple (1990) outline the nature and form of the expected “*change*” in a therapeutic community:

“[The therapeutic environment] assumes that the complex interpersonal dynamics of structured group living serves as a major force for change in individuals residing in such a milieu . . . [It] is seen as primarily a clinical modality . . . rather than a home for those who live there.” (17)

The principle of communal environment as an agent of change remains constant across this intervention, but Akerman (2019) outlines a helpful distinction between “*democratic*” and “*concept*” oriented therapeutic communities:

“[in] the democratic TC [therapeutic community] . . . the hierarchy is flattened, and decision-making is shared among residents and staff . . . [They] seek to develop social maturation and more profound personality change.” (3)

Whereas the “*concept*” therapeutic community:

“is generally used to combat addiction by working through a hierarchy including the use of rewards . . . [with a] focus on changing problematic behaviour, generally substance misuse.” (4)

While the communal environment is thought to dominate (in terms of causal force) above any individual interventions deployed within that environment, the type and form of intervention may influence access to the given environment. Hostels that offer recovery-based interventions - including services that are based on the principles the anonymous movement (e.g., twelve step programmes) – often emphasise abstinence as a condition of community membership, rendering access entirely contingent upon sustained recovery.

2.2.3: Psychologically Informed Environment

Psychologically Informed Environments draw heavily on the principles of the therapeutic community, particularly those associated with the benefits of positive interpersonal relationships and their theorised capacity to produce change at an individual level (Haigh et al. 2012). A psychologically informed environment can be established in a broad range of settings, provided that the environment allows people to “*feel emotionally safe*” (Maguire Johnson and Vostanis 2010: 19) and that it is structured and managed in ways that explicitly seeks to promote psychological safety (Keats et al. 2012). Such an approach involves a focus on psychological wellbeing and broad commitment to the application of psychologically informed principles and practices, although the particulars of the approach to be adopted are not prescribed. Staff are expected to engage in reflective

practice – including group practice - and to adopt a flexible approach that is responsive to the needs of people in their services. Where these principles are enacted, hostels are theorised as an appropriate site “*to focus in depth on the emotional needs, and capacities, of homeless people*” (Johnson 2010: 48).

2.2.4: Harm Reduction Approaches

Harm reduction focused interventions refer to services or actions intended to reduce or eliminate the adverse consequences associated with substance use, physical ill-health and/or psychiatric symptoms (Tsemberis, Gulcur and Nakae 2004). This approach was lent considerable impetus with the emergence of HIV and associated risks of infection from the use contaminated injecting equipment (O’Hare 2007). As O’Hare observes:

“It became imperative to reduce this kind of risk behaviour by providing clean injecting equipment, prescribing methadone (and in a small percentage of cases, heroin) and by using outreach workers to go into the community and help people where they lived and to attract them into services.” (141)

In the homelessness sector, harm reduction is most closely associated with a model of service provision which is low threshold (characterised by ease of access) and high tolerance (characterised by low or flexible application of rules) and sometimes with use of substances or a substance permitted on premises (although such use is generally monitored and controlled to some degree). Central to the harm reduction approach is an understanding of the non-linear nature of recovery regarding both psychiatric and substance use disorders. Ridgway and Zippel (1990) describe the process of recovery from the perspective of mental health service provision as “*highly variable, nonlinear, and unique to each individual*” (12). Prochaska and Di Clemente (1983; 1986) adopt a transtheoretical model - “*the cycle of change*” – to delineates a similarly complex and non-linear process of recovery from problematic substance use. The cycle of change details six core stages of recovery:

“Precontemplation: where the individual is ‘not ready’ or not actively involved in contemplating reduction or cessation of use.

Contemplation: where the individual is ‘getting ready’ or is actively involved in contemplating problematics associated with their substance use or the potential benefits of cessation or reduction.

Preparation: where the individual is ‘ready’ and has determined to take action, which will lead to reduction or cessation.

Action: where the individual takes notable steps to reduce or cease use; maintenance, where the individual sustains reduction or cessation and takes action to prevent relapse.

Termination: where the individual no longer experiences temptation and feels confident that they will not return to use. (Prochaska and Di Clemente 1983: 12)

Crucially, Prochaska and Di Clemente include “*relapse*”, not as a sequential stage but as a core component of the process of recovery and one which may occur at any of the six stages outlined above. Harm reduction focused services are often oriented toward minimising the level of harm experienced during periods of active use, precontemplation, and relapse, and some are also attuned to maximising the potential of contemplative, preparation, and action stages by motivating, encouraging, and facilitating access to appropriate support or treatment interventions. Importantly, harm reduction approaches tend to assume that users have the right to make choices – particularly in relation to substance use – and that these choices should not determine their access to housing or support (Padgett, Henwood and Tsemberis 2016).

2.2.5: Housing Ready Approaches

Housing ready models seek to ensure that people are capable and adequately equipped to sustain a tenancy, *prior* to move-on from homelessness. There is some ambiguity in respect to what qualifies an individual as housing ready. A report on the future of hostels identified housing ready assessment criteria, ranging from evidence of people being “*ready and willing*” to very “*rigorous*” move-on processes. One hostel, for example, would consider people eligible for move-on to a bedsit within the hostel, “*if they engage with the support provided, maintain a clean and tidy room, and pay their service charges*”. When a bedsit is allocated, “*staff will closely monitor the independent living skills of the people in the bedsits*”, with these observations then determining eligibility for full move-on referral (Homeless Link 2018: 67). Stewart (2018) found similar diversity in assessment practices in housing ready services for young people, from formalised scoring systems to informal staff opinions (1127). There is also considerable ambiguity with regards to how an individual might be found to be *already* “housing ready” at the point of entry to services. As Stewart (2018) explains:

“Young people having to go through conditional pathways, undergo a rite of institution to acquire the symbolic capital of recognition to be recognised as ready, is as much about gaining a renouncement of the negative symbolic capital that they are unready.” (1133)

2.2.6: *Non-Interventionist Approaches*

Parsell (2018) outlines a non-interventionist model of provision which eschews established methods of support provision, such as case management, wraparound support and interventions which involve doing things for people. Instead, the model places an emphasis on enabling service users to do things for themselves. Here, Parsell (2018) explains:

“The model tries to place the onus back on homeless people to manage themselves, including identifying their own life goals and objectives and enacting the changes and behaviours they require to achieve them . . . Practice under the Gain Model endeavours to work closely with people, but the work is directed towards assisting homeless people to do things for themselves . . . [it] is premised on an assumption of normality and positive life aspirations.” (103)

In a more general sense, the Gain (or Non-Interventionist) Model, assumes that the forms of support and treatment that currently dominate homelessness service provision have created conditions of dependency in which service users may come to rely upon service providers. Parsell argues that, at an individual level, this dependency acts to reify service user difference and in doing so entrenches and perpetuates homelessness; while, at an operational level, it both creates and confirms the need for an extensive network of homelessness service provision.

While this discussion of intervention models has sought to offer an account of distinct approaches, hostels will often draw disparate elements of these approaches together, generating a more fluid and ad-hoc approach to provision. This approach may be extended (at least in theory) to everyone accessing services and may even be formalised in approaches such as person-centred, tailored, or individualised support provision, which seeks to position the individual (rather than the model) as determining the shape and form of support offered. Drawing from across approaches is not always straightforward though. Many of these interventions are premised on juxtaposing assumptions and principle, which render them uncomfortable bedfellows. Housing ready approaches, for example, sit awkwardly against the variable and non-linear understanding of recovery that informs harm-reduction oriented principles. The expectation that progress should occur in a certain fashion or within a specific timeframe can, some have argued, “*spell disaster*” when recovery is linked to housing, rendering clinical health issues unnecessarily comorbid with those of housing (Ridgway and Zippel 1990; Prochaska and Di Clemente 1986). It is also important to note that some (perhaps even many) hostels

offer generic support that adheres to no named philosophy or approach, and of course some hostels offer very minimal support or none.

2.3 Structural Models

This chapter now moves to explore how hostels are positioned in relation to one another and other accommodation-based interventions, and how they are intended to function collectively (in an operational sense) within a given jurisdiction.

2.3.1: Bipartite Model

Homelessness services are sometimes organised around two distinct forms of accommodation (see Fitzpatrick and Wagnanska's (2007) consideration of homelessness accommodation in Poland; and the Northern Ireland Housing Executive's (2016) modelling of service provision in Belfast). The first level typically comprises night shelter type accommodation, including dormitory style accommodation with low levels of support provision. The ethos here is often low threshold, high tolerance, with the aim being to facilitate access to shelter. The second typically includes hostel accommodation, with some level of support. The ethos here is often to build independent living skills and progress people toward independent living.

2.3.2: Staircase Model

In the Staircase Model an (often diverse) range of temporary accommodation services are arranged in a stepwise format, with people who are homeless often entering accommodation on the lower rungs of the staircase, before (ideally) moving through various services toward independent living (Sahlin 2005). The speed and nature of movement is typically determined by individual progress (in terms of personal development) and capacity to comply (in terms of behaviour) with the requirements of a given placement (Sahlin 2005). Progress generally allows access to improved housing conditions (Sahlin 2005: 118). Conversely, people who fail to progress may become entrenched *within* lower the lower steps, or the staircase may act as a "*ladder of sanctions*" with eviction and dislocation *to* lower steps (generally poorer quality provision) acting as a form of punishment for non-compliant or problematic behaviours (Sahlin 2005: 118; Henwood 2011). Some scholars have suggested that the staircase approach is often coupled with "*a tendency amongst service providers to "cream skim" lower-needs clients who are more likely to succeed in their programs*", with this resulting in the exclusion "*of the most vulnerable people experiencing homelessness from permanent housing*" (Clarke, Parsell and Vorsina 2018: 1; Padgett, Henwood and Tsemberis 2016).

2.3.4: Continuum Model

Very closely related to the staircase approach, is the Continuum of Care (CoC) model, introduced in the United States in 1995 by the Department of Housing and Urban Development (HUD), it was envisaged as a more strategic, structured, and collaborative approach to the provision of services for homeless individuals and families:

“a community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximize self-sufficiency.” (Quoted in National Alliance to End Homelessness 2010)

In practice, the Continuum of Care model involves progressing individuals and families through several separate services, typically including emergency shelter provision, transitional housing, and supported accommodation. Like the staircase, CoC is based around notions of ‘graduation’ toward improved living conditions, with the speed and form of progress (in theory) correlated to individual progress and stability. As such, permanent housing is often conceived of as something that can be ‘gained’ or ‘achieved’ by successfully meeting certain conditions, such as compliance with service rules or sustained engagement with treatment interventions (Tsemberis 2010).

2.3.5: Non-Linear Pathway Model

Fitzpatrick and Wygnanska (2007) found no explicit adherence to a staircase model in the UK, finding instead a range of pathway approaches that were rarely strictly linear in nature, allowing instead for stages (or steps) to be bypassed. Johnsen and Teixeira (2010) pointed to the existence of some highly structured pathways, but broadly agreed that homelessness services are often aligned in ways that:

“. . . allow for ‘horizontal’, rather than downward or backward moves . . . clients sometimes move directly into specialist projects after an initial needs/ risk assessment, bypassing interim stages in generic hostels.” (15)

Homeless Link (2018) also cite *“examples of projects that offer more flexibility than straightforward linear models, with residents being allowed to move back and forth within housing pathways when necessary”* (28). That is not to say, as noted by Johnsen and Teixeira, that services do not in practice ‘treatment first’ and/or ‘housing ready’ principles, or that they do not form internal staircases or continuums. Stewart (2018) argues that ‘pathway’ approaches in the UK, though ostensibly intended as a means of removing any inference to necessary progression, are very often highly conditional in

practice and, as such, not wholly dissimilar in terms of outcomes to staircase and continuum of care models.

2.3.6: Complex Web (or menu of options) Model

Ridway and Zippel (1990) note the propensity of linear residential treatment models toward ever finer gradients of service provision: that is, a gradual evolution toward increasingly specialist provision, targeted toward the needs of more narrowly defined service user groups. Similarly, Sahlin (2005) highlights the capacity of staircase models to differentiate and re-define, suggesting that it is precisely this ability to respond to criticism by developing new services - without any substantive alteration in the underpinning theoretical approach - that prevents a more fundamental shift in how accommodation-based interventions are modelled. This tendency is perhaps most visible in the development of hostels intended to address the exclusionary practice of other hostels (Homeless Link 2018). This complexity has also been identified as a barrier to evaluating the efficacy of hostel accommodation:

“The homelessness sector delivers a complex hotchpotch of services. Most organisations specialise in a particular area of delivery and in supporting specific cohorts within the homelessness population . . . These conditions often blunt the incentive to reflect collaboratively with other homelessness organisations on how projects and programmes across a locality, region, even nationally, could be remodelled to provide more interconnected, symbiotic and transformational services.” (Swain 2021)

Parsell (2018) argues that temporary accommodation services are best understood, not as a particular model, but as a complex and elaborate system of tenuously connected services - a “*network of crisis and transitional accommodation models, case management and wrap around support*” – that nonetheless fails to successfully address the needs of those it seeks to support (110). This is in keeping with Ridgway and Zippel’s (1990) conclusion - almost three decades earlier – that despite continuous movement toward increasingly elaborate forms of service provision in linear residential treatment models, few (if any) areas ever achieve a full continuum of service provision sufficient to address the needs of those requiring access to such service, and that what *does* develop or evolve often lacks clarity and clear a sense of connection (Ridway and Zippel 1990; Parsell 2018).

2.4 Evidence and Outcomes

This section opens with brief introduction to the existing evidence base regarding the efficacy of hostel accommodation. It then moves on to explore the available literature with a view to postulating – as far as is possible - the intended and actual outcomes of hostel accommodation.

2.4.1: Existing Evidence

Many commissioners and providers consider hostels to be not only an appropriate and effective response to homelessness, but one that is both vital and necessary, with outcomes that justify the passionate defence and even advancement of their existence. Defending - and challenging - this position is complicated by a notable paucity of robust quantitative data on the outcomes of hostel accommodation use (Johnson and Teixeira 2010; Mackie, Johnsen, and Wood 2017). Perhaps the most notable quantitative study to emerge from the UK - Preparing Homeless People for Independent Living (Crane, Warnes and Coward 2012) - draws on data from a longitudinal study in England which traces resettlement outcomes for 400 single homeless people across a period of 18 months, with a particular focus on the link between preparation for independent living and resettlement outcomes. The study notes, first, a high overall rate of move-on tenancy sustainment (78%) and, second, a strong link between successful retention of housing and the length of stay in temporary accommodation prior to being rehoused (without giving much indication of the form such accommodation took or any indication of the impact of each form on the given outcomes). Those resident in a hostel or temporary supported accommodation for more than twelve months prior to resettlement were found to be more likely to retain their tenancy than those who had short stays and/or slept rough during the same period. The authors conclude that “additional time spent (up to three years) in temporary accommodation is intrinsically beneficial” (37). The findings, they argue,

“... are consistent with the proposition that the current policy priority in England for shorter stays in temporary accommodation will lead to poorer resettlement outcomes, more returns to homelessness, and a net increase in expenditure on homelessness services.” (17)

Although the overall conclusion (as noted above) refers to temporary accommodation as a totality, the sampling process was premised on a radical detotalisation of the single, temporary accommodation using population, accounting only for those who are resettled into independent accommodation by the participating organisations (a figure that the authors suggest may be as low as 20%) (23). The extruding of those who avoid, abandon,

or are evicted, those who move to supported housing or treatment centres, (presumably) those who exit placements in an unplanned way (acute admission or custodial sentences) and those considered unready for resettlement, is a striking example of ontological monovalence,⁵ and one which weakens its usefulness in enhancing understanding of the outcomes of hostels use (Shalin 2013).

The Centre for Homeless Impact, in their Evidence and Gap Maps suggest that there “*are no studies measuring the effectiveness of Hostels*”⁶ that could be considered to meet their (albeit rather rigorous and specialist) evidence standards (Centre for Homelessness Impact 2021). Gathering and comparing quantitative data from individual providers (Homeless Link 2018) or across regional programmes (Watts et al. 2021) also has notable limitation, not least of all because the absence of a standardised approach to measuring outcomes renders comparative analysis difficult. This difficulty is compounded by great diversity of thought with respect to what constitutes a valid or desirable outcome in the first instance (see, for example, Homeless Link (2018) discussion of whether housing outcomes or softer indicators of individual progress should hold primacy). There is growing concern across the sector around this dearth of evidence, its protracted nature and its significance given the sheer scale of hostel accommodation use. As one commentator laments:

“[there are] severe limitations on the availability of shared data [and] we struggle to provide convincing evidence of how hostels within a place-based network of services can contribute to ending homelessness, even though in London alone there are . . . 10,048 bed spaces for homeless people, the great majority of which are either hostels or some form of shared housing. Which begs the question, how can

⁵ Carne et al. (2012) are far from alone in their tendency toward detotalisation. Murry et al. (1997) conducted a study of 228 homeless people accessing a transitional residential programme. They reported a 78% housing retention rate one year after discharge. The study concluded that the transitional residential program was successful in meeting the needs of homeless individuals, particularly with regards to move-on tenancy sustainment (at one-year post-discharge). However, of the 179 clients in Murray’s post-discharge group: ‘106 (52.9%) were discharged according to the treatment plan; 33 (18.4%) were asked to leave, and 40 (22.3%) left against professional advice’ (48). Less than half of the 228-person study group completed the programme, rendering the 78% housing retention rate less celebratory than might originally be expected. Notable exceptions that eschew such detotalisation (see for example Benjaminsen 2016 and Kuhn and Culhane, 1998), tend to focus on patterns of hostel (or shelter) accommodation use, but have somewhat less to say about the generative mechanisms that occasion such patterns.

⁶ Considerable reliable evidence: At least 3 RCTs or 5 other studies with combined sample size of at least 300; Some reliable evidence: at least 2 RCTs or 3 other studies with combined sample size of at least 200; Limited reliable evidence: at least 1 RCT or 2 other studies with combined sample size of 100; Insufficient evidence available: Any other number or combination of studies.

it be that programmes and services for people who are experiencing homelessness have evolved with apparently little regard to whether they are making a positive difference?” (Swain 2021)

Qualitative research on hostel accommodation use is (comparatively) more voluminous, particularly that which seeks to explore the experiences of people while accessing or living in hostel accommodation. This body of literature provides important insights into some of the impacts of hostel use but, I would argue, rarely asks what exactly it is (if anything) about hostel accommodation that generates these impacts and, crucially, whether the components implicated in these outcomes are necessary components of hostel accommodation (for a notable exception see Watts and Blenkinsopp 2021). With these limitations in mind, this chapter now turns to an exploration of the existing quantitative and qualitative research on hostel accommodation, with a particular focus on identifying intended and actual outcomes of hostel accommodation (see Table 2.4), as derived from the existing evidence base.

Table 2.4: Intended and actual Outcomes

Intended Outcomes	Actual Outcomes
Shelter	Constraints on individual autonomy
Substitute for settled housing	Diminished independence
End-station	Lack of privacy
Safety and protection	Interpersonal challenges
Observation and assessment	Social exclusion
Community	Trauma
Care and support	Eviction
Learning venue	Avoidance and abandonment
Deterrent and incentive	Rough sleeping
Systems Change	Institutionalisation
	Entrenchment
	Inappropriate or inadequate support

2.4.2: Intended Outcomes

Hostel providers are diverse in their origins, ethos and aims; they adopt varied approaches to support provision and associated interventions; and they often function within a motley of interacting accommodation-based interventions. Against this background, it is unsurprising that the intended outcomes of hostel provider are diverse in a myriad of ways. This section seeks to clarify this terrain a little, not by delineating all intended outcomes, but by separating and clarifying those that might be postulated as core to hostel accommodation provision. In doing so it builds on the ground already established – in terms of intended outcomes - by Busch-Geertsema and Sahlin (2007) in their seminal work on the role and function of hostels and temporary accommodation.

Hostels are often extolled for their capacity to address immediate need for **shelter** and for facilitating access to other (very basic) resources, such as food, clothing and washing facilities (Homeless Link 2018). The provision of shelter alone is often figured as a valid outcome, with any form of shelter being thought better than none:

“some . . . [services] provide very basic shelter . . . One of the main justifications in favour of such shelters is that some homeless people are deterred or excluded by the regulations of “better” types of hostels and would otherwise freeze to death in the winter.” (Busch-Geertsema and Shalin 2007: 73).

Hostels may also function as a temporary **substitute for settled housing**. This may be true where housing demand exceeds housing supply, where households are (for whatever reason) excluded from settled housing, or where appropriate forms of housing (for example supported accommodation) are unavailable (Busch-Geertsema and Sahlin 2007; Parsell 2018). Where people are unable to progress away from hostel accommodation it may – despite any temporary intention - become what Busch-Geertsema and Sahlin (2007) describe as an **end-station**, where people live for an extended periods of time (Sahlin 2005; Parsell 2018).

During a stay, hostels are often intended to offer **safety and protection**. This may include offering people who are homeless some security from external others (in the case of domestic violence for example), or it may offer protection for the non-homeless population (in the case of probationary approved hostels for example). Closely associated with safety and protection, is the capacity of hostel accommodation to facilitate the **observation and assessment** of people who are homeless where this is considered necessary to understanding the needs and aspirations of people who access services.

Here, an informant to the Homeless Link (2018) study on the future of hostel accommodation explains:

“I think that hostel provision is absolute must for getting people to the right accommodation because you can’t pick someone off the streets or off somebody’s sofa and put them into accommodation without knowing how that person functions and what they really want and need.” (27)

Hostel accommodation may also be presented as place in which a sense of **community** or belonging may be experienced. Here, hostels are thought to act as a curb against social isolation and loneliness in allowing for participation in meaningful daily activities and social interactions, including being in the company of others who are homeless (Busch-Geertsema and Sahlin 2007: 75; Parsell 2018). This sense of community may also be considered therapeutic and, relatedly, the hostel environment may be considered particularly conducive to the delivery of **care and support**. Hostels may also be figured as a **learning venue**, providing opportunities to acquire or re-establish the skills needed to manage an independent tenancy and to resolve matters thought to have contributed to homelessness or potentially undermining of individual capacity to sustain future housing (Crane, Warnes and Coward 2012; Homeless Link 2018). Poor quality hostel accommodation may also have a function, acting as a **deterrent** to homelessness or an incentive to progress away from hostel use entirely (Sahlin 2005; Busch-Geertsema and Sahlin 2007). The existence of such services may even act as **incentive** toward compliance with the rules and routines of better-quality provision, especially where the potential for ‘demotion’ or ‘promotion’ is present (Sahlin 2005; Busch-Geertsema and Sahlin 2007).

Hostels are also sometimes perceived as functioning to expose (and even dismantle) systems barriers by acting as catalyst or agitator for wider **systems change**. Homeless Link (2018) suggest that *“hostels could be seen at the forefront of best practice in supporting those with complex needs”* (32), with key aspects of this work including hostels challenging the barriers created by ‘other’ hostels.

2.4.3: Actual Outcomes

This section opens by glancing briefly at the general outcomes of temporary accommodation, as established within the existing literature, before moving to explore those that relate specifically to hostel accommodation. Living in any form of homelessness accommodation may have a negative impact on wellbeing, not least because homelessness accommodation is temporary in nature (Credland 2004; Watts et

al. 2018) and people often report a sense of being “*held back*” from moving-on with their lives due to a lack of permanency (Credland 2004; Watts et al. 2018). This may be compounded by a sense of loss because of homelessness itself and acute uncertainty regarding the future, particularly where access to timely and relevant information regarding housing status is inadequate or absent. The sense of uncertainty noted above may be exacerbated where households remain in temporary accommodation for prolonged periods. Such stays may arise due to local housing market conditions - particularly in areas of high demand and low supply - or because of practices which prioritise housing readiness or simply fail to adequately plan for move-on.

Prolonged temporary accommodation stays have been found to have a detrimental impact on well-being (and individual motivation) even where the quality of accommodation is high (Quilgars et al. 2008), but the material conditions of stay are also impactful. *Living in Limbo* (2004) and *Sick and Tired* (2004) found that temporary accommodation provision can be of poor-quality, inadequate size, unaffordable and removed from established support networks. Watts et al. (2018) reported similar findings in Scotland, with (sometimes profoundly) unsuitable allocations of temporary furnished flats being made, where the size, location, and physical condition of properties were inadequate to the needs of the given household. Relatedly, people may feel devalued and disrespected by the standard of their accommodation, but equally unable or unwilling to directly challenge providers because of a prevailing culture of expected gratitude (Mayday no date; McMordie 2018).

Temporary accommodation services sometimes have high (and combined) accommodation and support charges, which function as an (often strong) work disincentive. Mayday Trust (no date) found that people who do secure employment while living in temporary accommodation:

“are limited to either trying to find alternative accommodation, giving up their job, or to ‘go undercover’ and not declare their employment – risking fines and possible eviction. Even when the finances and arrangements are in place, for some . . . moving accommodation and settling into a new job is not an ideal combination.”

(5)

Alongside the general outcomes of temporary accommodation, hostels have specific outcomes that are either unique to their environmental conditions or occur there with notable frequency or effect.

Hostels often place **constraints on individual autonomy**. Typically, people must agree to observe the rules (and even routines) of a given hostel as a condition of access. Rules may include curfews, restrictions on nights spent outside the hostel, limitations on visitors and the prohibition of substance use on premises. Routines might include adherence to mealtimes, use of laundry facilities, and pre-scheduled support sessions. As Watts et al. (2018) note, people living in hostel accommodation often could not “*eat, sleep, socialise, come in and out, or conduct relationships with friends and family as they wished*” (142). This curtailment is sometimes figured as therapeutic but is more often thought necessary to the creation of a safe(r) environment and essential for the smooth operational running of services (Watts and Blenkinsopp 2021). Hostels may also lead to **diminished independence**, particularly where people are unable to carry out regular domestic tasks, such as laundry and food preparation. As Watts et al. (2018) note “*it is striking – and counterintuitive – that part of hostel staff’s role can be to seek to ‘equip’ people for mainstream tenancies while they are accommodated in an environment that de-skills them in just those ways*” (142).

Hostel accommodation ordinarily involves the sharing of (at least some) facilities, most typically bathroom, kitchen, or laundry facilities, and in some instances, rooms may also be shared. People who access hostel accommodation have reported related impacts stemming from a **lack of privacy** that range from feeling “*awkward or ill at ease*” to “*acute feelings of exposure, vulnerability and distress*” (Watts et al. 2018: 12; McMordie 2018: 11). Private social space where an individual might socialise with family, friends or children is also notably lacking in much provision and rules may even constrain private social interactions between residents, particularly where rules place restrictions on services user entering one another rooms (Watts et al. 2021). Assessment and support processes can also exacerbate this lack privacy, particularly where they are unnecessarily complex or invasive. Informants to a Mayday report (no date) reported that they

“felt they had to describe all of their traumatic life experiences in order to evidence that they were ‘worthy’ of a safe roof over their heads.” (23)

Hostel providers have reported a sense of community as a positive outcome of hostel accommodation, and this appears to be true for at least some users of hostel provision (Watts et al. 2018; Homeless Link 2018). Others have reported that “*the majority of connections*” - where such connections exist - “*were driven by a need to survive, to avoid being a target and to stay safe, rather than genuine friendship*” (Mayday no date: 15). Hostels have been demonstrated to expose people to a range of **interpersonal challenges**,

including exposure to conflict, antisocial and threatening behaviours (Watts et al. 2018; McMordie 2018). People with experience of hostel accommodation have also reported negative outcomes in the sphere of **social exclusion**, with hostels functioning to curtail the development of new relationships and the sustainment those that are already existing, including those between parents and their children (Mayday no date; Watts et al. 2018; Watts et al. 2021).

Homeless Link (2018) describe the hostel environment as “*often challenging*” for frontline staff (35), with “*problematic or disturbing behaviours*”, “*exhibited by people with past traumatic experiences*”, sometimes proving “*particularly distressing*” (28). They direct attention to concerns that (some) staff may experience “*some of the more extreme incidents and behaviour as traumatic*” (51). The notion that hostels may give rise to direct and vicarious **trauma** is in this study applied only to staff, but users also report exposure to conflict, violence, and victimisation, with associated traumatic impacts. Living near people who are experiencing crisis or processing past trauma, can itself be generative or compounding of trauma, and people who sleep rough will often report avoiding hostels on exactly this basis (May et al. 2006; Homeless Link 2013).

People often face considerable barriers to access when seeking to stay in hostel accommodation, including:

“existing rent arrears, problematic behaviours or addictions, restrictive access criteria, institutional stereotyping, and discrimination.” (Homeless Link 2018: 16)

Access often narrows further in response to historical exclusions and/or reputational notoriety (Ellison, Pleace, and Hanvey 2012; Criminal Justice Inspection 2013; NIHE 2016) and the “creaming” of applicants to guard against disruption to services has been noted as characteristic of at least some provision (Johnsen and Teixeira 2010; Mackie, Johnsen, and Wood 2017).

Where access is obtained, hostels have been subject to further criticism based on their attrition rates, with people being excluded from provision or displaced between stages. **Eviction** is so much part of the system that specialist hostels are often developed to accommodate those excluded by other hostels (Homeless Link 2018) and **avoidance and abandonment** are a common and widely recognised phenomena of hostel provision (Sahlin 2005; Hansen Lofstrand 2010; Homeless Link 2010). The latter is often figured as being - at least to some extent - attributable to the “*chaotic lives of some of the*

residents”, but others have argued that it is an entirely rational and reasoned response to the stresses of hostel living (McMordie 2020).

A small but growing body of research suggests that hostel accommodation may contribute to the exclusion of the most vulnerable to **rough sleeping**. For example, Autism Spectrum Conditions - “*a heterogeneous life-long neurodevelopmental condition characterised by difficulties in social communication*” - is likely to be over-represented amongst the homeless population (Kargas et al. 2019: 2; Evans 2011), perhaps unsurprisingly so given that autistic people are “*more likely to be unemployed, face difficulties maintaining employment, and experience mental health issues*” (Kargas et al. 2019: 3). A recent study found that people with elevated autistic traits “*were significantly more likely to identify big groups in shared accommodation as a barrier to accessing homelessness services*”, than those without (Kargas et al. 2019: 8). Here Kargas et al. explain:

“Avoidance behaviours such as avoiding crowded or noisy places are thought to be common autistic characteristics as well as a source of anxiety issues (e.g., Trembath, Germano, Johanson, Dissanayake, 2012). As a result, it can be surmised that a proportion of autistic homeless individuals might become rough sleepers as a consequence of being incapable of dealing with unexpected changes in the environment and/or social encounters.” (Kargas et al. 2019: 9)

There is some evidence to suggest that hostels may lead to **institutionalisation**, with (some) services users unable or unwilling to move on from the familiarity of hostel accommodation (NIHE 2012; NIHE 2012a; Ellison, Pleace and Hanvey 2012). Johnsen and Teixeira (2010) note that the ‘moves’ integral to transitional accommodation can dis-incentivise progress. At the point where an individual is perceived as settled, stable and/or capable of meeting the requirements of a placement, they are required to move. The underpinning assumption - that change will be experienced as positive - is not necessarily accurate. Mayday Trust (no date) argue that the negative psychological impact of multiple accommodation moves is significantly underestimated in the configuration of homelessness interventions, with informants to their study often expressing:

“a desire to settle down, a place where they didn’t need to move after periods of time, somewhere they could make their own.”

Hostel accommodation may also play a role in the **entrenchment** of people in homelessness. The existence of a group within the general homeless population—often with more complex needs—whose housing history is marked by cyclical shelter and hostel placements, episodes of rough sleeping and various forms of institutional stay is well evidenced in Northern Ireland (Boyle and Pleace 2017; Boyle, Palmer and Ahmed 2016; Ellison et al. 2012; Northern Ireland Housing Executive et al. 2016), the United Kingdom (Fitzpatrick, Bramley and Johnsen 2012), Europe (Benjaminsen 2016) and the United States (Kuhn and Culhane 1998). Kuhn and Culhane’s (1998) seminal study on patterns of shelter utilisation found that those who are chronically homeless make up a small proportion of the homeless population but take-up a hugely disproportionate number of bed spaces:

“The chronically homeless . . . account for 10% of shelter users . . . Despite their relatively small number . . . [they] consume half of the total shelter days.” (207)

Cluster analysis of Pathway Accommodation and Support System data revealed a strikingly similar picture in Dublin, Ireland:

“in the case of Dublin, cluster analysis . . . shows that 853 single adults were long stay or chronic shelter users, comprising 9 percent of all users, but used 47 percent of all bed nights between 2012 and 2016, staying for an average of 809 nights.” (Daly, Craig, and O’Sullivan 2018: 81)

That this translates to other contexts is lent some weight by a recent evaluation of Manchester’s A Bed Every Night programme, which found:

“Available programme data indicate that a large proportion of ABEN users leave the programme to unknown destinations, and stakeholder views confirm that repeat presentation within the service is common.” (Watts et al. 2021:118)

Finally, hostels have also been associated with the provision of **inappropriate or inadequate support**. Mismatch between hostels within a given areas and the needs profile of those requiring access may result in inappropriate placements, including those where support needs exceed *or* are lower than those targeted by the placement provider. Watts et al. (2018) note that in Scotland support is commonly available in hostel accommodation, but that it is *“of variable quality and often insufficient specialisation”* (145). Similarly, Homeless Link (2018) report that generic hostel provision can be ill-equipped for the specific needs and experiences of certain groups. Hostel staff – even in specialist provision - often report feeling *“ill-equipped to support those with significant*

mental health issues” and providers often highlight particular difficulties in supporting people experiencing problematic substance use (16).

Conclusion

There is considerable debate with regards to what constitutes a hostel and how they might be distinguished from other accommodation-based interventions, with a blurring of the distinction between shelters, hostels, and supported accommodation being of note. Building on existing definitions, this chapter has identified several components that might be held as necessary to hostel accommodation and has separated these from others that are common but contingent in nature. A significant contingent component and one that is subject to wide variation, is that of support. This chapter has sought to explore the nature of this support by outlining the core treatment and intervention models that have influenced its evolution and form. The assumptions and principles that underpin these treatment and intervention models are often highly incommensurate with one another, but the sector nonetheless draws broadly from across their full array.

Support models are often associated (or conflated) with structural models, and indeed one is sometimes a prerequisite of the other. This chapter has sought to clarify this terrain a little by offering distinct accounts of each (while acknowledging their interrelated nature). Many of the structural models at play in the homelessness sector are premised on a degree of movement between service types. This ranges from conceptions that favour strictly linear configurations to those that are more fluid and flexible, but in practice these structural models – functioning in communication with the sectors various support models – are perhaps best described as a complex web of interventions, within which hostels (albeit ambiguously defined) tend to sit.

Against this background of conceptual confusion, internal illogicality, and structural complexity, it is perhaps unsurprising to find that the existing evidence base on the outcomes of hostel accommodation is limited and patchy. What the intended outcomes ought to be is often contested and controversial and how (or if) identified outcomes are causally linked (or otherwise) to hostel use is rarely considered, albeit that there are some notable exceptions. An exploration of existing literature does allow for the postulation of intended and actual outcomes, and this chapter has sought to lay these out in some detail.

The next chapter sets out a theoretical framework that might allow for the empirical testing of the postulations (i.e., the components of hostel accommodation and the intended and actual outcomes) that have been explored across this chapter.

Chapter 3: Theoretical Framework

Introduction

This study seeks to explore and clarify the intended and actual outcomes of hostel accommodation. In doing so it utilises a conceptual framework rooted in critical realism and this chapter seeks to outline this framework in some detail. It draws on the work of a range of critical realist scholars but is especially concerned with the work of Roy Bhaskar, encompassing his writing on both basic and dialectic critical realism (Bhaskar 1979; 1993; 2016).

Critical realism is not an empirical programme, methodology or substantive theory; rather, it is a philosophical doctrine which provides “*second-order knowledge*” or “*knowledge of the necessary conditions of knowledge*” (i.e., the necessary conditions under which a complete answer might be sought, rather than the answer itself) (Bhaskar 1979a: 10). This function is conceptualised by Roy Bhaskar as one of “*under-labouring for science*”, a notion itself derived from the Lockean tradition of *enabling* substantive investigation by “*clearing the ground a little . . . [by] removing some of the rubbish that lies in the way to knowledge*” (Bhaskar 1979a: 10). Critical realism may be more properly considered a *meta*-theoretical position: a philosophically informed account of (both natural and social) science that might help to guide empirical investigation and theoretical modes of explanation (Archer et al. 2016).

Archer et al. (2016) helpfully suggest that we might think of social research in the critical realist tradition

“in terms of three layers: our empirical data, the theories that we draw upon to explain our empirical data, and our metatheory —the theory and the philosophy behind our theories.”

This chapter follows Archer’s premise by, firstly, setting out the (three) theories that the study draws on to explain the empirical data. This includes a transactional theory of cognitive appraisal, emotion, and coping, which asks “*what must be going on in the mind to influence people to act and react as they do?*” (Lazarus and Folkman 1984; Lazarus 1993; Lazarus 1999); a theory of identity, agency, and choice, which asks “*how do imposed homeless identities differ from the subjective experience of people who are homeless?*” (Parsell 2018); and, a theory of human capabilities, which asks “*what are people actually able to be and do?*” (Nussbaum 2011). The chapter then sets out the core assumptions of critical realism – the “*philosophy behind our theories*” - with respect to

ontology, epistemology, and causation. As we progress through the critical realist informed sections of this chapter, each of the study's three theories are situated in relation to critical realism – and indeed to one another - with the intention that together they might function as an underpinning theoretical and methodological synthesis against which the empirical chapters that follow can rest.

3.1 Theoretical Synthesis

This section sets out a brief overview of the key tenets of each the three theories deployed in this thesis.

3.1.1: Cognitive Appraisal, Emotion and Coping

This first element of the theoretical framework draws primarily on the work of psychologist Richard S. Lazarus, but also encompasses that of Susan Folkman (including the co-authored work of Lazarus and Folkman).⁷ Lazarus' work is concerned with appraisal and emotion in its broadest sense but with a special focus – in parts – on how people understand and process environmental stressors. Stress has significant implications for human wellbeing, in the direct sense of occasioning *physiological* alterations in the body (see, for example, Tawakol et al. 2017) and in the indirect or *psychosocial* sense of influencing cognition and social interaction (see, for example, Paulmann et al. 2016; see also, DeSteno, Gross and Kubzansky 2013 for an overview of direct and indirect emotion-related effects). This study utilises Lazarusean theory as an under-labouring framework for exploring and understanding the latter, including the psychosocial effects of environmental stressors on decision making strategies, coping behaviours and the building of social supports (see Moors 2014 for an overview of cognitive appraisal theory).

Cognitive appraisal theorists are divided with respect to whether distinct emotional states (such as stress) should be held as the principal phenomena to be explained (see, for example, DeSteno, Gross and Kubzansky 2013, and Reizenstein 2019); or whether (sub)emotional components should be the primary object of study, with the labelling of distinct states being of lesser or secondary concern (see, for example, Scherer 2009 and Scherer and Moors 2019). The exploration of stress (as a discrete state) can yield insights

⁷ Some of the analysis in this section (3.1.1) has previously been presented in the following publication: McMordie, L. (2021) Avoidance strategies: stress, appraisal and coping in hostel accommodation. *Housing Studies*. 36 (3): 380-396.

into the causal mechanisms of hostel accommodation outcomes (see, for example, McMordie 2020), but such exploration also demands the highest regard for the emergent nature of stress and, thus, its (sub)emotional components and the process of interaction between the same. Environmental stressors may generate a range of (sub)emotional components (or none), and those components may or may not be actualised in an experience that is sensed (and understood) as one of stress. Those (sub)emotional components and their various interactions matter to this study (and hold causal force), irrespective of whether they are ultimately actualised in an experience of stress.

Lazarus and Folkman (1984) describe the process of cognitive appraisal as occurring in two interrelated, non-linear stages: namely, primary appraisal and secondary appraisal. Primary appraisal is concerned with the individual's evaluation of the given situation in terms of whether they have anything at stake in the transaction: that is, what (if anything) they stand to gain or lose. Lazarus and Folkman propose three forms of primary appraisal: irrelevant, where the individual holds no vested interest in either the transaction or the results of the transaction; benign positive, where the individual perceives the transaction as positive with no potential for negative outcomes: and, stressful, where the individual perceives a transaction as having a potentially negative result or an outcome detrimental to well-being.

Secondary appraisal refers to the further evaluation of demands considered stressful, with three forms again being proposed, namely: a challenge appraisal, where a transaction is evaluated as holding potential for mastery or gain; a threat appraisal, where a transaction prompts anticipation of future loss or harm; or harm/loss appraisal, where material, physical or emotional harm or loss has already been endured in the transaction (for a summary of evidence on the differing influence of threat versus challenge appraisals, see Scherer and Moors 2019).

Both primary and secondary appraisals are influenced by the extent to which the individual perceives their inner and outer resources as enabling effective coping: with coping being defined as behavioural efforts to master, reduce, or tolerate the stressful demand (see DeSteno, Gross and Kubzansky 2013 for an account of emotion regulation and coping). Lazarus and Folkman categorise the components influencing appraisal (and by extension the adoption of coping strategies) under two broad headings: namely, environment-level components and person-level components. Environment components may be understood as the "*properties of situations that make them potentially harmful, dangerous, threatening, or for that matter challenging*" (Lazarus and Folkman 1984: 82).

Person-level components refer to the individual's understanding of the given event and the characteristics that determine what holds importance for them in each encounter.

Subjective experiences (such as stress) are here conceived of as 'contextual' meaning that they are determined by the interaction of components at the level of the person *and* the environment (DeSteno, Gross and Kubzansky 2013; Folkman, 2010: 901; Lazarus and Folkman 1984; Moors 2014); and, as 'a process', meaning that subjective experiences are dynamic and emergent in nature, changing across environments and over time (DeSteno, Gross and Kubzansky 2013; Folkman 2010: 901; Lazarus and Folkman 1984; Moors 2014; Scherer and Moors 2019). This conceptualisation allows for an analysis of the process by which multiple components (both internal and external) interact to produce (emergent) subjective experiences (and their associated phenomena) for a given individual, in each environment, at a particular point in time (Fitzpatrick 2005; Sayer 1992).

3.1.2: Homelessness and Identity

This aspect of the synthesis draws especially on Cameron Parsell's theory as described in *The Homeless Person in Contemporary Society* (2018), but also utilises and seeks to build on his wider body of research about the identities, lives and aspirations of people who are homeless and the services they access (Parsell 2010, Parsell and Parsell 2012).⁸ Parsell is particularly concerned to ensure that the experiences and sense making of people who are homeless should not be disregarded or hidden but instead actively foregrounded. To ignore the empirical experiences of people who are homeless, he suggests, "*is to add moral and paternalistic insult to their material deprivation*" (67). Parsell is keen to avoid "naïve empiricism" and argues that this is entirely possible provided that lived experience is carefully embedded within a nuanced contextual and theoretical framework.

The core contextual setting, for Parsell, is in the many and shifting representations of people who are homeless, from which he draws three recurrent and interrelated themes. First, homeless people are viewed as inherently different: categorised and classified based on what they lack. Second, homelessness is presented as a trait or characteristic of the homeless person: it is assumed that homelessness signifies something about the individual identity, values, and aspirations of the person who is homeless. Finally, where

⁸ Some of the analysis in this section (3.1.2) has already been presented in the following publication: McMordie, L. (2019) *The Homeless Person in Contemporary Society*. *Housing Studies*. 34(6): 1064-1065, DOI: [10.1080/02673037.2019.1626597](https://doi.org/10.1080/02673037.2019.1626597)

homelessness is chronic or long-term, the homeless person is figured as being transformed by the experience: through a process of disaffiliation from mainstream society and reaffiliation to a homelessness sub-culture the person who is homeless assumes or acquires a homeless identity.

What Parsellean research and theory illuminates more clearly than that of cognitive appraisal (or indeed human capabilities) is the divergence between identities imposed and those subjectively experienced. While people who are homeless recognise “*the homeless identity*” as one that is socially stigmatising - and thus damaging to their sense of self – they do not, Parsell argues, describe an individual or collective sense of self as homeless; nor do people necessarily accumulate or acquire a homeless identity over time. This incongruence between dominant discourses and subjective experience holds relevance in the sphere of “individual choice”. The misappropriation of choice as a mechanism to pathologize the individual and detract from the largely structural causes of homelessness is a position Parsell emphatically rejects. Yet, he is also highly critical of the countervailing disavowal of choice and human agency, and the associated body of literature that positions people who are homeless as passive and non-agentic recipients of service interventions. Parsell demonstrates that people who are homeless instead perceive themselves as actively choosing among available options and that they seek and value this capacity to choose. However, choice is always embedded within - and thus mediated and constrained by - the social environment in which it occurs. Understanding how such choices are mediated and constrained by the hostel environment is, I would argue, key to understanding its intended and actual outcomes. Here, Lazarus’ theory of cognitive appraisal not only lends weight to Parsell’s argument that people are continuously involved in choice-making (Lazarus would say appraisal) activities, but also provides a framework for exploring the multiple components that act to mediate and constrain these activities.

3.1.3: Human Capabilities

Critical realism is not only concerned with providing knowledge of the necessary condition of knowledge, but also seeks (particularly in its dialectic iteration) to speak to the *purpose* of pursuing knowledge. Bhaskar proposes that knowledge is necessary for the development of “*practices oriented to human well-being and flourishing*” (Bhaskar 2016: 2). He explains:

An under-labouring philosophy such as critical realism, seriously committed to the project of universal human flourishing, can aspire to be more than a nuisance, a

Nietzschean gadfly on the neck of the powers that be; it can become a spark, a liberation, lifting the weight of the (Lockean) rubbish that mires us. This is philosophy as . . . an agent of emancipatory change (Bhaskar 2016: 5).

Where emancipatory change and human flourishing are held as an (or the) objective of social research – and dialectic critical realism would propose that it should be – aiming to achieve greater unity of theory and practice ought to be a primary aspiration. This means that research in the critical realist tradition should not only postulate models of positive transformation that are theoretical or conceptual in nature but should instead aspire toward models which in practice might enable greater human flourishing. The final element of this synthesis has as its primary objective the enabling of just such a move: human capabilities. This study pays particular attention to Martha Nussbaum’s work on human capabilities (1992, 2003, 2011) but also includes reference to that of Amartya Sen (1984, 1993, 2004).

Nussbaum argues for the existence and recognition of core functions (central capabilities) that are necessary for a life “*well-lived*” and “*in accordance with human dignity*” (2011: 78). The capabilities are as follows: life; bodily health; bodily integrity; sense, imagination and thought, emotions; practical reason; affiliation; other species; play; and control over one’s environment (2011: 33). Much has been written about the capabilities approach, including its applicability to homelessness (see McNaughton-Nicholls 2010) and to accommodation-based interventions, including that of hostels (see Watts and Blenkinsopp 2021). It is not the intention of this study to assess how hostels impact (or otherwise) on each capability, but rather to draw on the broader concept of capabilities as it relates to dialectic critical realism’s concept of human flourishing. Here, Nussbaum (1992) explanation of the utility of the capabilities approach in supporting momentum for change proves helpful:

“Once we identify a group of especially important functions in human life, we are then in a position to ask what social and political institutions are doing about them. Are they giving people what they need in order to be capable of functioning in all these human ways? And are they doing it in a minimal way or are they making it possible for humans to function well?” (214)

Central to Nussbaum’s conception of capabilities is the premise (derived at least in part from the work of Sen) that the theorisation or analyses of social justice must ask “*what are people actually able to do and be?*” This means that the approach “*takes each person as an end, asking not just about the total or average well-being but about the*

opportunities available to each person” (Nussbaum 2011: 18). This approach has several overlaps with that of Parsell and Lazarus: first, it takes seriously the agency of the individual and their right to self-determination; second, the primary concern is not with the actual choices that people make but with choices they are afforded in the first instance; and, finally, it allows space for account to be taken of the variables that constrain and enable human capability.

Having outlined the core components of each theory, this chapter now moves to position them within a broader consideration of the tenets of basic and dialectic critical realism.

3.2 Ontological Realism

Ontological realism refers to the assertion that the “*world has an existence independent of our knowledge [and perception] of it*”: that is, statements about the world cannot be reduced to statements about our knowledge of the world (Williams and May 1996: 81). Historically, social science, with its grounding in empirical investigation, has focused more closely on epistemology (how we know what we know) while the matter of ontology (the nature of the known) has received less attention (Bhaskar 2016: 5). Thus, critical realism argues that the focus of social science has often been on methodological and explanatory theory, with insufficient exploration of the nature and form of social structures in the social world (Archer et al. 2016).

Although ontology may be denied or neglected, it none-the-less continues to exert its existence: thus, it is always already presupposed in theory and implicit in normative accounts of the social world. As Camus suggests, “*methods imply metaphysics*”: that is to say, they unconsciously “*disclose conclusions that they often claim not to know yet*” (Camus 1942: 156). This, Bachelard (1953) contends, gives rise to a naïve and unexamined realist ontology: “*all philosophy, explicitly or tacitly, honestly or surreptitiously... deposits, projects or presupposes a reality*” (141).

Critical realism is in its primary move a re-vindication of ontology: it supports an explicit, conscious, and deliberate engagement with the nature of the social and natural world. This demands critical evaluation, not only of the role of ontology in scientific development and social research, but also in the object (social phenomena) of social science itself. Thus, it renders explicit methodological and theoretical presuppositions that do not adequately distinguish between the hypothetical (as in theoretical, methodological, or normative) mechanisms of social research and ‘real’ mechanisms in the social world (Fitzpatrick 2005; Sayer 1992). In this way, critical realism seeks to

correct a core metaphilosophical error: namely, the epistemic fallacy. That is, the notion that statements about being can be made in terms of statements about our knowledge of being. The epistemic fallacy is a necessary (though not always deliberate) outcome of the implicit or naïve ontology outlined above, in which the domain of the real is reduced to the domain of actual (i.e., actualism) and associated with sense-experience (i.e., that which can be perceived). This gives rise to what Bhaskar describes as “*ontological monovalence*”: a “*purely positivist, complimenting a purely actual, notion of reality*”, which in practice de-spatialises, de-temporalises and de-stratifies accounts of being (Bhaskar 1993: 4-5). Critical realism seeks to curb these impulses that run toward the reification of sensed experience, and their resultant negation (or diminishing) of the possible in deference to the actual.

The explanatory theories utilised in this research were (in part) selected based on their acknowledgement of the existence of a real world in which individual human agents are embedded. This is evident in the importance Lazarus grants to environmental factors in the individual’s attribution of meaning to given events; in the prominence given to the material circumstances of homelessness in the work of Parsell; and, in Nussbaum’s concept of combined capabilities (i.e., the opportunities available for the given individual in their specific political, social, and economic situation). That is not to say that they are each fully oriented against actualism (i.e., a wholly perceptual criterion that ascribes reality to that which can be perceived directly) and the necessarily anthropomorphic nature of such a position (i.e., the tendency to prioritise the meaning and understanding attributed to the world by individual human agents) (Bhaskar 1993: 4). Indeed, I will argue below that Lazarus shows a penchant for a particularly anthropomorphic centred form of actualism, and that Parsell and Nussbaum have at least some tendencies toward the de-stratification of reality. It will be my contention that (re)rendering explicit the ontology implicit in each of the selected theories is, first, a necessary precondition in the formation of an interdisciplinary theoretical synthesis, and second, that in enabling such a synthesis, greater explanatory power is possible.

3.3 Epistemic Relativism

The ‘critical’ component of critical realism is primarily concerned with epistemology (i.e. what it is possible to know). It proposes that our knowledge of the world is fallible and theory-laden, and that it ought to always be “*open to alteration through criticism*” and in response to scientific discovery (Fitzpatrick 2005; McNaughton Nicholls 2009; Somerville and Bengtsson 2002: 124). This fallibility means that we cannot (and ought

not) assume an unchanging knowledge of unchanging things: “*there is no way of knowing the world*” Bhaskar contends, “*except under particular, more or less historically transient descriptions*” (Bhaskar 1986: 99). This demands an understanding of social science as “*a (transitive) social process in which our knowledge about an independently existing and acting (intransitive) world is produced*” (Bhaskar 2016: 6). The intransitive objects of science as those that exist independently of our knowledge of them, they are “*things, structures, mechanisms and processes, events and possibilities of the world*”; while the transitive objects of social science are those that encompass “*antecedently established facts and theories, paradigms and models, methods and techniques of inquiry*” (Bhaskar 1979a: 21-22). This includes critical realism itself and means that critical realism - like all knowledge - is subject to challenge and open to modification (dismissal even), where changed or changing knowledge is uncovered.

All this is not to say that that ideas – taken to include knowledge, values, theories and so forth - do not have an ontological or ‘real’ status; on the contrary, they are always already constellationally “*contained within being*” (Bhaskar 1997: 140). The “hostel” and its conception and evolution across time and space, is an “*objectification of ideas*” (Bhaskar 1997: 139). It is the social product – or, across time and space, the reproducts and transforms - of ideations (Bhaskar 1997: 139). As Bhaskar explains:

“To deny the reality of a part of everything (of anything), such as ideas (or say persons, or consciousness, or agency, or values – or mind, or body) extrudes or detotalizes it or them from the world, that is the rest of the world of which they are in principle casually explicable and casually efficacious parts.” (Bhaskar 1997: 139)

Here, the ontological reality of ideas must be held as conceptually distinct from the epistemological question of their truth or efficacy: *social* reality can and often is falsely characterised and categorised (i.e., representationally inadequate), giving rise to what Bhaskar terms “*demi-realities*” through which “*categorical necessity or truth or reality is refracted*” (Bhaskar 1997: 145). What defines “*demi-reality*” is absence (or incompleteness) and where that which is absented is categorially necessary, we find “*(1) dualistic, (2) implicit, (3) inconsistent-fissured and (4) compromised*” totalities (Bhaskar 1997: 145). It is exactly these conflicts or *tensions* (evidenced in absence and incompleteness) that allows for imminent critique and dialectical argumentation, concepts which will be explored in more detail below.

For now, we can return to Parsell's overview of the shifting representations of the homeless person across space and time. His account reveals that knowledge of the "*homeless identity*" is transient, fluid, and subject to change. Although Parsell does not articulate this understanding within an explicitly critical realist framework, his theorising is in many ways an application of Bhaskar's fundamental assertion: "*there is no way of knowing the world except under particular, more or less historically transient descriptions*" (Bhaskar 1986: 99).

Shifts in representation and framing raises important and challenging questions around how we might understand the subjective experience of people who are homeless. As noted, Parsell posits that the experiences and sense making of people who are homeless should not be disregarded or hidden but instead actively foregrounded. This methodological approach poses a challenge, namely the extent to which subjective experience can be held as acceptable knowledge, given the fallible nature of *all* knowledge. Positioned within a critical realist framework, Parsell's argument that the experience of homeless people should not be disregarded or hidden holds weight. To disregard subjective experience – to absent the individual - would be to extrude them from the world in which they are "*casually explicable and casually efficacious parts*" (Bhaskar 1997: 139). Indeed, it is Parsell's inclusion of the experience of the individual that allows for the exposure of social reality (the dominant discourses of the homeless individual) as falsely characterised, premised on the absencing of that which is categorically necessary (the individual to whom such discourses refer). Parsell's assertion that the experiences of homeless people should be *foregrounded* holds lesser weight. In a critical realist framework, subjective experience would occupy its *necessary* position as a non-extradable part of the world; this part may be one that demands its foregrounding, but this would not *necessarily* be the case, and it would certainly not be granted apriori foregrounding above other levels of reality. Here, Lazarus' insistence that neither environmental or individual factors should be held as logically prior might act to curb Parsell's lean toward the foregrounding of empirical experience, and the potential absencing or deprioritising of other levels of reality consequent on such endeavours. This is not to suggest that Parsell is not cognisant of other factors – in fact, he pays regard to the material circumstances of homelessness – but is rather to highlight that taking a *predetermined* stance with regards to what should or should not be foregrounded would run contrary to the critical realist endeavour.

The principles that underpin Lazarus' model of cognitive appraisal, emotion and coping, echo those of Parsell in their emphasis on the non-extradable nature the individual. These principles are perhaps most accessible in Lazarus' work on stress. The dominant stimulus-response model of stress to which Lazarus' work was a response, was in large part derived from the natural sciences, particularly that of the physics of man-made structures, where 'stimulus' is the load or weight, stress is the area that the load impinges upon, and response is the strain or impact on the structure created by the interplay of load and stress. The application of this model to the experience of stress in human agents was challenged by the findings - of Lazarus and others - that stressful conditions do not produce dependable effects in human agents. Unlike stress in a physical structure, the human stress response is not merely a form of activation; rather, different experiences of stress are brought "*about by different antecedent conditions, both in the environment and within the person*" (Lazarus 1993: 5). The subsequent development of stimulus-*organism*-response models - with the inclusion of 'organism' being *necessary* to account for qualitative differences in human responses to stressful situations – forms the foundation of Lazarus' theorising.

As Parsell demonstrates, the consideration of empirical experience as articulated by the individual *and* the meaning attributed to such experiences by external agents — allows for the unpacking of false characterisations of social reality. Bringing this concept to bear on Lazarus' theory of stress, we might understand the stimulus-organism-response model to include not only the individual (organism) subject to stress, but also other necessarily and contingently related individuals. Recalling Bhaskar's assertion of the ontological reality of ideas, it is not only the primary and secondary appraisal undertaken by the individual that holds weight; the meta-appraisals undertaken by external observers of the given individual also possess casual force. It is important to note, again, that allowing for the (potentially) lesser, equal, or greater weighting of the meaning attributed to homelessness by external actors against the subjective experience of homelessness itself, should be held as entirely separate from the question of their respective epistemological truth. The argument for not assuming one should be prioritised above the other is an argument premised - not on notions of truth - but on the ontologically 'real' status of both. I would contend that situating Parsell and Lazarus within a critical realistic framework (and in relation to one another) would allow for the enhancement of their explanatory power. Both are explicitly concerned with rendering visible that which is absented in dominant accounts of reality. Their emphasis on the validity of empirical experience as

articulated by the individual is not only justifiable but *necessary* to the critical realist approach. First, in that empirical experience provides indicators or pointers that allow for the postulation of causal mechanisms, albeit that we should not often (or perhaps ever) expect a direct correspondence between the two; and second, in that the individual (and their consciousness, values, ideas and so on) are always already a non-extradable and causally efficacious part of the world. Even where empirical experiences are hidden or disregarded, they none-the-less continue to have a real status and as such their presence (or the absence of their presence) will be evident in the fissure caused by their exclusion. Where they differ is in the weighting of subjective experience within the given totality. While Parsell argues for the foregrounding of individual accounts of homelessness, Lazarus is perhaps more closely aligned with the tenets of critical realism in suggesting that nothing (no particular factor) should be held as logically prior, including variables at the level of the individual (see Section 4 below). That said, Lazarus' conception of the 'individual' as the subject undertaking a primary and secondary appraisal, perhaps neglects the casual force of observers or evaluators of such appraisals, particularly those observers who hold the capacity to influence outcomes.

This very preliminary synthesis of theory is possible because both Parsell and Lazarus presuppose (at varying levels) a stratified ontology of causation. In the section which follows, I will argue that critical realism, in rendering this presupposition explicit and allowing for the existence of multiple levels of reality beyond that addressed by each theory, not only allows for Lazarus and Parsell to be utilised as an explanatory framework for individual levels of reality, but also facilitates the synthesising of theory *across* levels, allowing for greater depth and reach in the explanatory power of both.

3.4 Stratified Ontology of Causation

Critical realism differentiates between and recognises the interconnectedness of three ontological domains of reality: the empirical, the actual and the real. *The real* refers to generative or causal mechanisms that may or may not have actual effects; *the actual* refers to events that are caused by generative mechanisms in the domain of the real that may or may not be known or observed by human agents; and *the empirical* refers to that which is observed or sensed by human agents. Unlike the positivistic reliance on empirical and linear regularity, this stratified ontology allows for a disconnect or divergence between cause (the real), events (the actual) and observable effect (the empirical). Here, Bhaskar succinctly summaries the critical realist disposition:

“[It] accentuates the ontological, epistemological, and logical priority of the possible over the actual, and insists upon a three-tiered analysis of dispositions, in which they are seen to be analysed in terms of tendencies possessed but unexercised, tendencies exercised but unactualized and tendencies exercised and actualised in a particular outcome.” (Bhaskar 1997: 140)

Given this disconnect, constant conjunctions between cause and effect might be more properly regarded as the exception rather than the rule. This is because causal mechanism in the social world (that is the necessary tendencies of social objects) function in an open system that encompasses a complex, interconnected web of contingently related causal mechanism. As such, a ‘real’ casual mechanism may or may not be activated (thus producing an event in the domain of the actual) depending on the nature of its interaction with other contingent factors (Fitzpatrick 2005). Or, alternatively, the interaction between necessary and contingent causal mechanisms may produce an entirely unexpected effect that cannot be readily deduced from a consideration of the individual mechanisms or components. Here, Fitzpatrick (2005) explains:

“The presence of other (contingently related) casual mechanisms may often – or even always – prevent correspondence between cause and effect, which is why the presence (or absence) of empirical regularities is not a reliable guide to the (non-) existence of real causal powers.” (3)

A realist explanation of social phenomena, then, allows for the existence of multiple casual mechanisms (both necessary and contingent), with a **complex** pattern of interaction between these mechanisms capable of generating **emergent** properties that cannot be deduced from individual components (i.e., the whole is greater than the part). Within this pattern of interaction, a small change may bring about sudden, unexpected, and **non-linear** outcomes (Fitzpatrick 2005). A critical realist analysis seeks to understand the interplay of mechanisms that produce certain phenomena while denying “*any simple symmetry between explanation and prediction*” (Bassett 1999: 36). That is to say, the factors that explain certain outcomes will not “*necessarily always lead to that outcome, for all people*” (McNaughton Nicholls 2009: 70).

The interaction between the environment (or society) and the individual - most clearly postulated by Lazarus and Nussbaum, but also prominent in the work of Parsell - allows not only for the contextualisation of empirical experiences as articulated by the individual, but for the conceptualisation of empirical experience as *emergent* from the interaction and interplay between multiple variables, arising at the level of the individual and the

environment⁹. In *Stress, Appraisal and Coping*, for example, Lazarus and Folkman make clear that the choice of primary and secondary as descriptors for the appraisal process was perhaps unfortunate in that neither one nor the other is logically prior. Indeed, they posit that they should not and cannot be considered as distinct processes and are instead interdependent, with each (potentially) exerting influence on the other. Thus, simply situating their work within a critical realist framework might enhance application of the theory, allowing as it does for a complex and multifaceted concept of causation.

Lazarus and Folkman (1984) ask, “*what must be going on in the mind to influence people to act and react as they do?*” (127). In focusing on the process of cognitive appraisal – that is how the individual evaluates a given social event – Lazarus and Folkman *for the most part* focus on tendencies (of social structures) exercised and actualised in outcomes and, more specifically, on outcomes that are sensed by the individual and thus cognitively processed. They give some consideration to tendencies possessed but unexercised or exercised but unactualised (i.e., in the sense of threat occasioned by the *possibility* of an events occurrence), but quite limited attention is paid to generative mechanisms (antecedent conditions) in the domain of the real that may *not* be known or observed by human agents (cognitively appraised). Given that such mechanisms possess real causal power, irrespective of whether they are observed or known, there is a sense in which Lazarus and Folkman extrude the mind from the rest the world (of which it is a part), despite their insistence on attention to environmental factors. That said, they do not explicitly argue for the exclusion of variables acting outside the sphere of cognition. Thus, layering their theorising within a critical realist framework is entirely feasible, but more than this, it is also desirable: first, in terms of the utility of the theory itself in uncovering causal mechanisms at the level of the mind and, second, in that the critical realist framework frees us from the sphere of cognitive appraisal, allowing for wider exploration of causal mechanisms that are not observed or known in the empirical realm.

⁹ It is important to note that Lazarus’ uses the terms ‘individual factors’, ‘individual variables’, and ‘person-level factors’ almost interchangeably throughout his body of work. There is a significant level of correspondence between Lazarus’ notion of ‘individual variables’ (etc.) and Nussbaum’s concept of ‘internal capabilities’: at a base level, they are both referring to the attributes of the given individual. At the same time, the two concepts also differ in several nuanced and important ways. Relatedly, Parsell (sometimes) uses phrases such as ‘subjective experience as articulated by the individual’ to refer to concepts which are again similar (in some respects) to what Lazarus and Nussbaum respectively mean by ‘individual factors’ and ‘internal capabilities.’

We turn briefly now to a consideration of Nussbaum's capabilities approach, with a view to exploring the key concepts of 'combined' and 'internal' capabilities. Combined capabilities, Nussbaum argues, are "*not just abilities [internal capabilities] residing inside a person but also the freedoms or opportunities created by a combination of personal abilities and the political, social and economic environment*" (Nussbaum 2011: 20). Internal capabilities are, in turn, "*the characteristics of a person*" (personality traits, intellectual and emotional capabilities, states of bodily fitness and health, internalised learning, skills of perception and movement)" (Nussbaum 2011: 21). We can see here echoes of Lazarus' concept of the interplay between environmental and individual factors and, crucially, both conceive of internal variables (Nussbaum would say "*states of the person*") as "*not fixed, but fluid and dynamic*" (Nussbaum 2011: 21). What Nussbaum's theory offers, beyond that of Lazarus is, first, the notion that internal capabilities are constellationally contained within combined capabilities and, second, that neither can be reduced to the other. Here, she explains the rationale behind insisting upon a stratified conception of combined capabilities.

"The distinction [between internal and combined capabilities] corresponds to two overlapping but distinct tasks of the decent society. A society might do well at producing internal capabilities but might cut off the avenues through which people actually have the opportunity to function in accordance with those capabilities." (Nussbaum 2011: 21)

Here, Nussbaum is in effect referring to the capacity of real tendencies at the level of social, political, and economic structures, to frustrate the actualisation of real tendencies at the level of the individual. Crucially, though, Nussbaum defines "*internal capabilities*" not as the totality of variables at the level of the individual but as "*trained or developed traits and abilities*"; that is, as a conception that purposefully excludes "*innate equipment*" to allow for a focus on the facets of the individual that are consequent on human endeavour. These facets are always already entwined with (though not reducible to) the social structures that frustrate their actualisation (in that trained and developed traits are acquired in "*interaction with the social, economic, familial and political environment*") (Nussbaum 2011: 21). Here, it might be helpful to consider Sayer's conceptualisation of structure:

"Contrary to common assumption, structures include not only big social objects such as the international division of labour but small ones at the interpersonal and

personal levels (e.g., conceptual structures) and still smaller non-social ones at the neurological level and beyond.” (Sayer 1992: 92)

Recalling my earlier point regarding Lazarus’ focus on events as perceived (or cognitively appraised) by the individual and bringing it into to communication with Nussbaum’s conception of internal capabilities as structures, we might begin to see how this synthesis allows for a conception of structures at the personal level as being emergent - *in the first instance* - from the interplay between the embodied human agent and wider social structures. So, *alongside* Lazarus’ conception of individual traits as shifting in response to their interaction with a given environment, we can layer Nussbaum’s conceptualisation of *some* individual traits as always already constituted (although not fully determined) by the social structures in which they are embedded. This frees us up a little from the sphere of cognitive appraisal, allowing more space for the consideration of antecedent (internal) causal mechanisms of which the given individual may or may not be aware when undertaking cognitive appraisal of a given event. Equally, allowing for Lazarus’ inclusion of ‘innate equipment’ (factors at the level of human biology and physiology for example) might act as a corrective to Nussbaum’s deprioritisation of these factors. Moreover, we can begin to see how, in bringing each theory to bear upon the other, we can achieve a notion of causation that is at once more stratified and more clearly emergent in nature.

It is also worth noting, that Nussbaum’s theory of human capabilities, is purposefully oriented toward the possible. The rationale of asking what each person is *actually* able to do and be in the context of their combined capabilities, is to provide a comparator against what it is *possible* for each person to do and be where access to the central capabilities is granted. Yet, while Nussbaum poses the question of “*what is each person actually able to do and be*” – and indeed explicitly states that the “*approach takes each person as an end*” – what she does not provide is the theoretical framework that would allow for a truly nuanced answer to this question. How do we determine what a *given individual* is able to do and be? How do we identify and trace the interplay of the multiple variables that collectively constitute the combined capability of each person? I will argue in section 5.3 below that it is Lazarus who provides us with the fundamentals of a theoretical framework that might go some way toward answering this question. That is not to suggest that Lazarus’ framework holds greater explanatory power than that of Nussbaum; but, rather, that a synthesis of the two allow for the greater depth and reach of both. Lazarus may provide an explanatory framework for the empirical phenomena

(what each person is able to be and do), but it is Nussbaum that clearly articulates the questions that should be asked of such phenomena and, perhaps more importantly, it is Nussbaum who insists on the logical priority of *possible* human capability over that of the *actual*.

3.5 Laminated systems

This section looks at how the concept of a stratified ontology might be applied to the practice of social research. Here, Bhaskar (2016) proposes that the explanation of social phenomena may be enabled through the concept of laminated (or stratified) systems: a concept originally introduced by Andrew Collier (1989) to elucidate the irreducibility of casual mechanisms to an undifferentiated reality and subsequently developed across Bhaskar's extensive body of work. Laminated systems are the outworking of the idea that any explanation of events in the social world demands understanding of multiple causal mechanisms functioning across different domains and levels of reality (Bhaskar and Danermark 2006):

“The idea of a ‘lamination’ is designed to underwrite the irreducibility of, and necessity for, the various levels used in an applied or concrete interdisciplinary investigation.” (Bhaskar 2016: 16).

Crucially, the various levels of lamination often cross traditional disciplinary silos. It is in this sense that research should: first, be interdisciplinary in nature; and second, deploy lamination as a heuristic for such interdisciplinarity.

The laminated system utilised in this study - *levels of reality* - proposes different (emergent) ontological levels of reality that *may* be involved in the genesis, formation and function of social events or structures. These ontological levels are case-specific rather than fixed, with the possibility that their composition may vary depending on the object of enquiry. The levels of reality listed below are taken from Bhaskar and Danermark's (2006) critical realist perspective on disability research, with the examples provided being modified to reflect existing knowledge and understanding of homelessness service provision.

(1) physical

This would encompass the physical artefacts of homelessness and associated service provision: here, we might consider mechanisms at the level of the built environment, such as shared living spaces and the material mechanisms of controlled access.

(2) biological (more specifically physiological, medical, or clinical)

This would encompass biological and neurological levels of being. Here, we might consider substance dependency, physical and mental ill-health, and the bodily impact of acute homelessness.

(3) psychological

This would encompass mechanisms at the level of emotion - such as anger, shame, and guilt – and those at the level of individual psychology – such as trauma, feelings of self-worth and beliefs about control.

(4) psycho-social

This would encompass the interrelation of social factors – the rules governing admission to hostel accommodation such as evidence of engagement with support planning processes and so on - and factors identified at the level of psychology such as fear or mistrust of statutory services.

(5) socio-economic

This would encompass the interrelation of social factors – such as participation in training, education, and employment – and economic factors such as the affordability of temporary accommodation placements for those not in receipt of welfare benefits.

(6) cultural

This would encompass mechanisms at the level of culture – such as the value placed by society on being housed and the associated vulnerability of those who are not, to social exclusion, and of course the ‘cultures’ of hostel accommodation, and more broadly homelessness.

(7) normative

This would encompass normative values and arguments as they pertain to homelessness – such as notions of desert, individual fecklessness, and entitlement.

Where several (case-specific) levels of ontological reality can be implicated in the genesis of a social event, we may talk of understanding the given social phenomenon as a laminated system and, “*to the extent that it is necessarily the case*” that given levels are implicated in the genesis of a social event, we may talk of a “*necessarily laminated system*” (Bhaskar and Danermark 2006: 288).

Positivist and interpretivist accounts of homelessness provide evidence concerning all seven levels of reality as articulated here by Bhasker and Danermark (2006). Yet, individual levels are sometimes theorised or described in isolation from one another or, alternatively, delineated collectively as potential variables in the causation of homelessness. Sometimes we find a focus on a “*conjunctive multiplicity of causes*”: for example, in the interaction of (1) the hostel environment, (3) complex trauma and (7) normative values, evident in the literature of psychologically informed environments (Breedvelt 2016; Johnson 2010; Keats et al. 2012). At others, we see a “*disjunctive plurality of causes*”: for example, in the disconnection of (1) rough sleeping and (3) individual agency in accounts that locate causal mechanisms in macro-structural factors. That is not to say that these accounts entirely ignore other levels of ontological reality but, rather, that there is often a tendency to “*a priori privilege, prioritise or emphasise one type of explanatory mechanism to the detriment, often tantamount to exclusion, of the others*” (Bhaskar and Danermark 2006: 281). Laminated systems can often accommodate the insights of these perspectives but are ultimately concerned to establish: 1) a non-reductionist schema for the exploration of causal mechanism that recognises the stratified and differentiated nature of reality and, 2) the “*interplay of mechanisms (or forms of causality), context and effects*” within and between ontological levels of reality (Bhaskar and Danermark 2006: 289).

Conclusion

This chapter has set out the core tenets of critical realism that will be utilised as an underlabouring framework for the identification and analysis of hostel accommodation outcomes set out across the main empirical chapters. These tenets include a commitment to ontological realism, epistemic relativism, and a stratified ontology of causation, with all being articulated and explored through the heuristic of laminated systems. The hope is that such an endeavour will allow for the postulation and testing of core intended and actual outcomes in explicitly Bhaskarean terms, asking what the world [of the hostel] must be like for events [intended and actual outcomes] to occur as they do. A synthesis of three explanatory theories have also been selected (and set out) for their capacity to assist in this endeavour. Lazarus offers us a means of exploring the role of the individual (firmly situation within and influenced by their environment) in the generation of outcomes, including how outcomes (both actual and possible) are evaluated and cognitively appraised. Nussbaum’s conception of capabilities offers a means of articulating and including (internal) antecedent causal mechanisms of which a given

individual may or may not be subjectively aware, while also orienting us toward the disjuncture between the possible (of what people are able to be do) and the actual. Parsell not so much offers but demands that we take full cognisance of the constructed nature of social identity (and its causal force) and gap between this and identity as subjectively experienced.

Chapter 4: Methods

Introduction

Critical realist scholars often lament the dearth of “*material on CR-informed methodology*” (Yeung 1997; Oliver 2012; Ackroyd and Karlsson 2014: 45). Indeed, the explanatory power of critical realism is (at least in part) intertwined with the premise that there is no “*sure and certain method*” that would enable correspondence between the transient and intransient objects of social science, in all contexts, for all social events. That is not to say that critical realism does not have methodological implications; indeed, I will argue below that it offers a valuable meta-methodological position alongside its more commonly lauded meta-theoretical utility. This meta-methodological position justifies the adoption and application of any substantive method, provided it allows for the identification of causal mechanisms in the domain of the real, rather than simply quantifying or explaining event in the domain of the empirical. In the sections that follow, I will argue that a multi-case study design, pursued through a qualitative research strategy is well suited to this objective, and as such offers the most fruitful approach to answering the research questions that drive this study. This includes an account of the rationale adopted in defining, bounding, selecting, and locating the case study hostels. The chapter then looks at the ethical consideration of the study, before detailing the various phases of fieldwork undertaken. It then concludes with an account of the approach taken to data analysis, with a particular focus on critical realist meta-methodological strategies.

4.1 Research Strategy and Design

This study has identified (along with others) a notable paucity of robust quantitative data on the outcomes of hostel accommodation use (Johnson and Teixeira 2010; Mackie, Johnsen, and Wood 2017). It has also offered a critique of a notable quantitative study that is premised on a radical detotalisation of the hostel using population (see chapter three), extruding from consideration a plethora of groups, such as those who avoid, abandon, or are evicted and those thought unready for resettlement. Quantitative data gathered at the level of individual organisations is limited by the absence of standardised approach to measuring outcomes, which itself is further problematised by the sheer diversity of thought with respect to what the intended outcomes of hostel accommodation are or ought to be, and how a shared understanding might be reached. This sits alongside (and likely drives) a notable lack of clarity regarding what it is - *if anything* - about hostel accommodation that generates outcomes in all their forms (intended and unintended; positive and negative; successful and unsuccessful) and this is also further complicated

by a lack of agreement around what constitutes a hostel, and by extension what the components of hostel accommodation are and how they function collectively. This study seeks to explore and clarify some of this terrain, asking as it does, what the constituent components of hostel accommodation are and what it is about these components that actualise outcomes.

These questions have a particular fit with a qualitative research strategy for several reasons. First, qualitative research allows for a focus on meaning. Hostels and hostel outcomes (like all social phenomena) are “*concept-dependent*”. This means that any explanation of their “*production and material effect*” must include an understanding and interpretation of their meaning, including meaning attributed by different social actors, in varying geo-historical contexts (McNaughton Nicholls 2009: 70). Qualitative research is particularly suited to enhancing understanding of the meaning attributed to hostels (and its associated phenomena) because it allows for “*the perspective of the people being studied*” to be explored and examined (Bryman 2016: 333).

Second, qualitative research allows for an emphasis on process (Bryman 2016). Because the focus of this study is on explaining (rather than predicting) how and why outcomes occur as they do in hostel accommodation, an understanding of process is of central importance (Yin 2018). As Sayer (1992) explains:

“Merely knowing that ‘C’ has generally been followed by ‘E’ is not enough: we want to understand the continuous process by which ‘C’ produced ‘E’ if it did.”
(107)

Research that seeks to explicate the generative mechanisms of particular social phenomena (rather than their frequency) demands close examination of the interplay of components that might act to generate (or prevent the generation) of particular outcomes (Ackroyd cited in Bryman 2016). In the section which follows, I will argue that the multiple-case study design pursued in this study allows for just such a focus.

The case study (as a mode of enquiry) is concerned to “*investigate a contemporary phenomenon within its real-life context*”, “*experiencing the activity of the case as it occurs . . . in its particular situation*” (Yin 2009: 13; Stake 2006: 500). Yin (2009) posits that the case study is especially suitable “*when the boundaries between phenomenon and context are not clearly evident*” (13). Perhaps unsurprisingly, given its emphasis on the emergent nature of social being, it is often argued that case study research is particularly suited to a critical realist ontology (Easton 2007; Bryman 2016).

The multiple-case study is defined by Bryman (2016) as a form of comparative research that explores three or more cases using identical methods. Bryman and others have argued that it offers

“an even greater opportunity [to investigate social phenomena], because the researcher will be in a position to examine the operation of generative mechanisms in contrasting or similar contexts.” (68)

This understanding of causation, as articulated by Bryman, is distinctly non-linear and non-positivistic in nature and one that is particularly suited to this study because of its alignment with the emergent, stratified, and complex conception of causation as espoused by critical realism (see chapter two).

The efficacy of multiple-case study research in enabling understanding of the phenomena in focus (here hostel accommodation outcomes), is dependent upon *“choosing the cases well”* (Stake 2006: 820), which naturally raises the question of how that might be achieved. Yin (2018) proposes that sound case selection begins with a specification that both defines *and* bounds the nature of the individual case, and the sections that follow look at each of these in turn, before moving to consider the final selection criteria and location of case study hostels.

4.1.1: Defining the Case

Stake (2006) contends that even when the focus of our research is on a phenomenon that is an activity (such a life-skills training or intensive case management), a function (such as preventing rough sleeping), or an outcome (such as avoidance or exclusion), we should none-the-less choose cases that are entities: *“with these cases”*, he explains, *“we find opportunities to examine functioning [including activities and outcomes], but the functioning is not the case”* (Stake 2006: 408). This is essential in the context a critical realist ontology, where the observable functioning of a given social entity is likely only a part of its hidden powers and tendencies. Bringing this rationale to bare on this study, it stood to reason that the case should be the entity (a hostel) rather than a person (the homeless individual) or events within the hostel (exclusion).

The seeming simplicity of this approach was, however, complicated by some caution against assuming an unchanging knowledge of unchanging things: *“there is no way of knowing the world”*, as Bhaskar contends, *“except under particular, more or less historically transient descriptions”* (Bhaskar 1986: 99). We may say that the entity is a hostel, but as discussed in Chapter 1, how a ‘hostel’ might be defined and recognised is

not at all straightforward. Variation with respect to what constitutes a hostel from the perspective of different actors is such that it is an object of inquiry in this study and has been taken as such by numerous earlier researchers. It was important (in a practical sense) to aim for as much conceptual clarity as possible for the purpose of case study selection, not least of all because some (potential) services did not self-identify as hostels at all but were nonetheless seen as such by others. What mattered here was not establishing a fixed and comprehensive definition, but rather identifying components that could act to bind the cases together. Stake (2006) helpfully refers to this concept not as a definition, but as a quintain:

“A quintain . . . is an object or phenomenon or condition to be studied—a target, but not a bull’s eye. In multicase study, it is the target collection.” (544)

The concept of a quintain more accurately captured what was possible (definitionally) in the context of hostel selection. Drawing on existing definitions, a hostel was considered (for the purpose of case study selection) to be that which fell within the bounds of the following quintain:¹⁰

- A building which provides domestic accommodation for people who are homeless, with the form of accommodation being other than self-contained.
- The sharing of at least some of the following facilities or spaces: kitchen, food preparation, toilet/bathing facilities or sleeping space.
- Access to the hostel will be controlled by the managing institution, with staff or volunteers being sometimes available on-site for supervisory or support purposes.
- The private space available to individual residents will be subject to some limitation meaning that they cannot exclude staff (or other residents) from at least some aspects of their living space.
- Occupancy status will normally be other than a regular tenancy agreement and will allow for residents to be subject to eviction without court action.

These components were purposefully selected because they each take a concrete and tangible expression. Components that were more abstract in nature (such as support

¹⁰ See Chapter 1 for a full account of the various sources from which the components of this quintain are drawn.

models) would eventually feature in the sub-grouping criteria but (given the fluid nature of such models) services are initially identified across these more concrete components.

4.1.2: Bounding the Case

It is also important to consider how the case might be bounded: that is how to distinguish between the form(s) of hostel to be included and those to be excluded. There was a case for focusing on forms of accommodation where negative outcomes are widely acknowledged, on the basis that these services are in some respects “low lying fruit” where harms are maximal and an appetite for change within the sector already exists, to some extent. With such a focus the impact of the research might be greater and more readily attained. Yet, much of the existing literature on hostel accommodation hints at limited efficacy of challenging elements of the hostel system, given a perceived capacity within the sector to respond to criticism through a process of perpetual diversification and expansion (i.e., the ‘success through failure’ outlined by Sahlin, for example). Moreover, this research seeks to offer an Imminent Critique of hostel accommodation, an approach which demands engagement with opposing arguments in their strongest and most cogent form. Hostel provision that might be easily identified as inadequate or failing, was therefore excluded from the study. This exclusion pertained to shelter accommodation (used in the UK sense of shelter) where provision is offered during restricted hours (night-shelters), seasonally (winter-shelters), or across multiple venues (rolling-shelters).

Large hostels offering a service to more than 60 individuals were also excluded from consideration. National key informants (including those who provide hostel accommodation) drew a very clear association between large hostels and poor outcomes, and this notion is backed by a wider drive toward smaller provision as best practice. There are, of course, those who will argue for the benefits of larger hostels and not necessarily without foundation – greater anonymity may result in less intrusive and intensively targeted support (for example) – but few would argue for a deliberate and purposeful move back toward larger hostels as an ideal. Excluding (potentially) maximally harmful forms of accommodation is not without its qualms, but although the research did not directly uncover generative mechanism of harm in shelters and very large hostels, they may still be theoretically applied in instances where the relevant components are present and capable of interacting in the identified manner.

Finally, the case study was bounded by client group, in the sense that services targeted toward families were not included. While family hostels with shared facilities are still in use, their numbers are comparatively small in relation to that targeted at the single

homeless population, and there was a broad consensus across all national key informants that families require self-contained temporary accommodation, and that hostel provision is particularly unsuited to their needs.

4.1.3: Selecting the Case

In its original iterations the research plan involved the selection of two case study hostels (following national key informant interviews), with these functioning as illustrative examples of the tendencies of hostel accommodation (in terms of intended and actual outcomes). The fieldwork was intended to include a form of micro-ethnography, meaning that ethnography would not be the primary means of gathering data, but that fieldnotes would be kept with the aim of capturing the physical design of each hostel, the experience of being present on the premises, and an overview of any informal interactions with hostel residents and staff (Wolcott 1990; Bryman 2016; Parsell 2018). It was thought that this strand of micro-ethnography would be important in uncovering the “*latent and hidden dimensions*” of the core generative mechanisms at play at hostel accommodation (McNaughton Nicholls 2009: 70). The impacts of the COVID-19 pandemic began to take hold as my national key informant interviews got underway, and the first United Kingdom lockdown was fully instated before they were concluded. This altered the course of my research and necessitated changes that would allow all my interviews and focus-groups to take place remotely. The outcomes of these necessary alterations were in many respects limiting, entirely precluding the possibility of ethnographic elements and face-to-face interviews for example. They also prompted (alongside data emerging from the national key informant interviews) an expansion in the number of case study hostels (increased from two to nine). The rise of online and phone contact during this time allowed for this increase to be sustained across the duration of the study.

In selecting the nine case study hostels, the defining and bounding criterium were applied and then hostels were further selected to allow for variance across seven core components.

Size: Hostels were purposefully selected to ensure diversity in size: that is the number of people accommodation in a hostel at any given time. As discussed above, very large hostels were eliminated from the selection process. The remaining size categories used were small (0-15 bed spaces), medium (16-30 bed spaces), and large (31-50). The final sample included three small hostels, four medium hostels and two large hostels: spanning a selection from a 5-bed hostel at the smaller end of the spectrum through to a 50-bed hostel.

Rooms: Hostels were purposefully selected to ensure the inclusion of shared and single rooms. The final selection included one hostel where all rooms were shared; three hostels where most rooms were single, but a small number of shared rooms were also used; four hostels where only single rooms were in use; and a final hostel using only single rooms alongside a small number of transitional, self-contained apartments.

Length of stay: Hostels were purposefully selected to ensure the inclusion of differing lengths of stay. The final selection included four hostels with an intended length of stay of less than two years, two of less than one year, and one of less than six months. A further two hostels offered temporary accommodation within an unspecified timeframe.

Client group: Hostels were purposefully selected to ensure the inclusion of a range of client groups. The final selection included five services with an intended client group of single homeless people; three services targeted toward those who have slept rough; and one service designed for young people.

Needs: Hostels were purposefully selected to ensure diversity in the level and form of need they propose to address. The final selection included four services for people with more complex needs, three for people with more general needs, and two for people engaged in problematic substance use.

Gender: Hostels were purposefully selected to ensure the inclusion of services for women only, men only, and hostels that allow for mixed access. The final selection included six services allowing mixed access; two service for women only; and one service for men only.

The overlap between client group, need and gender categories gives the selection of hostels greater diversity in practice than is immediately obvious when they are delineated separately. Taken together the final selection included two hostels for single homeless men and women with general support needs; two hostels for single homeless women with more complex support needs; one hostel for single homeless men with problematic substance use; two hostels for men and women with more complex support needs who have slept rough; one hostel for men and women with problematic substance use who have slept rough; and, finally, one hostel for young men and women with general support needs.

Support model: Hostels were selection to ensure diversity in support model. The models used were neither mutually exclusive nor definitive; providers could and often did draw

from across a myriad of support models. They are, however, indicative of the intended orientation of the given provider. The first of these models was the psychology-oriented hostel. These hostels had an explicitly stated intention of offering a Psychologically Informed Environment. They tended to target their provision towards those with more complex needs and offered residents access to psychological therapies. These hostels also tended to be concerned with developing staff knowledge of psychological interventions and responses, with a particular focus reflective practice.

The second of these models was the abstinence-oriented hostel. These hostels had a stated intention of offering an environment in which abstinence (from alcohol and substances) was a condition of stay. These services tended to lean toward the principals of communal therapeutic environments, placing a particular value on the importance of interpersonal relationships and the dynamics of the hostel community.

The final model was the harm-reduction-oriented hostel. These hostels tended to target their provision toward those whose substance use or dependency had proved a barrier to more traditional temporary accommodation services. The overall approach of hostels within this group tended toward low threshold, high tolerance access and exclusion criterium. Two hostels within this group allowed for managed consumption on hostel premises.

4.1.4: Locating the Case

In considering the location of case study hostels it is important to note that the entity (the hostel) was not intended to act as a ‘nested unit’ within a wider location case study; rather each hostel acted as *the* unit of enquiry (the case) with the location of the hostel forming part of the broader contextual conditions. That is not to say that location was irrelevant. As Yin (2018) explains, context matters:

“A case study . . . investigates a contemporary phenomenon (the “case”) in depth and within its real-world context . . . you would want to do a case study because you want to understand a real-world case and assume that such an understanding is likely to involve important contextual conditions pertinent to your case.” (Yin 2018: 15)

While recognising the importance of context, the initial literature review undertaken as part of this study suggested that there may be core components of hostel accommodation which are *necessarily* present across both time and place. The critical realist approach adopted in this study asks that just such hypothesis be explored as a means of identifying

the tendencies of the object of study, and the generative mechanisms that give rise to such tendencies. To allow for such postulations to have relevance across place, it was important that case study hostels should be selected from geographically distinct locations, as doing so could maximise the opportunity to identify components of hostel accommodation that are necessarily present, as distinct from those that are contingent on location-specific factors. London, Edinburgh, Belfast, and Dublin were selected because each operate within distinct legislative and policy contexts, with differing approaches to housing and homelessness. Of course, any number of cities could have been selected under this location rationale and so it must be acknowledged that the final selection included a consideration of some practical matters, not least of all those of securing relevant provider agreement to participate in the study. The researcher also lives on the island of Ireland and at point of selection (pre-pandemic) it was thought that this might allow for greater ease of access to the selected locations.

Table 4.1 below details the nine hostels selected for participation in the study and offers a brief account of their key characteristics.

Table 4.1: Case study hostels

Support Model	Ethos	Size	Form	Client Group	Needs	Length of Stay	Gender
Psychology-oriented	Secular	Small 5-10	Single rooms	Single homeless	Complex	Less than 1 year	Women
Psychology-oriented	Secular	Medium 15-20	Single rooms	Sleeping rough	Complex	Unspecified	Mixed
Psychology-oriented	Secular	Large 45-50	Single rooms	Sleeping rough	Complex	Less than 1 year	Mixed
Abstinence-oriented	Faith-based	Small 0-5	Single & transitional flats	Young people	General	Less than 2years	Mixed
Abstinence-oriented	Faith-based	Small 10-15	Single & shared rooms	Single homeless	Complex	Unspecified	Women
Abstinence-oriented	Faith-based	Medium 15-20	Single & shared rooms	Single homeless	Substance Use	Less than 2 years	Men
Harm reduction-oriented	Unspecified	Medium 20-25	Single & shared rooms	Sleeping rough	Substance Use	Less than 2 years	Mixed
Harm reduction-oriented	Secular	Medium 25-30	Single Rooms	Single homeless	General	Less than 2 years	Mixed
Harm reduction-oriented	Unspecified	Large 30-35	Shared Rooms	Single homeless	General	Less than 6 months	Mixed

4.2 Fieldwork

The fieldwork took place in four phases. The first phase focused on National Key Informant interviews; the second on hostel manager interviews; the third on hostel worker interviews and focus groups; and the fourth on hostel resident interviews. Table 4.2 below provides an overview of the form and number of interviews/focus groups completed.

Table 4.2: Key informant interviews

Phase	Focus	Interviews	Focus Group
One	National Key Informants	15	
Two	Hostel Managers	9	
Three	Hostel Workers	1	4
Four	Hostel Residents	11	

The section looks at each phase in more detail, but as an overarching principle the fieldwork design was premised on a purposive selection strategy, rather than a sampling logic. As Yin (2018) explains:

“case studies . . . are generalizable to theoretical propositions and not to populations or universes . . . neither the “case” nor the case study . . . represent “samples” . . . In doing case study research, your goal will be to expand and generalize theories (analytic generalizations) and not to extrapolate probabilities (statistical generalizations).” (Yin 2018: 20-21)

The selection of informants (at both national and case study levels) was ultimately informed by their capacity to facilitate exploration of the study research questions (Bryman 2016).

4.2.1: Phase One: National Key Informant Interviews

Key informant interviews were completed with fifteen national stakeholders from across the United Kingdom, Europe, and America. Interviews were semi-structured in nature and were undertaken with the aim of exploring approaches and attitudes toward the provision of hostel accommodation (see Appendix A). The principal focus was on examining what constitutes a hostel; the intended and actual outcomes of hostel provision; and *what exactly it is* about hostel accommodation that is thought to generate such

outcomes. Key informants were purposefully sampled to represent diversity of perspectives, including those who advocate for the efficacy of hostel accommodation and those who are more critical of such provision. Care was taken to ensure representation from across the voluntary, statutory and academic sectors, with those interviewed including: four academics with an interest in hostel/shelter accommodation; two representative of homelessness sector umbrella bodies; seven voluntary sector providers of accommodation for people who are homeless (all of whom had experience of providing hostel accommodation, with six actively doing so at the point of interview); and two commissioners of hostel accommodation. The transcripts of phase one interviews were analysed and several initial findings were reached. This included the identification of very provisional (necessary and contingent) components of hostel accommodation which helpfully informed the criterium for case study selection.

4.2.2: Phase Two: Hostel Manager Interviews

Interviews were completed with nine hostel managers. Care was taken to ensure that representatives of each of the nine case study hostels (see Table 4.1) were included in the interviews. Interviews were semi-structured in nature and were undertaken with the aim of exploring approaches and attitudes toward the provision of hostel accommodation (see Appendix B). The principal focus was on examining what constitutes a hostel; the intended and actual outcomes of hostel provision; and *what exactly it is* about hostel accommodation that is thought to generate such outcomes. Here, the focus was more fully on exploring these topics in relation to the specific case-study hostel, rather than the more general consideration of hostels undertaken as part of the national key informant interviews. The interviews also served an additional interrelated purpose: in sensitising the researcher to the nature and design of each hostel and enhancing understanding of how services are operationalised in practice, they helped ensure that subsequent phases were conducted in a way that was sensitive to the needs and profile of hostel residents and staff. The transcripts of phase two interviews were analysed, and several initial findings were reached. This included the identification of several distinct theories of change that differed according to the support model orientation of the hostel. These findings helped to inform the development of the selection criteria and topic guide for phase three interviews.

4.2.3: Phase Three: Hostel Worker Focus Groups

Four focus groups and one interview were completed with hostel workers. The original intention was that three focus groups would be completed, with one focus group for each

of the three support models groupings (psychology-oriented, abstinence-oriented, and harm-reduction oriented). This increased to four focus groups and one interview in response to several practical issues that hindered people attending their relevant focus group. In total, eleven people participated in the hostel worker focus groups/interview phase. Table 4.3 below offers an overview of the number of focus groups undertaken, alongside the overall number of participants.

Table 4.3: Hostel worker focus group

Support Model	Research Undertaken	Participants
Psychology-oriented	One focus group	Two participants
Abstinence- Oriented	One focus group One interview	Four participants One participant
Harm-reduction Oriented	Two focus groups	Four participants

Interviews were again semi-structured in nature and were undertaken with the aim of exploring approaches and attitudes toward the provision of hostel accommodation (see Appendix C). The principal focus was on examining the intended and actual outcomes of their given hostel and *what exactly it is* about that hostel accommodation that is thought to generate such outcomes. Here, the emphasis was on understanding the components of hostel accommodation that are hypothesised as generating outcomes for particular people, with regard being paid to role of the given support model of the hostel.

4.2.4: Phase Four: Hostel Resident Interviews

Eleven semi-structured interviews were completed with hostel residents from across the case study hostels (see Appendix D). This included five women and six men, with three being resident in abstinence-oriented hostels, four in harm reduction-oriented hostels, and four in psychology-oriented hostels. The aim was to develop an understanding of the experience of hostel accommodation living, as articulated by people resident in such services. The focus was on what people are able to be and do in the given case-study hostel, both in the context of day-to-day activities, and in the broader sense of realising their individual commitments to given goals and aspirations (Nussbaum 2011; Parsell 2018). They were particularly concerned with the value individuals attribute to hostel accommodation and what it is about the hostel that they understand as enabling or inhibiting their own wellbeing (Lazarus and Folkman 1984).

The number of interviews completed with hostel residents is relatively small. The intended purpose of this study was not to place *particular* emphasis on the experiences of people resident in hostel accommodation, but instead to uncover and understand the intended and actual outcomes of hostels. Of particular interest was how the various components at play in hostel accommodation are *thought* to interact to produce intended phenomenon, and how they *do* interact to produce actual phenomena. Such exploration requires research that has regard for the stratified nature of ontology, that is, research that seeks not only to explore and evaluate sensed experienced but, rather, to uncover the necessary tendencies of the social object in focus, and to do so where possible across events, environments, and actions (DeSteno, Gross and Kubzansky 2013; Lazarus and Folkman, 1984; Wynn and Williams, 2012). This approach necessitated an in-depth focus on actors across all positions within the homelessness sector – providers, managers, workers, and residents – without a priori assumptions being made about the capacity of any group to afford greater insights. As such, the sampling strategy focused on the overall breadth of the sample across hostel positions, rather than on achieving particular depth with any single group.

The various phases of the research resulted in a sizeable number of key informant groups that required distinct attributions in the analysis and write up phases. These are included here at Table 4.4 for clarity and ease of reference.

Table 4.4: Key informant attributions

National key informants	Key informant, voluntary sector, hostel provider	
	Key informant, voluntary sector, non-hostel provider	
	Key informant, commissioner	
	Key informant, academic	
	Key informant, homelessness sector umbrella body	
Hostel staff	Hostel manager (plus current hostel attribution)	Where the testimony of hostel managers and workers aligned with that of key informant, voluntary sector, hostel providers, I use the collective attribution “hostel informants”
	Hostel worker (plus current hostel attribution)	
Hostel residents	Each hostel resident has a unique pseudonym (plus hostel attribution)	
Hostel	faith based, abstinence-oriented, women only, small hostel	Hostel manager, worker and resident attributions include the attribution that fits with the hostel they were resident or working in at the point fieldwork was completed.
	faith based, abstinence-oriented, young people, small hostel	
	faith based, abstinence-oriented, men only, medium hostel	
	psychology-oriented, large hostel	
	psychology-oriented, medium hostel	
	psychology-oriented, women only, small hostel	
	harm reduction-oriented, substance-use permitted, medium hostel	
	harm reduction-oriented, alcohol-use permitted, medium hostel	
	harm reduction-oriented, shared room, large hostel	

4.3 Ethical Considerations

The study was designed, and fieldwork was undertaken in accordance with the principles of informed consent and confidentiality. Ethical approval for the study has been granted by Heriot-Watt University's School of Energy, Geoscience, Infrastructure and Society (EGIS) Research Ethics Committee.

All potential participants were given an information sheet that outlined the aim of the research, why they had been invited to take part, and what would be involved if they agreed to participate. This included information on the form of participation – whether focus group or interview; the length of time participation would likely take; and the broad topic areas to be covered in discussions. Coronavirus-related restrictions on face-to-face contact meant that all interviews took place via phone or online, and potential participants were also advised of this in the information sheet. The researcher's name, position, institute, and university were also provided, alongside the names of both academic supervisors. The information sheet also laid out contact details (email and phone) of both the researcher and her primary supervisor.

Potential participants were informed via the information sheet (and before the commencement of interviews or focus groups) that participation in the research was entirely voluntary, that they did not have to answer any of the questions if they did not want to and that they could choose to withdraw from the focus group or interview at any time. Participants were informed that they did not have to give a reason for not answering or withdrawing and that there would be no consequences whatsoever for doing so.

Before the commencement of interviews or focus groups the researcher also sought permission from participants to audio record the discussion. The recorder used was encrypted and password protected, and all data was stored in password protected electronic files. Audio recordings were transcribed verbatim. These transcripts were only accessible to the researcher and her supervisors and were not shared with any other individuals, agencies, or organisations. Direct identifiers were removed at the transcription phase to ensure anonymity (of both individuals and organisations) and care was taken at all stages of analysis and write up to ensure that participants were not recognisable in any outputs of the study.

The researcher was sensitive to the employment status and professional standing of staff and key informants. This was particularly important given the contested nature of the debate around the efficacy of hostel accommodation, and its future role (if any) in

responses to homelessness. Although the interview questions and discussions were always clearly focused on the professional views and experiences of participants, they did involve discussion of perspectives and opinions about hostels that are contested and often passionately so. For this reason, the researcher was careful to provide each potential participant with clear information about the nature and purpose of the research (in the form of an information sheet) at the point of invite, and to allow time prior to the commencement of the interview to check participant understanding and answer any questions. Also important here, was the stress placed on participation being voluntary and on the right of the individual to refuse to answer any question, and to withdraw at any time.

Careful consideration was also given to the possible vulnerability of some research participants, and the impacts of discussing experiences of homelessness that are sensitive and potentially distressing for participants. Participants who were resident in hostels were purposefully selected in collaboration with participating organisations. This acted as a protective factor in ensuring that those who participated were not so vulnerable that doing so would be harmful. Topic guides were purposefully developed and utilised in a way that ensured that all information sought was relevant to the research and not unnecessarily intrusive. The researcher has lengthy experience of working in frontline service delivery and as such was attuned to signs of emotional distress or discomfort and equipped to respond sensitively.

4.4 Data Analysis

Data analysis was guided by the critical realist conception of judgemental rationality, which encompasses three analytic methods: retrodiction, immanent critique, and greater explanatory power. These methods prove important, I would argue, where epistemic relativism (see chapter 2) is taken seriously, because to do so raises challenging questions for social research and social researchers. How can we (seek to) understand a real world that exists apart from our knowledge - that is a reality to which we do not have direct/immediate access - if our existing knowledge *and our means of obtaining knowledge* is always already fallible and relative? Even if we are unable to approach an answer to this question, an understanding of epistemic relativity as an “*actuality in all knowledge endeavours*” remains important, because such an understanding encourages a reflexive approach to social research (Isaksen 2016: 246). As such, it represents a necessary challenge to “*naive realism*” or “*common sense*” theorising (Parsell 2018). Yet, conceptualising such reflexivity is challenging on account of the impossibility of

neutrality of thought. Here, Rutzou (2016), drawing on the work of Nagel (1979), explains:

“Facts are not neutral objects but are caught up in a process of knowledge production. Knowledge based solely on experience or empirical data is a myth . . . In other words, there is no neutral position with which to view the world or assess theory.” (1)

Bhaskar contends that a one-to-one correspondence between the transient and intransient objects of social science is not possible: that is to say, there is no sure and certain method (Bhaskar 1979). However, there is the *possibility* of judgemental rationality, used by Bhaskar to refer to how we evaluate the comparative validity of different positions; that is, how we choose between changing and contested accounts of reality. The key criterion of judgemental rationality is the combination of immanent critique and retrodution, with both enabling a determination of whether a particular theory or postulation has greater explanatory power than others.

4.4.1: Retrodution

Critical realism follows the Kantian tradition of commitment to transcendental argument: that is a form of argument that seeks to explain what the world must be like for “*phenomena to exist and act as they do*”, rather than simply the behaviour of the phenomena itself (Isaksen 2016: 247; Bhaskar 1979a). This is made possible through a mode of inference described as retrodution. Retrodution seeks to explain social events by postulating causal powers capable of generating such phenomena (Sayer 1992: 107). Thus, while transcendental argument asks, “*what would, if it were real, bring about, produce, cause or explain a phenomenon*”, retrodution describes “*the imaginative activity in science by which the scientist thinks up causes or, as we shall say, generative mechanisms which, if they were real, would explain the phenomenon in question*” (Bhaskar 2016: 3).

Retrodution occurs within the DREIC schema (Bhaskar’s primary approach to uncovering new causal mechanism), which requires: first, a *description* of the observed outcome or phenomena; second, the *retroductive* postulation of causal mechanisms which, if they were real, might explain the occurrence of such phenomena; third, *elimination* through empirical analysis of incongruous postulated mechanism until either a combination or single causal mechanism remains; forth, *identification* of causal mechanism(s) that have the greatest explanatory power; and, finally, where new knowledge is uncovered, the *correction* of previous theories. The DREIC schema is a

theoretical model of *natural* scientific inquiry and therefore assumes a relatively closed system. In the social sciences, where events occur in an open system, and causal mechanism are often characterised by conjunctive multiplicity and emergence, the focus of research might more properly be on determining the *interplay* of mechanisms in the generation of phenomena. Here, Bhaskar proposes a modified schema (RRREIC) which requires: first, *resolving* complex reality into its component parts, i.e., a “*conjunctive multiplicity of causes (that is, a and b and c and so on)*” (Bhaskar 2016: 80). The first movement of the RREIC schema (i.e., the initial resolving of reality into component parts) recognises the multifaceted nature of causal mechanism within an open system and by extension the centrality of interdisciplinarity, given that knowledge and expertise of the various component parts is held across differing disciplines. Laminated systems (see chapter 2) function as a schema for the resolution of reality, and at the same time as the heuristic device for interdisciplinarity. The second move involves *redescribing* or recontextualising these causes in an explanatorily significant way, moving from the abstract to the concrete. The third movement ask for *retrodition* of these component causes to the previously identified phenomena and then the schema moves on to the completion of the process of *elimination, identification* and *correction* outlined under the DREIC schema.

4.4.2: Immanent Critique

Retrodition poses questions with regards to how we decide upon or confirm that a postulated causal mechanism has the greatest explanatory power. Here, critical realism adopts a methodological approach (amongst others) variously referred to as immanent or internal critique: that is, the application of ‘rival’ theories – their premises, grounds, and assumptions – to the observed outcome or phenomena, as a comparator against the critical realist account. This acts as a curb against the “*epistemic certainty and generality suggested by retrodition on its own*” (Isaksen 2016: 250). Here, Bhaskar explains:

“criticism of an idea or a system should be internal, that is, involve something intrinsic to what (or the person who) is being criticised. It typically identifies a theory/practice inconsistency, showing that the position being disputed involves a claim or analysis that would undermine the point, values, or substance of the position; so that it undermines or ‘deconstructs’ itself.” (Bhaskar 2016: 2-3)

Notably, imminent critique demands engagement with opposing theory or practice at its strongest point (as proposed by advocates of the given theory), rather than the dismantling of noted weaknesses (although this may also be fruitful or necessary in some contexts).

Thus, for example, a rationally persuasive critique of hostel accommodation might necessitate exploration of outcomes that appear to confirm the principles that underlay hostel provision, such as successful move-on. Were the generative mechanisms informing such outcomes to be uncovered as undermining “*the belief or valued system or customary practices*” they appear to confirm, the principles underpinning provision of hostel accommodation would be internally undermined or deconstructed (Bhaskar 2016: 3).

4.4.3: Greater Explanatory Power

Where the researcher seeks to identify the mechanisms with greater explanatory power, from amongst a potential multitude of competing postulations, Bhaskar proposes the following criteria:

“a theory T_c is preferable to a theory T_d , even if they are [incommensurable], provided that T_c can explain under its descriptions, almost all the phenomena that T_d can explain under its descriptions, plus some significant phenomena that T_d cannot explain.” (Bhaskar 1986: 73)

This is not to suggest that greater explanatory power is evidenced only based on the number of phenomena a given theory can account for. The significance of the phenomena explained should also be considered, alongside the comparative depth and comprehensiveness of the given theories explanatory power. A theory may be held to have greater explanatory power:

“especially, or even only, if it can either (a) identify and/or describe and/or explain a deeper level of reality; and/or (b) achieve a new order of epistemic explanatory and/or taxonomic integration, or at least show some grounded promise of being able to do so.” (Bhaskar 1986: 82)

This raises the question of the commensurability of disparate theories emerging across a range of fields and disciplines, and in particular the dearth (or indeed absence) of common descriptors. Here, Bhaskar appeals to our shared natural world and common biological make-up: the descriptors deployed across different fields are utilised to explain a reality that has at least some common features (although, of course, the gap between the world and our knowledge of the world remains). This allows for the possibility of judgemental rationality (i.e., the selection of theory based on greater explanatory power) and interdisciplinarity (i.e., the synthesis of theories based on encompassing the multiple component part of reality).

It is important to note that the assertion of greater explanatory power is not absolute: explanations of a given phenomenon exist on a continuum with some holding less or more explanatory power than others. Rational theory and/or causal mechanism choice based on greater explanatory power is subject to epistemic relativism, as is all knowledge and theory: it is transient, fallible, and subject to change considering new knowledge. Nor is it always possible to select a singular theory or mechanism, and we should not attempt to assert the greater explanatory power of one above the other where a phenomenon can be adequately explained in multiple ways. Like ontology, rational theory choice is often implicit in social research, even where its possibility is denied. What Bhaskar's conceptualisation demands is a *deliberate intention* toward the actualisation of rational theory choice through the application of the criterion of greater explanatory power.

Conclusion

This chapter has offered a detailed account of the study's methodological approach to generating and analysing the data used in this study. Several ethical considerations were also set out and the approach to the same detailed. It has argued that a qualitative research strategy, enacted through a multi-case study design, is an appropriate and helpful approach to uncovering and understanding the generative mechanism at play within hostel accommodation. Given the studies focus on understanding the continuous process by which given mechanism generate outcomes (or not), a specifically critical realist methodology to data analysis was proposed and detailed in the form of the RRREIC schema. The chapters that follow (four to eight) present an analysis of the research findings structured around four key tensions between intended and actual outcomes of hostel accommodation: the safety-harm tension, the independence-dependence tension, the inclusion-exclusion tension, and the progress-entrenchment tension. These four tensions emerged in an early form analysis of national key informant interviews and were then tested across the subsequent fieldwork stages.

Chapter 5: The Safety-Harm Tension

Introduction

This chapter sets out to explore the safety-harm tension, that is the tension that appears to arise from the juxtaposition of two distinct postulations: the first that hostels tend to function as a place of safety, and the second that hostels tend to foster harm. The chapter opens with an account of the safety hypothesis, briefly detailing its nature as postulated by hostel providers, before turning to consider the views and priorities of hostel staff and the lived experiences of people residing in hostels. This discussion opens with an overview of the relevance of safety to the work of hostel staff and its practicability within the hostel setting. It then seeks to draw out and clarify the components postulated by hostel staff and residents as necessary to the generation of safe(r) hostels, including: the built environment; the staff team; the hostel culture; and the needs of people living there. The first half then closes with a consideration of the interaction between safety-components, including the functioning of optimal components, the generation of unexpected outcomes, and the possibility of unactualised outcomes.

The second half of this chapter moves to explore the harm hypothesis as postulated by non-hostel providers, before again turning to consider the relevant testimony of hostel staff and residents. This discussion seeks to clarify two distinct conceptions of hostels, the first of which figures hostels as a repository of risk displaced from other spheres, while the second points to harms generated internal to the hostel. It then moves to consider the forms of harm experienced in hostels, the methods of harm mitigation adopted by staff, and the possibility that harm is sometimes tolerated. The chapter then closes with a close reflection on the strategies adopted by hostel staff, as they cognitively navigate the safety-harm tension, and the outworking of these strategies in their practice and in the experiences of those residing in hostels.

5.1 The Safety Hypothesis

All national key informants were of the view that hostel accommodation is intended to provide safe shelter for people who are homeless with an associated outcome of preventing rough sleeping and its attendant bodily harms (including death).

“To get people off the streets . . . being on the street is very dangerous . . . [so] saving people's lives, keeping people alive is a good outcome.” (Key informant, voluntary sector, hostel provider)

Hostel providers suggested that hostels also seek to address a much broader need for safety, including the provision of safe places for those who are (in a general sense) fearful of living alone, those at significant risk from others (in the context of domestic abuse, for example), and those who have struggled to secure their property when living independently (in the context of cuckooing, for example):

“we've had people, women . . . who have become victims of county lines, and cuckooing . . . [Controlled access] so nobody could get [in to the hostel] . . . was really, really important.” (Key informant, voluntary sector, hostel provider)

The safety hypothesis, as articulated by providers, proposed that hostels tend to generate safety through the interaction of two core components: the built environment (physical component) and hostel staff (psychosocial component). The existence of the building allows for provision of shelter and institutional control of access allows the provider to exclude risk of harm from external others, thereby eliminating or radically lowering the risk of harm to the individual, while generating a sense of safety.

Hostel providers acknowledged the existence of hostels beyond their remit that they viewed as profoundly and unequivocally *unsafe*, describing these as “*toxic*”, “*chaotic*” and “*horrendously dangerous*” environments, which tend toward the generation of counter-productive outcomes, causing harm to the people who are resident there (Key informant, voluntary sector, hostel provider). All provider informants were adamantly opposed to the continuance of such provision and distanced themselves from any involvement in its development and delivery. They positioned the hostels that fell within their remit far outside these inadequate forms of provision, with all being of the view that the organisations they represented were successful in offering hostels that function as a place of safety. Indeed, most felt that they would continue to offer hostel accommodation even if systemic changes were to bring an end to homelessness:

“There are people who really, really benefit from that stability and security and safe space you should be able to create in a hostel . . . even if we had endless money and a blank sheet of paper, we would put something into the system that looks not unlike a hostel-type facility.” (Key informant, voluntary sector, hostel provider)

Hostel managers and hostel workers were firmly of the view that achieving a sense of safety is “*absolutely fundamental*” (Hostel manager, psychology-oriented, small hostel) to human wellbeing (in its broadest sense) and foundational to the therapeutic work that hostels (often) aim to undertake:

“people feeling safe in your building is sort of the foundation stone of being a psychologically informed environment.” (Hostel manager, psychology-oriented, large hostel)

“we can do all the work in the world, but nothing will change for people until they feel safe . . . Safety would be our top priority.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Hostel workers often emphasised the added importance of safety for those who have experienced trauma and adversity: hostel accommodation - they suggested - ought to be able to offer people a means of escape from trauma and harm, with the aim being that hostels trigger a shift in the life trajectory of residents toward safety:

“[Safety is] without a doubt the highest priority . . . some people have never ever had safety in their life not even from their childhood.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

While hostel managers and hostel workers were firmly of the view that “their” hostel had a clear *intention* to offer people a place of safety, they (like hostel providers) were more sceptical of the intentions of “other” hostels, including hostels they had previously worked in or managed:

“to create a safe environment . . . that's our primary goal and objective, but it's not the same everywhere . . . you have different staff, you have different organisations, you have different policies and procedures.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

Although the centrality of safety to wellbeing was seldom doubted, most hostel managers and hostel workers had reservations about their ability to actualise safety in the hostel environment, with several outright rejections of “*place of safety*” (Hostel manager, psychology-oriented, various hostels) claims as neither feasible nor realistic:

“A lot of things in hostels . . . you can't change, it's just one of those things, but . . . we do try to . . . create a space, which is safe.” (Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

“I just don't think they [safe hostels] exist . . . smaller ones [hostels] may feel a little bit safer.” (Hostel manager, psychology-oriented, various hostels)

Most hostel staff did not conceive of safety as a necessary tendency of hostel accommodation; rather, creating a place of safety was something staff aspired toward, through purposeful and continuous efforts. The section which follows explores these efforts, focusing first on the identification and clarification of components postulated by hostel staff and residents as enabling of safe(r) hostels, before considering patterns of interaction between these components, and their associated outcomes.

5.1.1: The Safety Components

Hostel staff and residents expanded on the two core safety components articulated by providers, proposing that the possibility of actualising safety in hostel accommodation fluctuated relative to *four* core components:

- the built environment
- the staff team, including staff accessibility and staff values and beliefs
- the culture of the hostel
- the needs of people living in the hostel accommodation, with a particular emphasis on the interaction of those needs

Hostel staff posited the built environment as central to safety, with the size of the hostel often considered to be of primary importance: the smaller the hostel the greater the prospect of safety, most suggested. Also thought relevant here was the presence or absence of a defensible space that allowed people some privacy and a means of (sometimes) avoiding potential hazards arising in the hostel environment:

“[If] you have your own room . . . you can go away . . . close the door . . . Whereas . . . [if] you don't . . . [and] there is something kicking off . . . you're still exposed . . . When you're in shared rooms things can sometimes go missing . . . [if] you have your own key to your own room, you can lock it.” (Hostel manager, harm reduction-oriented, shared room, large hostel)

People who used hostel accommodation agreed on the importance of a defensible space, suggesting that sole occupation of a lockable room is vital for safety. The more closely their room replicated the self-contained nature of a regular home, some suggested, the more readily feelings of safety could be attained. Helena explained that her favourite thing about her current hostel was her room because it was:

“just like a house where you lock it, so our bedroom's like our house because it's an en suite, your bed, your clothes, everything's in here.” (Helena, faith-based, abstinence-oriented, women only, small hostel)

It was not only in echoing (some of) the circumstance of home that sole occupancy of a room was considered beneficial; “ownership” of a room was also highly valued because it provided refuge from the wider hostel community. Helena continued:

“there's going to be days, ‘oh I can't be arsed with them [other residents]’ or they're being nippy . . . if some girls are getting under your nose or whatever you just go into your room and just give yourself a bit of time.” (Helena, faith-based, abstinence-oriented, women only, small hostel)

Running alongside the notion that smaller is safer (and often conflated with it) was the second safety component: the staff team. Most hostel staff suggested that the greater the availability and accessibility of hostel staff to hostel residents, the greater the prospect of safety:

“firstly . . . keep your hostel beds small . . . we're a smaller hostel, so we have that time to speak to people, to build their confidence up, to engage . . . to make them feel safe with staff.” (Hostel worker, psychology-oriented, medium hostel)

The values and beliefs of the staff team was also germane here, with staff motivations and commitments, the standards that they bring to their work, and the tenor of the relationships they form with residents being considered key:

“making sure that the team are decent human beings that are in the work for the right reasons . . . that they're not going round shouting at residents, or assaulting people or anything like that.” (Hostel manager, psychology-oriented, large hostel)

Hostel residents really valued hostel staff who were kind and empathic, often reserving praise for staff who are available and attuned to their needs, particularly those that noticed when they were having a hard time:

“[I like] the ones [staff] that I . . . generally get on with, they know me, and I've known them for a couple of years now, so I've built up a rapport with them. It's a nice feeling to have a bond with somebody, to build a bond with somebody you don't know.” (Kieran, psychology-oriented, medium hostel)

What emerged across most resident interviews, was that good staff were valued because hostel living was thought sufficiently difficult, without the added pressure of harmful interactions with staff.

“[Staff] makes a huge difference because I've been in places where staff . . . don't care, they don't want to know. It makes it even harder again, it's hard enough as it is having to live in these places.” (James, harm reduction-oriented, shared room, large hostel)

The third postulated safety component was the culture of the hostel, with the overarching expectations and norms of a given service viewed as central to safety. Managers of faith-based services, for example, placed considerable value on service culture as a socialising force, capable of generating safety.

“when new women come . . . they're brought into a culture where their peers themselves sustain a culture where . . . it's not the norm that people would shout at each other; it's not the norm that people would be aggressive . . . when a new person comes into that . . . critical mass of people . . . [that] has these norms established . . . the group itself sustains that . . . not at all times, but that is quite a powerful thing.” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

Although this culture was viewed as being reproduced by residents (acting as a collective group), in its origins, design and constitution it was purposefully created and (ultimately) sustained by the provider. Hostel residents agreed that the overall culture of a hostel matters, albeit that most described cultures that give rise to experiences of harm and loss. Where residents did describe hostel cultures that generated feelings of safety, they most often did so in a comparative sense: the careful attendance of providers to the cultivation of a positive culture could (sometimes) create hostel environments that are experienced as safer than others:

“It's more secure and I feel more safe, more – the girls are more friendly, they don't take drugs, it's a dry house.” (Jenny, faith-based, abstinence-oriented, women only, small hostel)

The needs (and associated behaviours) of people resident in the hostel and the frequency and nature of the interaction between people within the hostel setting, was the final postulated component:

“we've had very challenging clients who have been quite aggressive . . . [but] at the moment . . . we have quite a calm hostel . . . It purely depends on the residents and who we get in, who works well with each other and who doesn't.” (Hostel worker, psychology-oriented, medium hostel)

“The more people with complex needs you have in the building, the more likely there are to be incidents and crisis points on a regular basis . . . having less people in the building, in my mind, is always a bonus.” (Hostel manager, psychology-oriented, large hostel)

Hostel residents did not often speak directly of the purported value of sharing with fewer people, or of the benefits of providers purposefully managing the mix of residents granted access. They did, however, speak at length about the negative impact of living near others, particularly those who dealing with problematic substance use or mental ill health. These impacts are explored in further detail later in this chapter, under the rubric of the harm hypothesis.

Hostel staff commonly associated the safety components described above with an enhanced possibility of *safer* environmental conditions, but these components were also presented as continuously interacting with one another, often in complex patterns, generating emergent environmental conditions, the behaviour and tenure of which could not always (or easily) be predicted. This section now turns to interrogate the interplay of components and the phenomena that such interplay produces, focusing on four key themes emerging across staff testimony, including: optimal components, unexpected outcomes, unactualised outcomes, and subjective experiences.

Hostel staff suggested that even optimal versions of the safety enhancing components are sometimes insufficient to the task of generating a safe environment:

“hostels are really horrible places to live . . . the levels of just incidents and risk, that's not a pleasant environment for people to live in . . . [our hostel] is a very lovely, snazzy new building . . . it's in a really nice environment . . . a great staff team, really good in-reach services, but I still don't think you should be there long-term.” (Hostel manager, psychology-oriented, large hostel)

These safety enhancing components can also interact in ways that produce sudden and unexpected outcomes that are entirely apostate to their intended task. Describing the outcome of a decision to transfer someone to a smaller hostel with the aim of upsetting less people if he decided (as he previously had) to remove his clothing, one hostel

manager noted that this plan “*hasn't gone well*”. The disorienting impact of being in a new hostel meant that this individual not only removed his clothing but also entered the room of a vulnerable female resident:

“It's resulted in less safety, I would say, for people around him . . . I can't really imagine being able to predict that kind of stuff better, because you just don't know how people are going to react.” (Hostel manager, psychology-oriented, various hostels)

Other (non-safety) components may also intervene to prevent the actualisation of safety. Several hostel workers sounded a note of caution, for example, about staff accessibility as *necessarily* enhancing of safety, suggesting that hostel residents are often reluctant to report concerns about peers for fear of recriminations.

“We would like to think that they're in a safe environment, and they're able to come to staff . . . You always get the sense of they don't want to tout [to report problems with peers] . . . they don't want to say anything.” (Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

Many of the residents in hostel accommodation, agreed, suggesting that reporting concerns (about peer conduct) to staff was problematic, with several suggesting that doing so would increase rather than decrease risk of harm, given shared norms around the unacceptability of “*snitching*”:

“there's a unwritten rule in these places that you deal with it yourself . . . or else you'll end up with more problems . . . if you go to staff you're a snitch . . . and you're going to get named and shamed in other hostels, not just this hostel.” (James, harm reduction-oriented, shared room, large hostel)

Safety components may also generate subjective feelings of safety, even where they are actualising an observable deterioration in wellbeing:

“part of key working . . . [is] looking at . . . ‘we feel like you've actually deteriorated now that you came here, and that's not what we want, so we need to look at alternative[s]’, and some will actually just be like, ‘Oh, I don't want to leave!’. They've got the security now and they feel safe.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

Having considered how the given safety components may interact to produce counterproductive outcomes, this chapter now turns to explore the harm hypothesis.

5.2 The Harm Hypothesis

The harm hypothesis as articulated by non-providers, submits that hostels tend toward the generation of harm. Even in the context of the low-bar claim that hostels necessarily offer safety because they provide shelter and therefore prevent rough sleeping, non-providers suggested that hostels often fall-short, pointing as evidence to the phenomenon of people choosing to sleep rough because they consider doing so to be safer than a hostel accommodation stay:

“a lot of people . . . they will say, okay I will not go into the shelters because they're too dangerous . . . a lot of people are voting with their feet and saying, I know that if I go in there that it's dangerous and I will take my chances [sleeping rough].”

(Key informant, academic)

Academic informants focused very closely on the risks posed by staff, suggesting that the socio-economic power disparity of staff-resident relationships, renders people resident in hostels particularly vulnerable to relationships of abuse:

“Part of the reason that these congregate facilities [are] bad, is people are powerless against the people who control the place and therefore they're vulnerable to being coerced into all sorts of abusive behaviours.” (Key informant, academic)

People accessing hostel accommodation are vulnerable to staff inflicted harms, several academics contended, because they have no (or very limited) tenancy rights (rendering people dependent upon the good will of the provider) and no sole occupancy rights (meaning that people are unable to exclude potential abusers from their place of residence). Academics considered it important, in this context, to acknowledge that those involved in hostel provision may not always be well-intentioned, or even if well-intentioned may be misguided in their approach:

“There's . . . people [who] are outright exploiting the situation and even under the guise of their wonderful programme and mission . . . there are a lot of people who . . . don't necessarily come from the strongest ethical framework.” (Key informant, academic)

Non-providers were particularly concerned with the communal nature of hostel accommodation, suggesting that in rendering interpersonal contact necessary, hostels expose people to a range of harms that are difficult (often impossible) to avoid. Here, the built environment (so valued as a safety component by providers) was viewed as increasing rather than decreasing risk to the individual by rendering key aspects of the individuals living environment highly vulnerable to threat from *internal* others.

“there will be bullies, there will be people who are predators in these institutions and that just happens, but I think if you're in shared accommodation, or shared sleeping space, and shared other facilities then the likelihood of pretty nasty things happening to you are much more likely.” (Key informant, academic)

Hostel staff agreed that shared spaces are often a site of tension and conflict. Many emphasised that it is the role of hostels to accept and deal with high levels of risk, with risk management activities often defining their services and dominating their day-to-day work. This position was particularly true of harm-reduction and psychologically oriented services:

“We sort of start from the basis that we are a high-risk environment. That's how we advertise ourselves. It does what it says on the tin, you know.” (Hostel manager, harm reduction-oriented, substance use permitted, medium hostel)

Hostel staff (across all participating hostels) suggested that this risk is often actualised in harm in the hostel setting. One manager of a psychology-oriented hostel, for example, reported that *“general day-to-day . . . lower level”* incidents occurred at a rate of . . .

“between 25 and 30 incidents every month, and that could be . . . somebody getting really, really upset and angry and sort of being volatile . . . it might be that somebody has left their door open and somebody has gone on and stolen their stuff . . . [or] that two clients have an argument because he said that she owes him money for drugs.” (Hostel manager, psychology-oriented, large hostel)

Of *“the more serious incidents”* like *“physical violence, or like sexual assaults or overdoses or suicide attempts”*, there would be *“between four and six a month”*, with this frequency considered not *“huge numbers of incidents”*, as far as hostels are concerned (Hostel manager, psychology-oriented, large hostel).

Staff descriptions of adverse incidents were often associated with a view that hostel accommodation is a repository (rather than a direct generator) of risk, with the need for

such a repository thought to arise from poor commissioning practices and resultant gaps in service provision. Hostel workers spoke at length about feeling pressured by referring agents to accept people unsuited to the (given) hostel environment, with an absence of appropriate alternatives fuelling the referral *and* the pressure to accept:

“so often people get referred . . . in a very pushy professional [way], so it'll be like, 'You have to take it [the referral]' . . . not because this is the best environment . . . like they know that they won't . . . do well in this environment, . . . but they're just desperate, there's not another good place for them to go.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Crucially, in the ‘repository of risk’ understanding of hostel accommodation, hostel managers and workers stressed that they were doing their best, given the risk deposited in their services. However, here hostel staff did not posit hostels as a place of safety; here, hostel accommodation was (at best) a site of reduced harm comparative to other available options, most often that of sleeping rough.

When hostel staff described the processes through which harm is actualised in the hostel setting, they focused, not on the individual risks deposited, but rather on the dynamic interaction of multiple individual risks: here, it was in the congregating of risk that staff located the generative mechanisms of hostel harms. This interaction of risk can be traced in accounts of the dominant modes of harm - interpersonal conflict, physical assault, exploitation, and environmental turbulence - which this chapter now looks at in turn.

Hostel staff proposed interpersonal conflict as a highly recognisable mode of hostel harm, often suggesting that it was so common as to be considered a *necessary* component of hostel accommodation.

“[conflict] is almost like a necessary evil . . . It's one of these things that you almost can't avoid.” (Hostel worker, psychology-oriented, various hostels)

Some hostel providers agreed that interpersonal conflict is a recognisable component of hostel living but tended to suggest that such conflict is no different to that experienced in any shared living space.

“Where there is conflict, it can spill over to others . . . that's just the reality of community living, people take side or get caught in the crossfire.” (Key informant, voluntary sector, hostel provider)

Hostel managers and workers were generally unconvinced by this suggestion, pointing to a higher prevalence of harm (and vulnerability to harm) than one might *ordinarily* expect to encounter. The nature of interpersonal conflict was also presented as notable, with most hostel workers pointing to physical assault as a second mode of harm:

“we would try as much as possible not to take people who would have a risk of violence to other residents but sometimes . . . there would be a threat, I think that is true.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

The experiences of people residing in hostels chimed with hostel worker testimony here, with the threat of physical harm being felt most acutely by informants hailing from or describing past experiences in shared rooms, although having a room of your own did not eliminate the risk of physical assault:

“There is a constant threat of violence in these places . . . I've seen people having their faces slashed for £10 or £20 . . . over the smallest of things . . . You're constantly on edge, even when there's nothing kicking off . . . I've been in rooms with murderers, child rapists, all sorts, people with severe mental health issues that should really be in hospital . . . Sometimes you don't sleep . . . [or] you're half asleep, you're lying with one eye open.” (James, harm reduction-oriented, shared room, large hostel)

“we had one resident who kind of bullied this other resident to go out and beg for him . . . The resident would go into his room and threaten him . . . and if he didn't do it, he would really hurt him.” (Hostel worker, psychology-oriented, medium hostel)

Even where the tendency of hostel accommodation to generate physical harms remains unactualised, people often reported living with a (continuous) impending threat of harm, with some lamenting an associated need for hypervigilance of a form that pervades and disrupts sleep:

“No [I don't have the space to sort myself out] and that is never going to change . . . there's other people [here] in trauma . . . only doing their addiction things. You can't even get ten minutes sleep without . . . one eye open . . . I want to get the fuck out of here.” (Kieran, psychology-oriented, medium hostel)

Hostel workers also routinely suggested that people accessing hostel accommodation may be purposefully “*targeted for their vulnerability*” (Hostel manager, harm reduction-oriented, shared room, large hostel), with extortion and exploitation emerging across all service types as a highly recognisable component of hostel living:

“all the time [we get] . . . people preying [on others]. It is exploitation, it is grooming . . . people choose the people who are the most vulnerable . . . that happens all the time and will be something we're continually trying to manage.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

“there are vulnerable people and there are predators too, who see these hostels like a place where they can exploit other people, take in an easy manner without any consequences . . . there is sexual abuse, there is physical, mental abuse . . . there are people who . . . feel safer . . . on the street . . . it's a very dark situation.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

Resident testimony confirms exploitation and loss of personal property as a notable hostel harm. Again, sharing a room with others was described as particularly problematic, but even in single room accommodation people struggle to guard against theft, given the communal nature of most domestic facilities:

“I've had clothes taken from me, I've had ridiculous things, tobacco, money, silly things stolen.” (James, harm reduction-oriented, shared room, large hostel)

“I wouldn't say it was safe. I count it down to the minute. I go down, like, five minutes before it [washing machine] stops . . . [so] I get down there first . . . [that's] hostel life for you.” (Kieran, psychology-oriented, medium hostel)

People living in hostel accommodation reported a fourth mode of harm, environmental turbulence. This refers to the noise, bustle, and interactions of other people, resident or working in the hostel. These were often experienced as highly disruptive of day-to-day living and as functioning to radically impede ability to rest, relax and think, having a particularly negative bearing on sleeping patterns. Reference to noise as a mode of harm was entirely absent across provider and staff interviews but did emerge in one service user interview where a hostel worker sat-in to provide support. David had recently been transferred from a larger hostel to his current place of residence. The move had (in part) been motivated by a belief that David would benefit from time spent in a smaller hostel. This smaller hostel was thought preferable by staff because it was considered calmer, “*so . . . there's just less banging and less coming and going*”, the hostel worker explained.

David was incredulous that his key worker would consider this true, insisting that noise disturbances were “*still happening within here [in this hostel] you know, it's still happening*” (David, psychology-oriented, medium hostel).

The *outcomes* of hostel harms that emerged as particularly important across hostel resident testimony (sense of impending threat, hypervigilance, and disrupted sleep) were described by some as having a cumulative effect, generating a form of meta-harm that people described as an inability to get on with their lives, particularly in terms of recovering from addiction and trauma. Joe described the struggles that a fellow-resident was experiencing with mental health. They were often shouting, he explained, and sometimes pacing their room late into the night. Joe explained that he sympathised with the difficulties his peer was experiencing but had been trying to get himself “*above water*”. He continued,

“*. . . I've took care of my drug use, I've been clean now almost . . . a month-and-a-half . . . I'm feeling much better for it, I'm focused now, I sleep better, I'm eating better but . . . this [resident] is having an impact . . . [on] my sleep patterns like she could be keeping me up all night and I could have appointments the next day . . . it's a very disturbing and disrupting scenario. But I'm having to just grin and bear it for the moment.*” (Joe, psychology-oriented, medium hostel)

While Joe endeavoured to grin and bear it, others looked to ‘the streets’ as a ‘safer’ space, often on the basis that it would allow them to avoid exposure to others, particularly those who were experiencing difficult times:

“*I would rather be on the street, that's how bad that place was, it was horrible . . . people were using and it's really chaotic . . . if you're not wanting to be in that lifestyle . . . it's totally hard.*” (Helena, faith-based, abstinence-oriented, women only, small hostel)

Hostel staff often described investing considerable time and thought in efforts to mitigate against the harms described above. The next section of this chapter moves to explore these efforts in some detail.

5.2.1: Harm Mitigation Methods

All hostel interviewees felt that people ought not to be harmed in hostel accommodation, not least of all because safety is an intended outcome and one considered vitally important for wellbeing. When reflecting upon this commitment to safety in the context of the

various modes of harm associated with hostels, staff tended to emphasise the importance of their own actions. Here, the concern was not that “*there are risks in the hostel*” (with risk being a given) but that risks in hostel accommodation are,

“less [in some comparative sense], and they are managed, and they can be responded to.” (Hostel manager, psychology-oriented, large hostel)

Staff and managers described a range of approaches to managing risk, with four areas of commonality emerging across services: referral and access arrangements; gatekeeping of external visitors; staff knowledge of people living in hostels; and application of hostel rules.

Hostel informants articulated two contrasting approaches to how incoming risk is responded to in the hostel environment. Abstinence-oriented, faith-based providers and managers tended to describe referral and access processes that were oriented *against* the admission of those that present a risk to others. They also purposefully sought to ensure a clear fit between those seeking admission and the already established service culture. Women, for example, who were unable to convince the provider of their pre-existing commitment to ‘positive’ change would not be accepted into the hostel, with positive change being defined by the hostel provider:

“we created a model of that [hostel] being a place where women would come wanting to achieve positive changes or to make positive changes in their life.”
(Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

In contrast, harm-reduction and psychology-oriented managers tended to point to the very minimal nature of service access threshold, with the assessment of risk notably orientated *toward* the acceptance of referrals, even in instances where the individual is said to pose considerable risk:

“the most important [aim] . . . is that we . . . attempt to be low threshold . . . to remove the barriers to support . . . to accept rather than refuse.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

This difference in approach to the admission of incoming risk may inform the more favourable inclination of abstinence-oriented providers and managers to hostels as a generator of safety (they are always already guarding against risk) and may in part explain the (reportedly) powerful and unitary nature of service cultures (only those who fit are admitted). Although, it is also notable that this favourable inclination did not hold out

across hostel worker interviews, with abstinence-oriented staff describing the level and form of risk arising in their services in very similar terms to those of their harm reduction and psychology-oriented counterparts.

Hostel managers and workers valued the ‘gatekeeping’ function of hostels as an effective response to risk. Gatekeeping was sometimes viewed as necessary for the mitigation of external threats, with the risk posed to the (internal) individual from (external) others being the focus of concern:

“the girls aren't allowed to answer the door . . . because . . . you wouldn't want them or any other resident coming face to face with somebody at the door . . . The phone . . . they would not be allowed to answer that . . . I would call it . . . just really healthy boundaries . . . If people are meeting someone outside, they . . . have to be picked up away from the house.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Relatedly, the (perceived) inability of some hostel residents to self-gatekeep, emerged as a core anxiety (of staff), with the cuckooing of vulnerable people in their own home often presented as an area of concern. One hostel worker, when contemplating the move on of residents to permanent, self-contained accommodation, suggested:

“[their home] would just be full of drugs . . . and violent men . . . So part of my concern around that . . . [is] for some people the risk would be . . . very poor gatekeeping.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Several hostel staff suggested that the collective pooling of individual risk within the hostel (not only generates an internal risk dynamic but also) places people at *heightened* risk of harm from external predators:

“there are risks from putting lots of people with complex needs together . . . the risk of physical harm, the risk of substances and then the risk of other people within the community knowing about them.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

This was presented as particularly true in the context of grouping women at risk of domestic abuse in a single location. Hostel workers in a women-only service noted:

“once scary men know your address you can’t make them forget it . . . that’s the problem, once people know they know . . . [if] one resident makes a really bad decision . . . telling the address to a violent ex . . . then they’re putting significant risk to other people.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Gatekeeping, then, was valued by staff as reducing risk from external others, albeit that it had some notable limitations. Two hostel residents agreed that hostels can sometimes reduce the risk from external others, suggesting that their current hostel had afforded them (at least some) protection from threats:

“it’s no men allowed in the premises . . . fortunately . . . especially with my background.” (Jenny, faith-based, abstinence-oriented, women only, small hostel)

“I don’t leave the [hostel] . . . because there has been [paramilitary] threats to me . . . I feel safer here.” (Sadie, harm reduction-oriented, alcohol use permitted, medium hostel)

However, although gatekeeping was - for these two residents - ascribed some value, it was not valued to such an extent that they would forgo regular, non-gatekept housing in its favour, with both women keen to exit hostel stays for a home of their own.

There was also a more practical necessity to gatekeeping hostel accommodation, one that was less oriented toward external threats, and more closely aligned with the management of internal risk. As one hostel manager explained it:

“We’re a strict no visitor [hostel] and that works . . . I don’t think you can effectively manage visitors in a large project, so no visitors, and that means we know who’s in the building and we know the risks, and we can manage that, and that helps keep people safe.” (Hostel manager, psychology-oriented, large hostel)

This concept of a knowable hostel environment as central to risk mitigation, rang out across hostel staff testimony. Many suggested that hostel accommodation necessitates and allows for people using services to be thoroughly known by hostel staff; not only in the sense of identifying and addressing support needs (although this was considered important) but in the sense of having a continuous, current, and shared knowledge of every resident.

“You've got to . . . know the people in your building, and I don't mean just know their support needs . . . you need to know them as people . . . [to have] contacts . . . all of the time so that you know what's going on.” (Hostel manager, psychology-oriented, large hostel)

“the residents know that we don't keep secrets, we share everything . . . it doesn't matter if you're key working this person, or that person, - you'll be aware of every resident's needs . . . what their vulnerabilities are, and what to watch out for.” (Hostel worker, faith-based, young people, small hostel)

Staff knowledge of the individual was also often accompanied by an emphasis (in all services) on direct and continuous observation (generally excepting bedrooms), with many hostel staff suggesting people using services must be known *and* observed, if risk is to be adequately managed:

“You need to be on it [risk of exploitation] . . . you need to be watching interactions between residents . . . you need to be watching CCTV, monitoring . . .” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

Underpinning the concept of knowledge and knowing, was an assumption that certain conduct and behaviour is unacceptable in the context of shared living. Here, hostel staff suggested that rules are a necessary component of communal living (if risk is to be managed), with this being the view even of services oriented toward low threshold, high tolerance approaches:

“There have to be some rules around communal living. There has to be some level of conformity.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

Rules varied significantly across provision, but all informants proposed an in-theory zero-tolerance approach to physical violence, and there was a consensus that safeguarding concerns – such as exploitation of a vulnerable adult – ought to be against hostel rules and should be met with a swift and effective response. However, the implementation of rules was often considered complex and challenging, to such an extent that the occurrence of certain harms might, in certain circumstances, be accepted. The final section of this chapter moves to explore the tension between the safety that ought to be offered and the harms that are often accepted, focusing on the ways in which staff cognitively process this tension through what we will term majority and comparative rationalisations.

5.3 Navigating the Safety-Harm Tension

Most hostel workers viewed staff actions as *potentially* effective disruptors to the actualisation of harm (with the right staff efforts harm can sometimes be prevented from occurring), but also acknowledged that harm often does occur (even in the face of best endeavours). Here, staff emphasised the importance of rapid remedial action after-the-fact, both as a means of halting the continuance of harm (in its given manifestation) and as a soother to harms already incurred:

“every hostel, every supported house is always going to have that issue [bullying and intimidation] . . . It's important to try to put things in place to make people feel safe as soon as there's any kind of incident . . . Moving people to emergency bed spaces and that kind of stuff.” (Hostel worker, psychology-oriented, various hostels)

Beyond this sense that harm is sometimes unavoidable, acceptance of harm was at times (reluctantly) postulated as necessary to achieving the aims of provision, in large part as a means of negotiating the deep tension between the desire to create a safe environment and the desire to avoid exclusion, itself an action that drastically compromises individual safety. Exclusion is explored in detail below (see chapter seven), but here we look briefly at the logic that powers the tendency to tolerate harm in the hostel setting:

“to achieve the place of safety . . . we might say we're going to have this specific line, and if it gets crossed the person has to not live here anymore . . . we don't really like to have those hard and fast rules because then you have to abide by them . . . The perpetrator is a service user too and they have a need . . . we would say, challenging behaviour is an opportunity for engagement, rather than something to just be simply punished with eviction. I think on the ground though, it's really difficult . . . [if you] have someone, say, produced a bladed article or punched someone.” (Hostel manager, psychology-oriented, various hostels)

This generated a complex dilemma, particularly for services that focused heavily on the creation of psychologically informed environments or the delivery of trauma informed care, because exclusion (while necessary to the generation of safety) risks rupturing the therapeutic, relational attachments so valued in this work (see chapter seven). Hostel workers across all forms of provision articulated a belief that it is part of their role to look beyond behaviours that breach the rules, including those thought necessary for safety:

“so we come from a place of meeting people where they're at . . . looking outwith the behaviours to see what's really going on so we do spend a lot of time doing that . . . because there's usually something behind it.” (Hostel worker, faith-based, abstinence-oriented, men only, medium hostel)

A few informants suggested that this tension between safety and harm deepens where we begin to consider that the risk posed by the ‘perpetrators’ of harm may be generated – not (only) by earlier adversity or trauma – but by the hostel environment itself:

“Lots of people come into this environment who . . . have not been suitable . . . the community stuff . . . is too triggering . . . being in a shared environment, it's too difficult for people to manage.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Here, hostel accommodation holds the possibility for the creation of both the victims and perpetrators of harm.

People resident in hostel accommodation reported that disruptive and threatening behaviours encountered in the hostel most often arise from mental health and other needs and are for the most part perpetrated without malicious intent. Hostel residents were often keen to emphasise that the harms they experienced were occasioned by their co-location in a communal environment with others who are experiencing crisis or adversity, including the crisis of homelessness itself. People were often sensitive and empathetic toward (non-malicious) perpetrators of harm and were also acutely attuned to the limitations staff face in their attempts to mitigate such harms.

“it's [the mental ill-health of a fellow resident] having an impact on especially not just me but other residents as well where she could be screaming foul language out the window, she could be up and down all day banging . . . her feet and in and out the bedroom . . . slamming the doors, things like that, but I understand it's mental problems really than rather she's doing it intentionally.” (Joe, psychology-oriented, medium hostel)

“I've stayed in places, and I've had severe schizophrenics say that they're hearing voices telling them to hurt people or hurt themselves, and you'll tell staff, and nothing will be done. Not that they can do anything . . . they have to cope with what they have.” (James, harm reduction-oriented, shared room, large hostel)

Crucially, the sensitivity of hostel residents to the drivers of the behaviours which generate harm within the hostel setting do not lessen the negative impact of such harms.

In (cognitively) processing this tension between the value placed on safety and value placed on understanding behaviours that occasion harm, hostel workers proposed two rationalisations. The first rationalisation prioritised the experience of a (purportedly) safe majority, with a minority experience of harm then viewed as a tolerable anomaly, albeit a regrettable one.

“I think the majority of people feel safe. We do have a few people who don't feel safe, and I think that's mainly to do with other residents . . . [but] yes . . . I think it's definitely important for them to feel safe.” (Hostel worker, psychology-oriented, medium hostel)

The notion of a minority who are unsuited to hostel accommodation (and as a result experience harm there) was complicated by a sense that those who are most at risk of harm in hostel accommodation are also those most requiring of the safety it is *intended* to offer: it is people who are most vulnerable to predatory others who are most unsuited to hostel accommodation. Hostel workers, for example, consistently reported that hostels are unsuitable for:

“people who have been easily taken advantage of . . . the more vulnerable residents that other residents can see are clearly . . . vulnerable and won't stand up for themselves.” (Hostel worker, psychology-oriented, medium hostel)

People living in hostel accommodation frequently appraised the risk of harm (and loss) as being directly associated with the given capacity of an individual to defend and protect themselves against harm, with this capacity, they suggested, differing notably across fellow residents. Those who have a greater ability to challenge people (who are causing them harm), fare best in hostel accommodation.

“you just need to learn to speak and just [say] you've got my stuff or my jammies or whatever . . . you've got to be able to have a voice . . . I'm just me, I speak, I say what I have to say and I've just learnt that.” (Helena, faith-based, abstinence-oriented, women only, small hostel)

The second rationalisation involved the positioning of hostel generated harms within a much wider and more profound sphere of risk. Here, hostels need not be a place of safety *per se* but rather a place of reduced harm, comparative to that which might be experienced

in the absence of hostel accommodation. The most common comparator was that of being “*on the streets*” (Hostel manager, psychology-oriented, small hostel):

“The facts are . . . being in a hostel is significantly safer than being on the street. On the street, people are . . . wildly unsafe, and that isn't the case in the hostel.”
(Hostel manager, psychology-oriented, large hostel)

“If we take someone off the street, like you're automatically reducing the harm.”
(Hostel manager, harm reduction-oriented, alcohol use permitted, medium hostel)

Here, a deterioration in individual wellbeing induced by the given hostel often emerged as an *acceptable* outcome where the only alternative was sleeping rough, with the rationale being that the deterioration would likely be worse if shelter were to be withheld. This created a rationale that was often internally contradictory – at once oriented against and accepting of hostels as a generator of harm:

“I would never, ever . . . bring someone in knowing that there's a risk that they'd deteriorate by being in this type of environment . . . that's not giving anyone service . . . that's automatically putting someone at risk and exploiting their vulnerability . . . If I knew someone would deteriorate coming here, but they were going to be out on the street tonight . . . I definitely wouldn't leave them outside.” (Hostel manager, harm reduction-oriented, alcohol use permitted, medium hostel)

There was also a tendency across hostel informants to assume that even though the harms of hostels are (or ought to be) troubling, they would almost certainly be worse (for some people) in self-contained temporary accommodation. One group of hostel workers, for example, stressed the unsuitability of shared accommodation for those expressing or acting upon suicidal ideation, with people often excluded from the given hostel on the grounds that their actions are experienced as traumatising by other residents. However, these hostel workers often imagined that outcomes would be worse in the absence of a shared setting:

“last night someone pushed the bed against their door and is looking for a glass to slit their wrists, I think if they were in a self-contained flat, I think they probably would have slit their wrists.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

The comparative safety logic emerged as a normative barrier in supporting people to exit homelessness: in the hostel environment where risk of harm is ever present and safety is

thought to be largely dependent upon (staff-led) actions, there is a tendency to envision the future life trajectories of people accessing services (particularly those who are most vulnerable to the harms of hostel accommodation) as always already marked by an absence of safety:

“It's very hard to imagine where those . . . people could live in the community and still get support, but . . . is a lot of the support that people get about managing incidents that are happening, because people are living right next door to each other? Are we just in a cyclical chicken and egg scenario?” (Hostel manager, psychology-oriented, various hostels)

The attribution of risk generation to resident characteristics and risk management to staff endeavours may also act to obscure a key internal generative mechanism of harm, namely the conduct and behaviour of hostel managers and workers. One provider did direct attention to the challenges in ensuring appropriate management and staffing of hostels, even in circumstances where maximal efforts are focused on developing sound staff teams:

“This is a really difficult challenge for us, talking about this stuff . . . we can have all this stuff that says this is what you should be doing . . . [good] recruitment processes . . . paying people well . . . reflective practice . . . mainstreamed PIE . . . but the thing that really determines [service quality is] the management . . . We work really, really hard to make sure our managers are of a good quality, but . . . some of them frankly should . . . have been gone years ago.” (Key informant, voluntary sector, hostel provider)

Open discussion of staffing concerns was challenging for the sector, this informant explained, in large part because the outcomes associated with poor staffing are the direct antithesis of ‘place of safety’ claims:

“you end up with horrendous situations, very toxic teams and just very, very difficult services.” (Key informant, voluntary sector, hostel provider)

Hostel managers tended to agree with this assessment, with several describing harms directly generated by staff, particularly in terms of the causal role of staff in the occurrence of adverse incidents:

“[Staff] attitude is the one that can set a person up. We have had a laddie evicted. The member of staff . . . if he had handled it differently that day, that laddie wouldn't have been evicted and there wouldn't have been an assault and there wouldn't have

been other stuff . . . It could totally have been avoided.” (Hostel manger, faith-based, young people, small hostel)

“I’d be lying if I said I haven’t sat down and told a staff member that had they not said what they said, or had they not reacted in the manner they did, we wouldn’t actually have an incident report.” (Hostel manager, harm reduction-oriented, alcohol use permitted, medium hostel)

Conclusion

This chapter has presented evidence to illustrate that hostels are intended to function as a place of safety, with a safe living environment considered fundamental to human wellbeing, and foundational to the work that hostels seek to undertake (Haigh et al. 2012; Johnson 2010; Keats et al. 2012; Maguire, Johnson and Vostanis 2010). Providers were generally of the view that (their) hostels are successful in offering a safe space, with some arguing that the continued existence of hostels would be warranted on this basis alone, even if homelessness were to be ended. The testimony of hostel staff and residents challenged this postulation, posing a clear distinction between their belief that the intended offering of safety *ought* to be actualised and that which *is* actualised in the hostel environment. They clarified and separated the components thought central to the actualisation of safe(r) hostels but argued that these components (and their constitutive sub-components) interact in complex ways, such that even ostensibly optimal versions can prove insufficient to the task of generating safety. The key point here is that although safety was ascribed a high value by all hostel informants, it was not considered a necessary tendency of hostel accommodation, requiring instead purposeful (and often resource intensive) efforts toward generation on the part of hostel staff; even in the face of maximal efforts, the actualisation of safety was often elusive.

The harm hypothesis has also been explored. Non-providers argued that in rendering interpersonal contact necessary, hostels expose people to a range of harms that they often cannot avoid. The testimony of staff chimed with this view, suggesting that some harms – such as interpersonal conflict – are a necessary outcome of hostel living. Their testimony added depth to the harm hypothesis by suggesting two distinct (though interrelated) loci of risk, namely that displaced into the hostel from other spheres, and that generated internally to the hostel. The key point here is that commissioning and referral practices play a key role in the existence of risk within hostels, but there is (none-the-less)

a direct causal role for hostels in the generation of harms arising from the interaction between individual risk components.

The testimony of staff and residents also allowed for an exploration of the dominant modes of harm experienced by residents, including harms commonly recognised by hostel staff (interpersonal conflict, physical assault, and exploitation) and those that are less often acknowledged (interpersonal and environmental turbulence). These modes of harm have been well documented (see for example McNaughton 2008; Mackie, Johnsen, and Wood, 2017; Parsell 2018; Watts et al. 2018; Watts and Blenkinsopp 2021; Watts et al. 2021) and, in this respect, this study lends further weight to an already established body of work. It has also sought to add to existing understandings of the *outcomes* of hostel generated harms, such as fear, hypervigilance, diminished ability to rest, relax and sleep (see for example McMordie 2020; Watts and Blenkinsopp 2021) and has posited the possibility of an emergent meta-harm, framed here as a curtailed capacity to make, and sustain plans for the future.

The primary contribution of this research is that hostel generated harms may (sometimes) be held by hostel providers and staff as tolerable. This is true where the harms experienced by hostel residents are accounted (comparatively) lower than the risk of harm in other environments, with the benchmark for such comparative evaluations often being the (very low) bar of rough sleeping. Evidence has also been presented to illustrate that behaviours that are generative of harm to others (in the hostel setting) are (often) behaviours that are symptomatic of trauma, problematic substance use, or mental ill-health (FEANTSA 2017). Forbearance in the face of such behaviours was often considered a reasonable and compassionate response, and one necessary to the offering of therapeutic or supportive interventions to people living in hostel accommodation. Attempting to hold to a principle that hostels ought to do no harm while simultaneously holding to a belief that behaviours which are generative of harm ought to be understood and shown forbearance, generates a profound and circular tension. We see this very clearly when staff attempt to cognitively negotiate the desire to create a safe environment by excluding perpetrators of harm, while also prioritising the avoidance of exclusion, on the basis that exclusion is also compromising of safety and generative of harm. The circularity of this tension was deepened by testimony suggesting that the harm occasioned by ‘perpetrators’ may sometimes (perhaps even often) be the outworking of adversity and trauma that is *internally* generated by the hostel itself. This opens the possibility that

hostel accommodation may (at least in part) generate the trauma it seeks to address and that in doing so, it plays a significant causal role in creating both the victims and perpetrators of hostel generated harm.

Proposing to offer safety in an environment that is internally generative of harm also necessitates an intense focus on risk management activities, including knowing and observing residents and controlling access to their place of residence. This chapter has demonstrated a tendency, on the part of hostel provider and staff, to attribute risk generation to resident characteristics and risk management to staff endeavours. This limits provider and staff capacity to envisage residents as capable of independently navigating risk of harm and (erroneously) concretises the role of hostels as necessary to the mitigation and management of harm (for some people). This tendency functions to obscure key generative mechanisms of harms internal to the hostel, including the possibility that hostel staff may (sometimes) play a causal role in the generation of harm and the possibility that resident behaviours which are generative of harm to others may (at least to some degree) be generated by the environmental conditions that pertain in hostel accommodation. The cumulative impact, I would argue, is that providers come to see hostel residents' exposure to harm in an environment that they manage and control as preferable to exposure in other environments – such as self-contained accommodation – where management and control of risk would cede to the individual. The error here is in considering all environments equal, with only limited thought being given to the possibility that individual functioning (including the need and capacity to manage risk) alters across differing environmental conditions (Lazarus and Folkman 1984).

Chapter 6: The Independence-Dependence Tension

Introduction

This chapter sets out to explore the independence-dependence tension, that is the tension that arises from the juxtaposition of two distinct postulations: the first that hostel accommodation tends to increase capacity for independent living, and the second that hostels tend to foster dependence. The chapter opens with an account of the independence hypothesis, briefly detailing its nature as postulated by hostel providers, before turning to consider the views and priorities of hostel staff and the lived experience of hostel residents. The discussion seeks to clarify and separate three groups for whom independence fostering was of varying relevance: those who are already capable of independent living; those considered incapable of independent living; and those already institutionalised to communal living environments. It concludes with an exploration of the priority granted to independence fostering in the day-to-day work of hostel staff.

In its second half, this chapter moves on to explore the dependence hypothesis, beginning again with the postulations of national key informants, before turning to focus on the testimony of hostel staff and residents. The discussion begins by considering a direct counter to the independence hypothesis, namely that hostel accommodation constrains rather than fosters independence. It then moves to consider dependency itself, drawing out four modes of dependency generation as described by hostel staff and residents, including: institutional, relational, location, and therapeutic modes of dependence.

6.1 The Independence Hypothesis

Hostel providers put forward an independence hypothesis, which asserted that hostels tend to increase capacity for independent living by offering training and support that assists people to develop the skills and attributes thought necessary for independence. Hostel living was thought to play a key role in facilitating the formation of learning relationships (both peer and non-peer) that might allow for the delivery of relevant training and support. For some providers, hostels are especially suited to the fostering of independence because of their communal nature, with participation in group activities and the sharing of domestic responsibilities thought to be particularly beneficial in this regard. Providers considered independence fostering to be an essential service for people who are reluctant or lacking the skills to live independently, including those whose independence has been compromised (through long-term, chronic alcohol dependency,

for example) and those transitioning from an institutional setting that has diminished or inadequately supported the acquisition of independent living skills.

Most hostel managers and hostel workers felt that the intended end goal of hostel accommodation was successful move on to more independent forms of accommodation:

“It’s all about . . . promoting independence . . . the ultimate goal is to move on successfully.” (Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

“Our main purpose is to support them to get ready to move on to more independent accommodation.” (Hostel worker, psychology-oriented, medium hostel)

Hostel workers supported the principles of advancing independence but felt that the importance of capacity building varied across three distinct groups: those who are already capable of independent living; those considered incapable of independent living; and those already institutionalised to communal living environments. We now turn to look at each of these groups in turn.

Hostel managers and workers felt that most people accessing hostel accommodation are already in possession of the skills and attributes required to live independently, although other components may prevent or encumber the actualisation of such skills within the hostel setting.

“Some . . . have that ability already . . . they just do need a place of their own . . . they’ve already built up some independent living skills and would manage quite well out in their own tenancy.” (Hostel worker, faith-based, young people, small hostel)

Even in instances where independent living skills are absent or compromised, hostel workers felt that they can ordinarily be (re)acquired rapidly and with minimal support. Some hostel staff were also keen to note that the absence of certain life skills does not necessarily set people who are homeless apart from the housed population, and should not preclude access to a home of their own:

“self-care and cooking and stuff like that are the skills that most people can acquire quite easily . . . [and] it’s important to reflect . . . all of us at different times can lack skills.” (Hostel worker, psychology-oriented, various hostels)

The hostel residents who participated in this research considered themselves to be in possession of the skills needed for independence, with people often citing their age and history of independent living as a way of verifying their abilities.

“I’m lucky in a way that I worked all my life, I had a good job and it was just circumstances that led me being here, but as far as functioning, I can function well myself.” (James, harm reduction-oriented, shared room, large hostel)

At the other end of the spectrum were those considered (by hostel staff) to be incapable of living independently, with the refrain *“lots of people won’t ever live independently”* ringing out across both hostel provider and manager interviews. Yet, although many insisted on the significance of this group, they often struggled to define the needs and characteristics that might lead to being a member. The exception to this was older people with significant care needs. Here, hostel accommodation was thought to obscure (rather than address) diminished capacity for independence, with the needs of this group hidden in the hostel, away from the sights (or perhaps priorities) of those who should rightly assume a statutory duty of care:

“It’s a big struggle to get people into care accommodation when the time comes, because hostels do hold people who, if they were in their own flat, would immediately be scooped up by social services.” (Hostel manager, psychology-oriented, various hostels)

Beyond those requiring care, a few hostel managers tentatively positioned those who use substances chaotically within the incapable group:

“They need . . . a safe environment that they can drink where they are not continually found lying in a puddle . . . I do believe that these services [hostels] are going to always be needed.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

However, all hostel informants ultimately wavered on denying the possibility of future independence for this group, with most struggling to align such a notion with the intention of hostels to foster independent living skills amongst exactly these people. Moreover, where people *are* incapable of independent living, hostel staff were generally of the view that lack of capability should not necessitate prolonged stays in hostels and should instead be considered indicative of an urgent need for alternative accommodation.

“I think that lots of people won’t ever live independently, and that’s fine, but [to] live in a less restrictive, less chaotic environment [than a hostel] should be the goal for everybody.” (Hostel manager, psychology-oriented, large hostel)

The final group was those who were thought to have entered homelessness having already experienced institutionalisation, with the most frequently cited institutionalising structures being the care and criminal justice systems:

“some of the people [are] . . . coming to us quite institutionalised already from being in care or being in prison or being in a psychiatric hospital.” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

Of note, though, the institutionalising impact of care and prison systems was not always associated with an absence of domestic skills, with several hostel workers suggesting that prolonged institutional stays often act to manifest precocious or overly fastidious self- and home-care regimes:

“one resident . . . who has been in 16 different young people's units and . . . five foster placements . . . she's actually very able . . . because she's had to be . . . no-one's been able to do it for her, so she's had to learn.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

“people who have been in and out of jail, you'll find their room is almost too clean . . . they'll automatically do that. Up early in the morning, mopping their room, brushing out, everything set in order . . . that's definitely a thing you see a lot.” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

When discussing the group that had experienced institutionalisation, the idea of longer-term (even forever) hostels began to hold some weight, with hostel workers in particular often musing over the possibility that remaining in a hostel might be “kinder”:

“some people can become entrenched, and we do see people going round and round and round, but at the same time I think there's a lack of provision . . . that is that we don't offer long-term . . . hostel accommodation . . . sometimes institutions create need, but then . . . we know that they've got that need, but . . . we rally against it rather than going, this group of people have got this particular need, so why not provide a slightly longer-term accommodation . . . like, 'You've been here five years. I just wanted to make sure that you're still happy here. If you're not . . . there's a route into independent accommodation.” (Hostel worker, psychology-oriented, various hostels).

However, the idea that hostel accommodation should act as an end-stop often rubbed uncomfortably against its intended objectives, particularly the notion that hostels can offer a positive reorientation of life trajectories: *“people often . . . have been*

institutionalised their whole lives,” one informant explained, “and we try to upskill them . . . for mainstream living” (Hostel worker, psychology-oriented, various hostels).

Hostel staff described some efforts toward the building of independent living skills. These efforts mostly focused on demonstrating, modelling, and encouraging the completion of basic domestic tasks (i.e., cooking and cleaning) or administrative (i.e., phone calls) tasks. There was broad consensus across hostel staff that opportunities for fostering independent living skills are limited by the communal and non-independent nature of the hostel environment, with informants often focusing instead on measures intended to *prevent* the loss of independent living skills, rather than those intended to build them. Managers and workers also explained that while the fostering of independent living skills was very much an *expected* outcome - perhaps even the intended “*bread and butter*” of hostel work – in practice it was rarely the primary focus of provision (Hostel manager, psychology-oriented, large hostel):

“we would put it [capacity for independent living] as a high priority in terms of how we see them moving forward . . . but day to day it's not the main focus.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

“I'd be lying if I said that that was the bulk of our work. It's really not. The bulk of our work is around harm minimisation. I think often there's a small window of time where we do a lot of life skills stuff perhaps just before somebody moves on, but that often is lesser to the crisis management stuff.” (Hostel manager, psychology-oriented, large hostel)

As well as the pressing demands of harm mitigation (see chapter 5), hostel workers also positioned the development of independent living skills as firmly subordinate to the addressing of health needs, particularly those around problematic substance use and mental ill-health. In this understanding, securing (or directly delivering) effective health interventions emerged as logically prior to the actualisation of both newly developed and pre-existing capacity for independent living.

“I think before we start to build capacity for independent living . . . the first thing is you often try to reduce the level of chaos . . . if someone isn't addressing their mental health issues, isn't addressing their drug and alcohol issues, then we'd probably look to engage them with the services first . . . as a standard.” (Hostel worker, psychology-oriented, various hostels)

“you might not be working out independent living skills, you might be working on . . . trying to get them off of drug addiction, or alcohol . . . [or] try and tap into counselling for them, this type of thing. So even though they could manage their tenancies, as in they've got these independent living skills, they might not have the mental capacity to cope.” (Hostel worker, faith-based, young people, small hostel)

Where informants prioritised treatment and/or recovery as a necessary prior step, the pathway to independence was notably different to the rapid and minimally taxing nature of (re)acquiring independent living skills, as explored above. Here, progress was relational, complex, and highly demanding, in terms of both resources and time, with positive outcomes being hard-won, fragile, and laden with risk of rapid reversal.

“we need to try and build trust . . . [so] early days is stability, reducing chaos . . . [then] building a meaningful working relationship . . . drawing upon all the skills of the team . . . ensuring . . . strong liaison with all the different services. It's just very incremental . . . it's small steps, it's one step forward two steps back . . . Things can unravel very quickly.” (Hostel worker, psychology-oriented, various hostels)

This section has presented evidence to illustrate the deprioritisation of independent living skill acquisition relative to other activities, such as harm minimisation and health interventions. The next section moves to explore the dependence hypothesis, beginning again with the postulations of national key informants, before turning to focus on the testimony of hostel staff and residents

6.2 The Dependence Hypothesis

Non-provider informants were of the view that hostel accommodation does *not* lend itself to the generation of enhanced independence, and certainly not more so than non-communal settings.

“I can't think that there are advantages for an individual in terms of developing those skills and independence that you would get from a congregate environment that couldn't be replicated with more control in a [regular] community environment.” (Key informant, academic)

Non-provider informants also put forward a stronger dependency hypothesis, which asserted that hostels in fact tend to foster dependence because they encourage and reward the development of skills necessary for communal living, including the *“survival skills . . . needed to operate in a congregate facility full of strangers”* (Key informant, academic) and the attributes conducive to living *“in a hierarchy . . . where someone else is dictating*

the rules” (Key informant, academic). Time invested in acquiring these communal living skills distracts from independence fostering activities and these skills, once acquired, function to undermine capacity for future independence.

Several hostel managers were of the view that hostels limit (in a practical sense) the ability of residents to exercise the ordinary activities of independent living, with the testimony of hostel residents confirming this view. James, for example, described just such a curtailment of independence, generated - he explained - by the absence of laundry facilities:

“unfortunately, at the moment, we don't have any laundry facilities. We have to use launderettes, or if you know someone who can let you use their washing machine, but not everybody has that.” (James, harm-reduction oriented, shared, medium hostel)

Another resident, Sadie, spoke about constraints on her independence necessitated by the communal nature of hostel accommodation. She had successfully managed her own medication (for a chronic condition) when living in her own home. Now that she was resident in a hostel her medication had to be held by hostel staff because it fell under the rubric of controlled substances and as such was deemed a risk to other residents. She was aggrieved by this impingement on her ability to manage her own condition and frustrated by time delays in receiving medication when staff were busy or distracted by competing priorities.

The limiting function of hostel accommodation was also viewed as arising from less practical and more emotional drivers. Hostel living might lower individual desire to engage in home making activities, including the more mundane tasks of daily living. Here, one hostel manager describes how a former resident rapidly manifested excellent independent living skills (assumed missing in the hostel), upon moving to self-contained accommodation:

“Her [hostel] room was a cowp [mess] . . . she would refuse to take any independent living skills that we were giving her in the hostel, really freak out . . . fought against everything. You could walk into her room and you wouldn't see the carpet for clothes. In her flat, [it's] immaculate . . . [She would say] 'I know what to do and I'll do it in my own time,' and she has. Her flat is lovely.” (Hostel manager, faith-based, young people, small hostel)

Here, we can see the limits of staff ability to imagine the existence of a life skill in the absence of its actualisation. Indeed, both hostel staff and residents pointed to a tendency

within hostel accommodation to assume (erroneously) that people lack the life skills that they are unable or unwilling to actualise in hostel accommodation. Compensatory measures intended to address this (imagined) lack sometimes function to deskill people in the longer term. One hostel manager, for example, spoke of a desire to end the provision of catered meals because of its potential institutionalising effect. She was, however, held back by a stronger belief that people would likely starve if catered meals were to be withdrawn.

“We provide one hot meal a day . . . I don't like even doing that . . . If it was possible, I would withdraw that hot meal . . . [but] the client group is generally too complex . . . [they] would die of starvation.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

Another manager described having successfully ceased meal provision despite considerable push back from staff based on just such an assumption that people would likely starve in its absence:

“People [hostel workers] flipped out when we . . . said that we were going to remove the food provision . . . [saying] people are going to starve . . . so there was a lot of pushback . . . but people just figure out how to feed themselves. That's not the main support need.” (Hostel manager, psychology-oriented, various hostels)

Residents also highlighted a tendency, on the part of hostel managers and workers, (perhaps arising from this assumed lack of capacity) to offer levels of guidance and instruction on day-to-day living that were unnecessary and unwanted:

“I don't like being told what to do. I'm a woman, and I'm 46. I know what to do in life, and I hate them saying ‘do this.’” (Sadie, harm-reduction oriented, alcohol use permitted, medium hostel)

Hostel staff and residents suggested that hostels may go beyond constraining independence, functioning instead to generate dependence, ultimately producing a widely recognised cohort of people *“who are so institutionalised that they don't know how they would ever not live in a hostel”*:

“it's [institutionalisation] definitely . . . we have . . . a lot of residents who don't directly come from the streets to us, they come from other hostels and have been in services for years.” (Hostel worker, psychology-oriented, various hostels)

This section now moves to look at the various modes of dependence, as postulated by hostel staff and residents, drawing out four modes of dependency generation as described by hostel staff and residents, including: institutional, relational and location modes of dependence, before turning in the closing section to explore the concept of therapeutic dependence.

Most hostel staff felt that hostel accommodation gives rise to an **institutional mode of dependence**, meaning that people become highly acculturated to the rhythm and routines of hostel living. Most hostel informants suggested that this form of dependence is a necessary tendency of communal living environments:

“There is an element of conformity to communal living . . . it [institutionalisation] is inevitable in some shape or form, but you just try to challenge it.” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

While most hostel informants were of the view that the institutionalising tendencies of hostel accommodation ought to be challenged, workers hailing from abstinence-oriented services lauded the capacity of hostel accommodation to allow for (obligatory) participation in tightly controlled and collectively observed routines. These routines, they suggested, can generate an increased capacity for independence, one that is evidenced through enhanced observation of individual responsibilities and commitments.

“they have to be up for diary [meeting to plan the day ahead] every morning . . . it's a requirement . . . have to be at groups on time, lunch is set time, dinner set time . . . they have a set time they have to be in their rooms . . . in the evening . . . [R]outines like that . . . [are] quite amazing . . . [at] building capacity for independence . . . people go to their appointments because they got up in time to work out what appointments they had for their day.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

When describing other (non-hostel related) living circumstances where individual choice is constrained and controlled, abstinence-oriented staff, in sharp contrast, suggested that such circumstances tend to diminish capacity for independence:

“the other group that maybe have . . . not got capacity to live independently . . . [are] people who've been in . . . home settings . . . [where] there's been a high level of control and abuse . . . [that] really impact[s] some of the practical, like, how do you manage on your own when you have choices, and you have power?” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

While they did not, of course, draw a direct connection between their service ethos and the outworking of coercive control, abstinence-oriented staff noted that the routines that allow for the actualisation of attributes often associated with independence (e.g., observation of responsibilities and commitments), also generates an undesirable form of institutional dependence:

“I think that's the flipside of the routine being really helpful for people. Sometimes when people have moved on they've then phoned in on Zoom for the 8.45 meeting in the morning because they don't know how to start their day without it.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

“I did do a group . . . and I have to say . . . it was really triggering for everybody . . . on what it's going to look like when you're not living here . . . everybody in the group was really upset at the end . . . because the reality of that was actually so massive . . . it is a real risk that people have the sense of community and routine and structure that works really well for them and they then become a bit institutional like they only feel they can manage in this environment.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

This tendency towards dependence was evident in the experiences of Jenny, who described a previous unsuccessful stay in abstinence-oriented hostel accommodation. She had been excluded from the hostel following accusations of substance use, which she strenuously denied:

“they were thinking I was under the influence, so I went and got three drug tests and they came back clean. But that was obviously still not good enough and then I had a warning . . . but before they gave me another warning, they asked me to leave but I should have stood my ground and said no, I'm not going anywhere. I never, I just left because it was just getting to the stage where . . . it just wasn't working.” (Jenny, faith-based, abstinence-oriented, women only, small hostel)

She described this exclusion (and the events leading up to it) as occasioning deep psychological stress. She was placed in a hostel where substance use was permitted and struggled to sustain abstinence there, to such an extent that she considered sleeping rough. Her mother was able to offer her a temporary place to stay, and it was this offer that allowed her to avoid relapse and acute homelessness. Despite these struggles, her intentions very quickly turned to regaining access to the abstinence-oriented hostel, which she missed deeply:

“I wasn't doing anything, I wasn't in a routine, I was just pure chaoticness [sic] . . . [W]hen I left for the six weeks all . . . [I] missed was the routine . . . the groups . . . the silly wee things that . . . you take advantage of and though I hate being in a prison . . . I would say this is like winning the Lottery to be honest being here, it is stunning, it's beautiful, you've got the support, the staff . . . It'd be hard to find something like this again, you could never get something like this out there, never.”
(Jenny, faith-based, abstinence-oriented, women only, small hostel)

Hostel workers suggested that hostels can give rise to a **relational mode of dependence** because they function to acculturate people to having peers, staff, or volunteers available continuously. This means that some people are reluctant to move away from these relational supports toward more independent living arrangements, including a reluctance to even contemplate such a move:

“I think there's little families that's created within a hostel . . . [and] they gain something from each other, because they're all here together . . . [but then] they don't want to leave . . . they don't want to think about moving on.” (Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

“We find that a few residents are ready to move on to independent accommodation, but . . . they're scared to do that because there's not going to be people around them 24/7, there's not going to be someone that they can talk to . . . someone that can help them out at their beck and call.” (Hostel worker, psychology-oriented, medium hostel)

Hostel providers conceded that hostels can generate strong resistance to move on and to such an extent that people may even be accepting of sub-standard living conditions:

“People don't want to move . . . it's the family they've never had, it's the community they've never had and the fear of leaving that . . . if . . . in your life, [you've] been rejected, left alone, left isolated . . . knowing that you potentially might move somewhere on your own and never get it again. So, all that physical thing to do with . . . what the [hostel] room's like becomes less and less important because, actually here I feel complete, I feel happy.” (Key informant, voluntary sector, hostel provider)

Of note, providers often presented this reluctance as reflective of the effectiveness of hostel provision, with the idea being that hostel accommodation must surely be

considered conducive to individual wellbeing if people are reluctant to leave (Key informant, voluntary sector, hostel provider).

Hostel staff agreed with providers that hostels are conducive to relational bonding, although many argued that the sense of belonging fostered can be stifling of individual hopes and aspirations, and ultimately generative of unhealthy dependency:

“everybody feels the same . . . I spend more time here . . . than I spend with my friends or see my family . . . I have that feeling . . . I feel connected with people who live here, with my colleagues . . . but . . . it shouldn't be enough . . . it shouldn't be normal . . . because in the end, they get used to here . . . and it's hard to move again . . . homeless accommodation . . . shouldn't be . . . my home because you deserve a proper home. You deserve your house; you deserve your apartment. You deserve your peace and quiet.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

The testimony of hostel staff also highlighted a more practical element to relational dependency. Hostels, many suggested, are conducive to the notion of doing things *for* people, with the doing-for tendency being one that most hostel workers felt they had to actively guard against, either in their own practice or in the practice of their staff team:

“I think that's the difficulty for new staff, they want to do things for people, they want to show how caring they are.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

“We're a very caring staff team and we all just want the residents to feel safe and loved . . . to enjoy being here . . . I think we do go a bit overboard of looking after them, in a sense.” (Hostel worker, psychology-oriented, medium hostel)

Several hostel informants felt that staff and volunteers can sometimes be driven by a need to be needed, so much so that their doing-for can ultimately strip people of their existing independence.

“quite often people are drawn to this work are people who want to be needed and it's really easy . . . to be like I really need you to need me so I will do all these things for you so you don't have any independence.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

There were also very practical motivations behind doing-for interventions, with these generally being associated with greater convenience and ease of service delivery in the

moment, albeit that they were acknowledged as generative of service dependency in the longer term:

“we can very easily do everything for people . . . [and] then people become really dependent on your services . . . it is quicker and easier to do something for someone than do it with them. In a busy environment the temptation can be to like, 'Oh I'll just do that for you because I can't be bothered to do it with you.’” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Considering the adverse outcomes associated with doing-for interventions, hostel staff often expressed a preference for doing things *with* people. Doing-with interventions encompassed offers of guidance, support and direct instruction intended to enable people to complete tasks as independently as possible, with the fall-back of completing tasks together should these offers prove insufficient. In descriptions of doing-with interventions, hostel residents suggested that hostel workers were sometimes overly exacting in the guidance they offered, particularly in relation to chores associated with standards of cleanliness. Staff descriptions of support (sometimes) appeared to back this suggestion:

“each of the residents is supposed to do a chore . . . most days [I'll] be like, 'You haven't wiped the surfaces, you need to wipe the surfaces' and they're, 'But I have' and you're, 'You haven't moved a thing' . . . so sometimes it can be very tight support around that but it would only form a portion of, 'you need to get up, you need to do your washing, you need to do your chore, you need to do the dishes', that would be a feature in every day.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Melissa described the impacts of this approach. She had recently moved from her hostel to an attached semi-independent flat and spoke at length about the exacting and rigorous standards of cleanliness that staff expect of residents, and of the intrusive nature of doing-with offers of support, with the combination of the two leading to feelings of inadequacy and a general despondency around the possibility of future independence:

“I find it really difficult to keep on top of the kitchen and the living room and the bathroom all together so it's quite a hard job keeping everywhere spotless or cooking yourself dinner . . . it's not a big place but . . . I didn't realise how much it - you have to bloody wash the blinds every three weeks . . . they do checks every two weeks . . . they'll offer to come help you clean but I'm someone who doesn't like

people in their flat very much, so I don't take the help . . . it's hard to let people in and touch your stuff.” (Melissa, faith-based, young people, small hostel)

Hostel informants suggest that hostels may give rise to a **location mode of dependence**. For providers, hostels were often presented as an appropriate venue addressing health needs, particularly problematic substance use, mental ill-health, and trauma. The benefits of hostel accommodation in this respect were in part related to convenience of delivery:

“some [residents have] very serious somatic diseases and they need quite intensive support. That's not always easy to arrange in the scattered housing.” (Key informant, voluntary sector, non-provider)

When people are grouped together in a single location, services can be brought to people, meaning that they can then more readily access ‘help’ in the form of clinical diagnosis, treatment, or interventions; and of course, needs can be assessed and addressed through hostel support and key working systems. Several academics countered this line of thought, suggesting that the assessment or diagnosis of individual functioning in hostel accommodation may be inaccurate or counter-productive, given the novel (and often challenging) nature of the hostel setting: *“it is the difficulty”*, one informant suggested, *“of measuring insanity in insane places, my behaviour is a reaction to my environment”* (Key informant, academic). Providers strongly disagreed, with some even suggesting that the health outcomes of hostel accommodation were such that:

“even if there . . . [were] enough flats for everybody, we would still say there's a therapeutic place for shared accommodation for recovery work, for mental health recovery, for addiction recovery.” (Key informant, voluntary sector, hostel provider)

While hostel managers and workers did not often concur with academics on the idea of assessment and diagnosis being skewed by environmental conditions, many did suggest that hostels function to create an insular location dependency through the delivery of in-reach services, with health services often cited as a particularly powerful generator of this phenomenon. Of note, even the most ardent critics of in-reach health provision suggested that it might be important (during early contact or at times of crisis) to bring health services to people, and that overly zealous pushbacks in the pursuit of total independence might be equally damaging. That said, hostel staff often suggested that where provision of in-reach health services is anything other than a crisis response, a stark deterioration in independence can be observed:

“there will be an immediate positive result from that [in-reach health services] . . . because . . . you literally plonked them in front of what they needed, but long-term . . . you can literally see before your very eyes that somebody is losing the skills of going out to a GP waiting room, in the general public, for someone who’s going to knock on their door four times to remind them that the doctor is still downstairs and waiting for them.” (Hostel manager, psychology-oriented, various hostels)

Several hostel managers connected the use of in-reach services to a tendency within hostel accommodation to prioritise short-term health gains above longer-term outcomes, with this acting not only to foster dependency on hostel associated in-reach services, but also to obscure issues of broader exclusion from mainstream health services, (issues that were thought to contribute to homelessness in the first instance):

“People have come up with ideas before and said, ‘Oh, you should get a nurse in the [hostel].’ ‘No! People are entitled to a GP.’” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

This tendency to prioritise short-term health gain was further postulated by some as being motivated by a need to manage risk within the hostel setting, with staff often reluctance to allow for independent decision making where the outcome is likely to be detrimental to individual well-being. Given that hostels are generally oriented toward the promotion of safety and prevention of harm, the idea of *“pushing people to be more independent”* in the sense that they can *“make their own decisions”* about their own health needs, including *“terrible decisions”* was, some managers suggested, deeply challenging (Hostel manager, psychology-oriented, various hostels). Shifting services away from assertive, in-reach models was particularly difficult, one informant suggested, because of a profound misalignment between the responsibilities of in-reach health care professionals and those that might be expected of hostel staff. She explained,

“We’ll have nurses and GPs coming into the hostels and they have such a powerful duty of care in terms of people’s physical health, and it can be baffling to them why we aren’t offering the same.” (Hostel manager, psychology-oriented, various hostels)

This duty of care meant that people might be retained in services to allow for the continuance of treatment, even where move-on accommodation is available.

Residents in hostel accommodation sometimes wanted and valued access to rehabilitation and treatment services, but most prioritised obtaining a home of their own above access

to such services. What they desired was access to health services (if needed) *and* an entirely separate (regular, permanent) home of their own. This was true even of those who were more positive about the treatment focus of their hostel placement. Jenny explained that she had come to her abstinence-oriented hostel “*because it . . . is like a rehab*”, explaining that “*a lot of the girls [in the hostel] think that*”. However, being resident in the hostel conflicted with other priorities, she explained:

“the only way I get my kids back if I have a house and stay clean and I’m doing that, I just need to get myself a house, I’ve been bidding for six months now and I bid every week.” (Jenny, faith-based, abstinence-oriented, women only, small hostel)

Her conclusion was that people “*should be able to come here [to the hostel] and do a . . . [rehab] course and then go back to the house [of their own] with the support*”, without having to be homeless to access services in the first instance.

Hostel residents who participated in this research strongly objected to approaches to move on that were premised on treatment first principles, often pointing to the near impossibility of demonstrating stability while resident in hostel accommodation:

“basically you have to be engaging [before you are considered for move-on]. . . but that's not right. . . putting me . . . with all the people that smoke crack and heroin . . . so I'm going to smoke, but if I was in my own home and doing other thing, then I'm not going to smoke as much . . . it's not fair at all . . . I feel that's rude, and that's disrespectful. Just because I've got a drug issue, it doesn't mean that I can't maintain my house.” (Chris, psychology-oriented, medium hostel)

“My least favourite thing is being back in [this hostel], darling. I didn't want to come back here, but I have to have this address for my detox and my rehab again . . . it's a long, hard road.” (Kieran, psychology-oriented, medium hostel)

6.3 Navigating the Independence-Dependence Tension

When cognitively negotiating the independence-dependence tension, managers and hostel workers often actively oriented themselves *against* notions of independence, positing the fostering of “*interdependence*” or “*healthy dependency*” to be a more beneficial outcome, with this **therapeutic mode of dependency** being presented as possessing qualities thought particularly beneficial for those who have experienced “*traumatic childhood events*”:

“I’m a believer in dependencies . . . the most independent person out there is the guy that’s sitting on the street with absolutely nothing, and nobody to turn to . . . that’s a desperate, miserable position to be in . . . we’re able . . . not to institutionalise, but to show people what healthy dependency looks like . . . you’re able to develop that within a community.” (Hostel manager, faith-based, abstinence-oriented, men only, medium hostel)

For abstinence-oriented managers ‘healthy dependency’ was a way of being that would continue across a life course. Respondents hailing from psychology-oriented services, equally considered the fostering of dependency to be vital but, in this context, it was viewed as a temporary outcome on a therapeutic pathway that continued to hold independence as the ultimate the goal.

“sometimes you have to create dependence in order to create independence . . . really severe trauma and abuse in . . . childhood . . . means [that people] . . . are hugely distrusting of all services . . . to be able to work with somebody they have to trust you, and . . . that means that they become dependent on the team and on the service, and that’s okay . . . they need to drop down into dependence, and then they can climb up to independence . . . that’s true of a lot of people that are really, really traumatised.” (Hostel manager, psychology-oriented, large hostel)

Hostel manager and worker testimony suggests that there is a deep underpinning tension encompassed in the idea of fostering therapeutic dependence in a temporary setting. In considering the efficacy of an in-house clinical psychology programme, for example, one hostel manager noted that *“addressing somebody’s psychological trauma”* is often *“extremely long, slow . . . kind of work”*, requiring of a settled living environment (Hostel manager, psychology-oriented, various hostels). Hostel workers agreed, emphasising the fragile and time-sensitive nature of withdrawing from carefully developed attachments:

“I always like this analogy; it’s a bit like just putting the stabilisers on a bike and then slowly taking one off and then you take the other one off once they’re okay.” (Hostel worker, psychology-oriented, various hostels)

“what psychology have explained to me . . . it’s going to sound a little bit weird maybe - they want the resident to form an attachment . . . and then it’s slowly, slowly pulling away once they’re at a stage where they feel more confident. That’s one of the things we’re supposed to be doing, I guess.” (Hostel worker, psychology-oriented, medium hostel)

Hostel providers often suggested that good hostels intensify and hasten the therapeutic journey, but in keeping with the “*long, slow . . . kind of work*” hypothesis, they rarely advocated short hostels stays, instead proposing that considerable (or even unlimited) time in hostel accommodation is needed to allow for the depth of work required. As one provider noted:

“I don't know how long that healing takes. For somebody to feel that they can move into their own accommodation.” (Key informant, voluntary sector, hostel provider)

The difficulty here was that homeless hostels are (intended to be) transitional spaces; time-limited in nature and ultimately oriented toward move-on, not least of all because of a continuous demand for bed spaces, often from people who are in extreme need and at considerable risk. As one hostel manager concluded:

“there's a bit of a conflict [because in-house] psychologists obviously want to work with people who've experienced trauma and give them a safe, supportive attachment [which is] a conflict in terms of us needing to move people through the pathway . . . that is often not an easy thing.” (Hostel manager, psychology-oriented, small hostel)

And there was also sometimes a power dynamic here between health care professionals and housing staff, one that may weight the value placed on these competing agendas:

“the psychologist might have doctor after their name . . . they come in as a recognised professional . . . we know what we're doing . . . but we're not even a social worker.” (Hostel manager, psychology-oriented, various hostels)

This conflict between health and housing outcomes was a deep and frequently cited challenge to dependency-oriented theories of change. Hostel providers tended to negotiate this tension by pushing the temporary nature of hostels toward the background of discussions: services were “*as permanent as needs be*”, with no time limit placed on stays, and no “*impending cliff-edge*” (Key informant, voluntary sector, hostel provider). However, this negotiation was complicated by the reality that services *are* temporary (and must necessarily be so for risk management purposes); they are (almost invariably) accessed based on an occupancy agreement, with an intended outcome of move-on and the possibility of eviction without court action. What mattered, then, for hostel providers was creating a non-temporary “*feel*” rather than a non-temporary actuality:

“They have to be something that almost feels like your own tenancy . . . so that people are not so fearful about losing their tenancies.” (Key informant, voluntary sector, hostel provider)

Hostel staff viewed the tension between the proposed dependency demanded by therapeutic health interventions and the temporary reality of hostels, as a profound and problematic tension. Even for abstinence-oriented hostel workers, where dependency was generally viewed as having a positive valence, the transformative potential of dependency was figured as always holding real potential to give way to institutionalisation.

“there comes a window where . . . it's a good time for them to move on . . . go beyond that window, and then they start to become institutionalised . . . really struggle with [wider] community living, lose their confidence.” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

Negotiating this tension was also practically difficult because length of stay in hostel accommodation is most often determined by the absence or presence of housing. People may be offered permanent accommodation before the process has had its fully desired effect, or long after with all that that entails in terms of decreased capacity for independence.

Of note, this prioritisation of therapeutic dependency did not chime with the experiences and aspiration of hostel residents, who instead cited poverty as the primary cause of their homelessness in the first instance, a barrier to move-on when homeless, and a destabilising factor when regular housing is obtained. Melissa, for example, expressed deep fears about an impending move into regular housing, with her concerns focused almost exclusively on affordability:

“it's scary, it's scary going out in the community and having your own house . . . I'm more thinking about what can go wrong rather than what can go right . . . money and stuff, like it's more money to stay in a house and there's a lot of pressure, it's scary, it's scary . . . you're on bad wages . . . you've only got one carpet in your house and you can't afford that much food, or gas, electric. You [society] expect someone to be happy and go to work every day and not have a single issue with it?” (Melissa, faith-based, young people, small hostel)

Most hostel residents were keen to move-on from hostel living, with most describing personal attributes and assets that would help them establish a life beyond hostel living,

if only move-on could be achieved. Here, residents often reported feeling stuck and held-back by hostel accommodation. As James explained:

“I’m trying to get myself back into housing . . . I had a good job . . . as a technician . . . I’m just lucky that way that if I do get myself back out of the hostels I know I can get back into work but it’s just getting out of these hostels. It’s hard to explain, but once you’re in these places, it’s very hard to get back out of them again, you kind of get caught in a little cycle and that’s very hard to break that cycle.” (James, harm reduction-oriented, shared room, large hostel)

The contributory factors to this cyclical trap included psychosocial elements (particularly the negative and demotivating impacts of homeless on self-esteem) but were generally presented as socioeconomic in nature, including the affordability of housing, the limiting impacts of that the stigma of homelessness has on housing accessibility, and the work disincentives associated with hostel living:

“. . . your confidence, your self-worth, you lose it, it takes a big part of you living in these places . . . [and] a lot of landlords don’t want to take you in if they know you’re homeless because they have this idea in their head that you’re probably . . . going to be a nutter . . . [and] the type of work I do I’d have to drive and . . . you’re not allowed to bring it [your car] there [to the hostel] . . . It’s trying to get work when you’re in these places because you have no stability, you could be moved from one side of [the city] to the other side, literally within an hour.” (James, harm reduction-oriented, shared room, large hostel)

Conclusion

This chapter has presented evidence to illustrate that hostels are intended to foster independent living skills, with an associated move on to more independent living considered an important end-goal of service provision (Crane, Warnes and Coward 2012; Mayor of London and Department of Health 2015; Homeless Link 2018). Providers posited that hostels are particularly suited to independence fostering on account of their communal nature, which was thought to speed the formation of learning relationships and enable people to engage in independence-fostering activities (Akerman 2019). The testimony of hostel staff and residents challenged this postulation by calling into question whether people really need independence fostering support in the first instance. It was argued that many hostel residents already have the necessary skills to live independently or the ability to (re)acquire these skills rapidly and with minimal (if any) supports; while

those who truly lack the ability to acquire independent living skills ought to be appropriately supported and housed outside the hostel sector. Some argued that an exception might be made for those who are already institutionalised to communal living arrangements, but even here most thought that hostels really ought to be able to support people to overcome previous institutionalising experiences. Where this is for whatever reason not possible, long-term hostel stays were still considered unpalatable, with most suggesting that some form of rebranding as settled provision would be needed. The key point here is that there was no group considered particularly suited to the (postulated) independence fostering tendency of hostel accommodation.

This tendency was, in any case, not broadly recognised by hostel staff and residents, with most suggesting that hostels instead tend to curtail the actualisation of independent living skills (Watts and Blenkinsopp 2021). This opens the possibility that hostel may have a deleterious impact on independent living skills (people lose or forget skills that they do not practice) and thus (at least in part) internally generate a need for the independence fostering supports they offer. A more notable effect was that in obscuring the presence of existing skills, hostels support erroneous assumptions that people lack skills or capability for independent living. This suggests that hostels (again in part) may generate an illusionary need for independence fostering supports and that such illusionary needs contribute cognitively to imagined barriers to independent living outwith the hostel setting.

This chapter has also presented evidence that independence fostering activities are often low on the priorities of hostel staff, with other demands – particularly those associated with safety and harm minimisation - often crowding out considerations of independence. The treatment of health needs was also often granted a logical priority over independence-oriented supports and, crucially, such health interventions were thought to require considerable time and resources. So even where a need for independence fostering was not internally generated or illusionary in nature, the likelihood that it would be promptly addressed in hostel accommodation seems low.

The dependence hypothesis has also been explored. Non-providers posited that hostels have an institutionalising effect, acculturating people to communal living and fostering the skills required to live in dangerous and oppressive environments. Hostel staff and residents agreed that this is true of (some) other hostels but challenged the notion that dependency tends to arise from the negatives of hostel living, arguing instead that it is ‘good’ hostels, those that function optimally in accordance with the (positive) intentions

of providers, and that give rise to subjectively positive experiences for (some) residents, which foster the most notable modes of dependency. This may include dependence on the rhythm and routines of hostel life and the relationships and supports available internally, so that people may be reluctant to consider move-on, may actively sabotage or resist plans for the same, and may be drawn back toward hostels following exit from homelessness. It may also include dependence on internally available health interventions, particularly where these function to obscure or appease gaps in mainstream provision. This is in turn fostered by approaches that prioritise treatment above consideration of independence. Here, staff and resident testimony offers empirical backing to existing evidence that treatment first obscures rather than addresses exclusion from mainstream services and entrenches people who are unresponsive to such intervention within homelessness services (Mackie, Johnson and Wood 2017). This chapter has sought to add to this evidence-base by illuminating practices that purposefully foster dependence on the ground that it holds therapeutic, health-related benefit.

Hostel informants rarely considered the cumulative impact of an environment that both constrains independence and fosters dependency, but their testimony points to the existence of a cohort of people who are chronically dependent on the hostel environment, to the extent that hostels were proposed by some as necessary for this group. The existence of this group is well documented (Benjaminsen 2016; Boyle and Pleace 2017; Boyle, Palmer and Ahmed 2016; Daly, Craig, and O’Sullivan 2018; Ellison et al. 2012; Fitzpatrick et al. 2012; Kuhn and Culhane, 1998). Here, hostels are not the therapeutic antidote to pre-existing institutionalisation occasioned by other agencies, as proposed under the independence hypothesis, but are instead an institutionalising structure, with this institutionalising function acting to justify their future existence.

Chapter 7: The Inclusion- Exclusion Tension

Introduction

This chapter sets out to explore the inclusion-exclusion tension, that is the tension that appears to arise from the juxtaposition of two distinct postulations: the first that hostel accommodation tends fosters social inclusion, and the second that hostels tend to foster exclusion. The chapter opens with an account of the inclusion hypothesis, briefly detailing the nature of the hypothesis as postulated by national key informants, before providing an account of the views and priorities of hostel staff and the lived experience of hostel residents. This account distinguishes between two distinct forms of inclusion. The first is inclusion internal to the hostel, with this discussion structured around three core relational structures: peer relationships, non-peer relationships, and internal community. The second is wider social inclusion, in the sense of active participation in community outwith the hostel setting.

In its second half, this chapter moves to explore the exclusion hypothesis as postulated by non-providers, before again turning to focus on the relevant testimony of hostel staff and residents. It begins by considering a direct counter to the inclusion hypothesis, namely that hostel accommodation constrains rather than fosters social inclusion, in the broad sense of inclusion in society beyond the hostel. It then moves to consider the phenomenon of direct exclusion, doing so across three main themes: grounds for exclusion, forms of exclusion, and motive for exclusion, offering a typology of each. This chapter then closes with a consideration of hostel accommodation as generative of exclusionary practice.

7.1 The Inclusion Hypothesis

Hostel providers proposed that hostels tend to foster social inclusion and in doing so allow for the rapid generation of trusted relationships, with such relationship being considered a necessary and foundational antecedent to a raft of beneficial outcomes, including exit from homelessness and wider social inclusion. The outcomes generated through social inclusion, were posited by providers to be non-replicable in other environments.

There was a broad consensus across all informants (provider and non-provider) that hostels can and often do foster a mode of inclusion that is internal to the hostel. That peer and non-peer relationships are formed in hostels was never doubted and that hostels function as a type of community received broad acceptance:

“It is a huge thing in services . . . the social aspect, of forming relationships . . . you do get a sense of community.” (Hostel manager, harm reduction-oriented, shared room, large hostel)

There was also a common view that relationships matter, and that social belonging is important, particularly so for people who have been subject to adversity or trauma:

“it's really important that residents feel like they belong and are part of the [hostel] community . . . because so many residents have never felt like they belong anywhere . . . so many . . . have experienced trauma and maybe have had really volatile childhoods without being able to develop secure attachments.” (Hostel manager, psychology-oriented, small hostel)

Points of difference, then, across the sample revolved not around whether hostels foster internal inclusion, with everyone agreeing that they do, but whether the relationships and communities formed through internal inclusion have a positive valence, whether they function to address people's support needs, and whether they produce outcomes conducive to exiting homelessness. The opening half of this chapter seeks to explore these points of difference, and to deepen understanding of their variance across three different forms of inclusion – namely, peer relationships, non-peer relationships, and internal community.

Hostel providers suggested that hostels enable the formation of positive peer relationships, and further proposed that such peer connections act to affirm a positive sense of self, to shape core life skills, and to positively influence life trajectories. Peer relationships were presented as functioning in three distinct modes. The first was *supportive interpersonal connections* between peers who have shared experiences; these supportive peer relations were thought to have broad therapeutic benefits. The second was *aspirational interpersonal connections* between peers who are at different stages of ‘recovery’ or ‘transformation’; these aspirational peer relations were thought to inspire and guide positive progress. The third and final was *learning interpersonal connections* between peers who have shared domestic responsibilities; these learning peer relations were thought to enhance capacity for independent living.

Most non-hostel providers pushed back against the notion that peer connections have a positive valence, often pointing to the involuntary and non-cohesive origins of peer relationships as undermining of their theorised goodness:

“People have not chosen each other . . . why [is] it helpful for a person with problems to be stuck together involuntarily with other people . . . what should be the positive outcome of that?” (Key informant, academic)

Hostel providers countered this suggestion by emphasising the importance of grouping people with similarities, so that hostel peers (although involuntary) are more likely to be people who identify with one another, at least in some sense. Five distinct groups were considered likely to benefit from peer interaction (i.e., with one another), namely: people who share certain experiences (adversity or trauma); people who share certain conditions (serious somatic illness or substance dependency); people who share certain traits (fearfulness or mistrust); people who share certain aptitude or knowledge gaps (independent living skills or relationship building); and people who share certain characteristics (women or young people).

Hostel managers and workers were of the view that hostels do enable the formation of peer connections, with this being a highly recognisable outcome of hostel living. They were often sceptical, though, of suggestions that peer-to-peer relationships formed in hostels generate positive outcomes, with most proposing instead a negative peer effect, often characterised by unhealthy co-dependencies and toxic relationships:

“they create their own relationships, their own circle of people . . . but in the end, the question is, is it healthy? . . . I think in the end it's just creating co-dependence.”
(Hostel worker, harm reduction-oriented, shared room, large hostel)

“yes, there will be friendships and they are lovely, some of them, other ones are very toxic, and with that all sorts of problems come.” (Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

People might very well be inspired by their peers to exit homelessness, some managers suggested, but this was considered more likely in the context of avoiding rather than aspiring to a similar life trajectory:

“okay, it's [this hostel] maybe not the best placement, right, but . . . we've got people who've been drinking for 50 odd years in the building and someone who's been drinking for ten sees how that person is . . . sometimes it is a real wake-up call, which is also great, you know.” (Hostel manager, harm reduction-oriented, alcohol use permitted, medium hostel)

Rather than a positive ‘wake-up call’, hostel staff suggested that people exposed to negative peer connections show marked deteriorations in wellbeing. One hostel manager, for example, described a young man who initially benefited from . . .

“social inclusion [in the hostel], . . . building a community of friends . . . As he was doing that there he was getting introduced to drugs . . . you could see him stop linking in with his course . . . stop going out, doing his social bits and pieces . . . [his] relationship outside; that all broke off . . . he was a fresh, young man and you could just see the deterioration.” (Hostel manager, harm reduction-oriented, shared room, large hostel)

Even in hostels where peer-to-peer relationships were presented as central to the service model, they were still figured as being fraught with conflict and tension. Hostel workers hailing from an abstinence-oriented services, for example, explained how they utilised interpersonal conflict between peers as a basis for therapeutic interventions, with the intention of enabling people to vicariously process and overcome ‘disrupted’ familial relationships:

“there was a big argument last night [between two residents] . . . where someone's essentially working through their really difficult relationship with their mum because they've projected all of this stuff onto another resident. But if they can work that through . . . that means that they don't repeat that cycle of relationship . . . [I]t is that outworking of really difficult relationship patterns [that hostels allow] . . . You can't make false situations where you're like can we pretend [to be in conflict] . . . it has to happen organically.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

This form of therapeutic intervention was viewed as part of the day-to-day work of the hostel and was thought to have beneficial outcomes in terms of supporting people to build healthier relationships. Yet, hostel workers delivering these interventions were also clear that interpersonal conflict is not always experienced as therapeutic, on the contrary interaction between peers can function to generate both vicarious and non-vicarious traumas:

“we've had people who . . . [make] suicide attempts and we've had to move them on - not because it's the best thing for them, it's totally the worst thing for them - but because it is extremely triggering for a community . . . Someone says something to someone that triggers them . . . [to] make a suicide attempt. Then the person who

said it to them feels like they've tried to kill themselves because of the thing that they said and it just becomes very messy.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

The ramifications of these triggering peer connections were considered far beyond the scope of what might be safely managed and addressed by support staff, with hostel workers noting: *“we're not specialised mental health workers and we're not a specialist mental health service”* (Hostel worker, faith-based, abstinence-oriented, women only, small hostel).

Hostel residents rarely referenced their (hostel) peers in positive terms. Those resident in non-abstinence-oriented services lamented a strong negative peer effect in relation to substance use:

“the people are drunk, totally drunk, and don't accept that I don't want [to] drink, and they want to give me drink all the [time] . . . [I have] to say no drink, no drink, no drink . . . [but] I'm afraid that'll come around and [I'll] drink again, when I stay here longer.” (Jacob, harm reduction-oriented, alcohol use permitted, medium hostel)

Across the board there was a strong sense that it was wise to pursue a strategy of “keeping your head down”, avoiding peer-to-peer interactions where possible. One resident, in explaining the challenges of hostel living, said:

“It's not the members of staff, it's not the building itself. It's the members, [the] residents that live here. If you keep yourself to yourself, you'll be okay . . . that's what I do.” (Kieran, psychology-oriented, medium hostel)

Hostel providers suggested that hostel also enable the formation of “*trusted relationships*” between hostel staff and hostel residents (Key informant, voluntary sector, hostel provider). These trusted relationships were highly valued, with most providers positing them as the core tenet of the work they undertake:

“Our whole way of working is predicated on trusted relationships.” (Key informant voluntary sector, hostel provider)

Where trusted relationships are formed, providers suggested, they deliver a foundation that allows (all) other beneficial outcomes to be generated, including exit from homelessness:

“As soon as they've got that [trusted relationships] then we can build on everything else.” (Key informant, voluntary sector, hostel provider)

The beneficial outcomes generated by trusted relationships were most often described as a general flourishing: *“they [hostel residents] trust,”* one provider explained, *“and it builds, and they just fly, and they do really well”* (Key informant voluntary sector, hostel provider). However, what exactly it was about trusted relationships that was thought to generate beneficial outcomes, varied between interviewees. Non-faith-based hostel providers tended to present trusted relationships as increasing people’s ability to understand, explore, select, and make best use of available options. Here, trusted relationships allow people to *“build their self-confidence, self-belief”* and resilience, becoming *“more able to deal with situations”* and avail of *“opportunities”* (Key informant, voluntary sector, hostel provider). Faith-based providers tended to locate the significance of trusted relationships in concepts such as *“love”* and *“care”*, with both thought to have healing and restorative properties. Here, trusting relationships were always loving relationships, they were *“about people letting people know that they are loved and that we [the provider] care for them ”* (Key informant, voluntary sector, hostel provider).

A few hostel managers, again hailing from a faith-based services, echoed this valuing of loving relationships. One manager described such relationships as emerging organically from a broad culture of love within their hostel. Another hostel manger described the formation of loving relationships as follows:

“I don't tell them as soon as they walk through the door, I love you like a daughter, or I love you like a son. That would just make them think weird . . . you build that relationship up. Then I can say, 'Look, you're important to me because I love you like a daughter.’” (Hostel manger, faith-based, young people, small hostel)

Loving someone like a daughter was thought to legitimise acting like an over-protective father, including actions that might be considered inappropriate:

“We had a young girl . . . she brought [her boyfriend] . . . into the unit one day and says, 'Oh, this is my boyfriend.' . . . I said, jokingly, to him, 'You hurt her and I'll do you in.' He stood back and he went, 'All right, all right.' I smiled and I walked away.” (Hostel manger, faith-based, young people, small hostel)

Non-faith-based providers and managers generally balked at the concept of loving relationships, but they did often find common ground with faith-based providers in the idea that trusted relationships ought to emulate those associated with family:

“We had a reflective practice on her [hostel resident] a couple of weeks ago . . . everyone said that we know how much she values the relationships that she has with female key workers here and how she hasn't had that in the past with her mother.”

(Hostel manager, psychology-oriented, medium hostel)

Some hostel managers and workers, however, pointed to an uneasy tension between the concept of staff-resident relationships as familial in nature – *“treating people like you would your family”* - and expected standards of professional conduct (Key informant, voluntary sector, hostel provider). One hostel worker, for example, lamented the *‘unhealthy’* nature of non-peer relationships in hostel accommodation, arguing that they are often characterised by *“too much attachment”* (Hostel worker, harm reduction-oriented, shared room, large hostel). Another hostel manager pointed to an erosion of professional boundaries arising where staff conceive of the hostel as a familial, domestic setting:

“Because you're working in people's homes, it's very easy for it to slip into like a familial, domestic situation. I remember . . . a couple of the staff members just kept their slippers on throughout their shifts . . . they were eating [food] that belong to the residents . . . just like a blurring of boundaries.” (Hostel manager, psychology-oriented, various hostels)

Several hostel workers were vehement in their opposition to the figuring of staff-resident relationships as analogous to a family, arguing that it was inherently infantilising of residents and indicative of a sense of superiority amongst hostel providers and staff:

“There was a large mosaic in the old [hostel] . . . that said “our homeless family”. I took that fucker down. What in heavens! That's about being better than someone else.” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

Several hostel staff suggested that relationships between hostel staff and residents are not always trusted and inclusive in nature. In a practical sense, they explained, demands on staff time may leave people unnoticed, particularly those who are unable or unwilling to

direct attention to their needs; and, on an attitudinal level, staff might occasionally create an exclusionary environment through their manner and approach:

“I was always firefighting . . . because there two members of staff that just didn't get on with her [resident] at all and made it obvious that they didn't like her. I had to pull them up a few times.” (Hostel manger, faith-based, young people, small hostel)

Many hostel residents who participated in this research reported experiences that were very far from the concept of trusted relationships outlined above. Some described hostel staff as detached and unfeeling, while others described experiences where staff behaved in an abusive and intimidating manner toward them, including actions intended to belittle and frighten:

“They [staff] don't care . . . basically, really horrible, horrible people. It's really bad . . . I'd feel safer on the street.” (Chris, psychology-oriented, medium hostel)

“. . . most places [hostels] I've been, there's always someone on a power trip . . . one of the staff members [in a previous hostel] kept on turning around and telling me about I'm a prostitute, I'm going on Brixton Hill . . . [saying] 'Here, what, you're going on Brixton Road now. See you later.'” (Evelyn, psychology-oriented, medium hostel)

Reporting concerns about staff was often presented as futile and (worse again) potentially damaging to the whistle blower:

“it's been staff I've had arguments over and when I've had to make a report of it's come back tenfold on me as if I'm the bad one.” (Joe, psychology-oriented, medium hostel)

Hostel providers rarely countenanced misgivings around peer and non-peer relationships, proposing that – in their hostels – these relationships not only function well but function collectively to generate a form of community (internal to the hostel) which has emergent (therapeutic) properties greater than the sum of the individual peer and non-peer relationships:

“Being part of the community, supporting each other. The whole vibe that comes off that, it's just really positive and it's really strong, and there's a sense of ownership from the group, that they'll steer each other.” (Key informant, voluntary sector, hostel provider)

Concepts of how to facilitate the development of internal community varied across providers. Some advocated an obligatory communal dimension to all activities, including domestic chores, dining arrangements, and decision making, with the theory being that in caring for the internal community, you learn to care for yourself. Other providers described a form of internal community that was less prescribed and more artless in nature, but all providers agreed that if internal community is to claim any therapeutic benefit, a community inducing culture must, first, be purposefully fostered and, second, must pre-exist the entry of any given resident to services. As a member of the internal community, residents may act to reproduce this culture and may occasionally influence its form, but internal community is built and ultimately sustained by the provider:

“The community happens because we have people (staff) build the community, that’s their task . . . [it’s] in their job description.” (Key informant, voluntary sector, hostel provider)

Providers often presented this pre-existing culture as possessed of acculturating tendencies capable of producing compliance and cordiality amongst community members and assimilating newcomers to the hostel’s norms and routines. However, clearly delineating the theory that underpins concepts of internal community was, they suggested, difficult, often citing its relational nature as confounding explanation. As one provider explained:

“We tried to describe and document what a theory of change was, and we really struggled with it [because] . . . How do you describe relationships in your theory of change? . . . that’s [relationship] what makes the difference to someone, and we . . . epitomise this idea that our support has to be relational.” (Key informant voluntary sector, hostel provider)

Hostel managers were much less reticent about delineating a theory of change. Those hailing from abstinence-oriented services were particularly clear. Here, recovery from substance use was thought to involve a disaffiliation from existing (negative) social attachments, an acculturation to the internal hostel community, and then a gradual reaffiliation into wider society with new or reformed (positive) social attachments. In one abstinence-oriented hostel, acculturation to the internal hostel community was considered so vital to individual “change”, that “extra structures” (beyond that of “normal” hostel accommodation) were implemented with the express intention of limiting wider social interactions. This involved people signing up to “be on escort” for

two weeks, meaning that they only leave the service if accompanied by a member of staff or volunteer. As the hostel manager explained,

“They [residents] might initially kick back, but usually on reflection they would say, ‘I needed that period of time to be able to break away from those things’ . . . they would need that tightness . . . to be able to build in themselves the resilience . . . and the tools to make those decisions themselves once they are living independently.” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

Managers of psychology-oriented hostels articulated a very similar theory of change, albeit with important differences in emphasis and focus:

“the key working relationship . . . in a psychologically informed environment . . . [is] vital, this central trusting kind of linchpin . . . the key worker is your way in to actually building the trusting relationship with the whole service.” (Hostel manager, psychology-oriented, various hostels)

Here, the individual was conceived of as initially unattached, with the roots of change being in the development of a singular (positive) attachment, which then (in theory) builds toward internal community attachment, and then on (as with recovery) to a wider form of social inclusion.

Non-hostel providers were highly sceptical of notions of a therapeutic internal community, with several sharply refuting its very existence. Some also lamented associated theories of change, suggesting that providers often adopt and advance such approaches with limited evidence of their effectiveness, and that they have the means to do so only because people need the shelter that they offer.

“what you see happening is people [providers] retrofit the crisis of the accommodations to fit all of these philosophies, so homelessness becomes the Rorschach test of any group with the mission or idea or a well-intentioned programme . . . to come and commit some social policy on these folks.” (Key informant, academic)

One hostel provider, while insisting that *“there is a good evidence base behind”* their approach to service provision, corroborated the notion outlined above, explaining that they were *“sort of retrofitting the evidence to the model at the moment”*. (Key informant voluntary sector, hostel provider)

Several hostel staff echoed non-provider concerns, with one informant balking at any notion of internal community as therapeutically beneficial:

“We're fundamentally housing workers . . . we're not anything else. There are a range of issues that come up around housing that have led to exclusion. We'll try and sort that stuff out . . . I don't think we should set out to be therapeutic communities. I find that horrendous . . . People get fucking big ideas about who they think they are as a worker . . . It's like, what can you do? . . . What on earth makes any [hostel] . . . think that they can offer a therapeutic service?” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

Another manager suggested that the approach to hostel provision can often act to obscure its purpose. Describing the theory of change deployed in their hostel as beginning with the building of a therapeutic attachment between the resident and their key worker, the manager expressed misgivings:

“Actually, for some people, does it work better if they just get help from whoever is in the office at the time? . . . We know that so often it [key working] doesn't work well. Either the person decides that they hate their key worker and so they're not working with anyone, or they decide that their key worker is the only person that they're going to work with, so I think our job is to really pick that [theory of change] apart and bring it to light and not just accept it.” (Hostel manager, psychology-oriented, various hostels)

Of note, providers almost always caveated the therapeutic benefits of the internal hostel community, as “*not for everyone*”. As one provider explained it, people seeking access to their hostel need to be:

“. . . up for what's being offered, because it won't suit everyone . . . we're designing something for a group of people for whom it will suit, not it's here for everyone.” (Key informant, voluntary sector, hostel provider).

Where people do end up being resident in hostel accommodation that they are unsuited to, providers suggested that their experiences can be acutely negative. As these two key providers explained:

“[our hostel] may not always necessarily be the correct response . . . for some people it's really terrifying.” (Key informant, voluntary sector, hostel provider)

“For some people, living in a community is a horrendous thing, so what they need is something else.” (Key informant, voluntary sector, hostel provider)

Here, providers are not asserting a connection between terrifying and horrendous experiences and the quality of provision accessed; rather, they are suggesting that even the most carefully constructed of communal living environments might be entirely anathema to some. Non-provider informants considered this *“not for some”* reasoning to be highly problematic because hostels are often the first and only response to homelessness, leaving people with no real alternative. They also lamented that hostel accommodation, though often acknowledged as unsuitable for some, frequently attributes failure to the unwillingness of the individual to engage and, indeed, this tendency was evident in some provider descriptions of success:

“service users that are more successful in evidencing that [positive] transformation, very often it's about the fact that they're willing to enter into a relationship.” (Key informant voluntary sector, hostel provider)

Residents made very limited reference to hostels as an internal community, but where they did value a sense of collective belonging, they often caveated this with the observation that the composition of the internal community is complex and that becoming familiar with its composition is demanding, for two reasons. First, it is often characterised by a sizeable number of players and, second, it is in a continuous state of flux due to the comings and goings of residents and staff. Here, Jenny, who felt some sense of belonging in her hostel attempted to figure out the logic underpinning the *“escort”* structure described above: it must, she assumes, be on account of the sheer difficulty of getting to know members of the internal community:

“When you're first here you're on escort for two weeks . . . I don't know [why] to be honest! I think it's . . . because there's umpteen volunteers and staff, there's always a volunteer on every night and that's always . . . a different volunteer and the night staff and ones doing days . . . and everybody's on annual leave just now so it's even worse.” (Jenny, faith-based, abstinence-oriented, women only, small hostel)

7.2 The Exclusion Hypothesis

Non-hostel providers put forward an exclusion hypothesis, which asserted that hostels tend to foster social exclusion, with this phenomenon thought to arise from two distinct tendencies. First, that hostel accommodation inhibits wider social inclusion, having a deleterious impact on relationships external to the hostel and, second, that hostels engage

in a range of exclusionary practices, the most notable being the barring of people from premises.

Most hostel staff had significant reservations about the ability of hostel accommodation to foster inclusion in the wider sense of active participation in life beyond the hostel, even though this form of inclusion was recognised as an intended aim of hostel provision:

“I definitely think there's a community that's formed and there's a sense of belonging created, and people are supported . . . I don't know that it's social inclusion in the wider sense of society. I think it's more inclusion within the hostel.”

(Hostel manager, psychology-oriented, medium hostel)

Hostel managers noted very practical matters that impede a focus on wider social inclusion, with uncertainty around where people will move-on to – and the timing of that move – being of particular concern:

“you don't know what community you should be helping them to build those links within . . . workers on the front line are saying I'd love to engage my clients with the community, but what community and where?” (Hostel manager, psychology-oriented, various hostels)

Beyond these practical considerations, hostel staff noted that even though the goal of internal inclusion is often (ultimately) wider social inclusion (at least in terms of a theory of change), hostel accommodation can and often does damage existing social networks and limit their development, particularly in terms of sustaining and forming family bonds (the very relationships it often seeks to emulate). This was a point conceded by some provider informants: *“there are very few [hostels]”*, one provider acknowledged, *“that will let couples . . . be together”* (Key informant voluntary sector, hostel provider). Even in the *“few”* services oriented toward the facilitation of external relationships, the opportunity to do so was often figured as something to be requested by the resident and gifted by the provider. Speaking of his decision to allow residents up to three nights out, one hostel manager explained:

“I will determine if someone gets a fourth one or a fifth one [night out]. If they're trying to build a relationship with their mum and dad again, or their partner, maybe with a child or whatever, and they want to spend more time with them.” (Hostel manager, faith-based, young people, small hostel)

Some hostel staff suggested that any harm caused to external relationships though hostel practices was likely minimal because of the already limited or damaged nature of these relationships. Other hostel staff dismissed this as an erroneous assumption and one indicative of a strong tendency within homelessness service to discount the possibility of existing or potential positive ties with family and friends, outside the hostel setting:

“[family visits] would not happen, I guess, internally to the service . . . Most of the people . . . either they’re estranged from family already or some of those relationships are not healthy . . . the starting point’s not always great.” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

“we think that’s [facilitating family visits] really important . . . You’d think that that relationship will never mend but, a lot of the times, it can mend . . . we’ve had quite a lot of success rates in that.” (Hostel worker, faith-based, young people, small hostel)

That the possibility of positive external relationships is often discounted, was lamented by some hostel staff on the grounds that such relationships can hold greater transformative potential to those that occur internal to the hostel. Here, one hostel manager describes the positive impact of an external relationship (albeit that building this relationship still required a degree of pleading and a move beyond the hostel environment).

“she . . . met a boy, and I’ve never seen a change in a lassie, ever, like that . . . [when] she’d been going out with him for eight months. I said to her, ‘Well, I tell you what, there’s a vacancy in the flat. Give me a good reason why I should give you a flat and then he can stay with you overnight’ . . . So she did, she plead her case, put her up in her flat, and I have never seen anybody blossom so much in their flat.” (Hostel manger, faith-based, young people, small hostel)

Most often, though, hostels functioned to disrupt relationships because of the significant limitations they place on meeting and spending time with people, even where those people are nearby. Some services, for example, do not permit visitors at all. Indeed, James suggested that were a visitor to call to some hostels, this might well be punishable by exclusion.

“A lot of places you . . . could lose your bed for someone knocking on the door, . . . actually lose your place in the hostel . . . there’s no visitors or owt like that, you

just kind of keep to yourself.” (James, harm reduction-oriented hostel, shared rooms)

Residents pointed to several further issues that function to disincentivise visits, even where they are permitted. They suggested that most hostels restrict visits to a given area, often one for broad communal use, meaning that privacy was generally very limited or non-existent.

“this is the horrible part about it [staying in the hostel], if family come in, they can only go in the front room, and that's not really nice, so we have to go and sit outside.” (Evelyn, psychology-oriented, medium hostel)

Other residents spoke about the need to think about how other hostel residents would be impacted by external relationships, with his being true even where external relationships were positive. Indeed, one resident felt that the need to consider the feelings (or potential responses) of other residents was actively eroding her motivation to maintain a relationship with her children:

“we're allowed our parents or our kids to come down but because some girls don't get to see their kids it makes it awkward for other girls. So you have to go away somewhere else to see them . . . I just want to stay in the house and not relapse and then I have to go and see my kids somewhere, that's taking me out of that comfort zone so I don't really want to go and see them.” (Helena, faith-based, abstinence-oriented, women only, small hostel)

Many residents lamented the detrimental impact that hostels had on their role as a parent. Children are most often not permitted on premises, they explained, and even where they are permitted, hostels were rarely considered an appropriate place for their children. What parents wanted was a settled home of their own where they could build or repair relationship with their children:

“The only thing that's stopping me having my kids is because I've not got a house . . . My kids are dying to come back . . . they're, 'Mum, when are you getting a house?' . . . so I went 'It'll take time but mummy will try and get a house.'” (Jenny, faith-based, abstinence-oriented, women only, small hostel)

Hostels, then, are not particularly conducive to wider social inclusion in that they have a deleterious impact on existing social connections, but what of the assertion that hostels have a tendency towards exclusion? The phenomenon of abandonment was posited by some non-providers as evidence of this tendency. However, when providers and

managers discussed abandonment, they generally figured it as a (regrettable) anomaly of hostel provision, one thought to arise from the abandoning individual's innate discomfort around others, rather than one generated by the hostel environment itself. In any case, abandonment was, some suggested, a minority experience and one of secondary importance to a postulated majority experience that was more positive in tenor:

“I think you get some clients who might not feel comfortable living around other people . . . [Of] the residents now . . . I think one of them here would . . . maybe [be] feeling a bit threatened by living with certain other people . . . I definitely recognise it . . . but for most of the clients . . . the sense of belonging is more present.” (Hostel manager, psychology-oriented, small hostel)

A few hostel staff suggested that abandonment occurs because of external pulls (women returning to abusive relationships, for example). In this postulation the generative mechanisms of abandonment are unconnected to the hostel environment and thus considered largely impervious to preventative efforts on the part of the provider and staff team. However, hostel staff also pointed to several internal pushes. Hostels, they suggested, can overwhelm people in terms of unwanted social interactions and excessive sensory processing demands. This chimed with the experiences of people resident in hostel accommodation, who often reported struggling with the level and complexity of social interactions within the hostel setting and the onerous responsibilities of congregate living. Kieran explained that he found hostel life . . .

“difficult, especially with my temper, my mental health, and things . . . I have to communicate and be civil, and do what I can to respect other residents, as well as the staff and myself, and the safety of everyone else, as well as myself as well . . . it's too much.” (Kieran, psychology-oriented, medium hostel)

Hostel residents also described experiences where staff (and peers) were ill-equipped to understand and respond supportively to issues that might overwhelm people. Here, Melissa explains:

“someone with autism came in here and . . . staff told me that they didn't know very much about autism . . . I just think it would be a good help if the members of staff can learn about . . . different conditions because . . . staff didn't know really how to handle the situation . . . the people in [here] . . . should have been taught [too] . . . because . . . we could be doing things that are triggering and that's not fair on that person.” (Melissa, faith-based, young people, small hostel)

Hostels staff suggested that hostels can also be experienced as frightening and intimidating places. This was thought particularly common amongst those entering a hostel for the first time, but was also true for some who have had previous hostel stays:

“it's rare [that] we would get someone who is first-time homeless . . . [but] we have on occasion, and people moving in are terrified.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

“[People who] are long-term in the services . . . They're going to leave by their own accord . . . because they had a bad experience in hostels. They were maybe beaten, they were bullied, stuff was taken from them . . . You have people who have debts . . . It's a very bad situation.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

The testimony of hostel residents confirmed this suggestion, with several describing the first time in a new hostel, as frightening and unsettling, while others detailed experiences in hostel accommodation, which were so frightening that sleeping rough was considered preferable:

“even the smell and things are different, it doesn't smell like your house, it's not your house, it's not your same room, it's not your stuff . . . It can be quite scary.” (Melissa, faith based, young people, small hostel)

“I'd feel safer on the street . . . you've got so many people, and they've got sicknesses, they're ill, they've got different things wrong with them. There's loads of us in here like that. You understand?” (Chris, psychology-oriented, medium hostel)

People can be so overwhelmed by the demands of the hostel environment, or so frightened, that they self-exclude from services, choosing to abandon or avoid hostels instead.

Hostel providers (despite their emphasis on inclusion) were particularly firm in their assertions that, where an individual poses a threat to the hostel community or the individuals that constitute that community, the greater good must prevail, with exclusion being considered necessary for safety. Exclusion might equally be warranted if an individual destabilises community cohesion, some suggested, or undermines its proposed transformative potential. Hostel managers and workers tended to be more circumspect when laying out grounds for exclusion, albeit that they also figured exclusion as

necessary. Violent or intimidating behaviour, drug dealing and passing, or (significant) damage to property, were the primary (and often only) warranted exclusions, particularly in the view of harm reduction and psychology-oriented staff:

“in my head there are justifiable reasons for a person to be excluded; one is aggressive behaviour and bullying, and the second is drug dealing. Those are the only reasons I would ban someone from the service, that's my opinion.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

Abstinence-oriented staff tended to place greater emphasis on threats to service ethos when describing grounds for exclusion, suggesting that consumption of substances would always warrant exclusion:

“there's only two reasons we would ask anybody to leave really and that's if they pick up a drink or a drug . . . We have full abstinence. We are a recovery programme . . . we have a dry house.” (Hostel worker, faith-based, abstinence-oriented, men only, medium hostel)

When discussing exclusion in the abstract, informants were generally opposed to the notion of exclusion as punishment, on the basis that behaviours ought to be explored and understood, or in the knowledge that exclusion has (often acutely) harmful outcomes. Yet, in concrete descriptions of exclusion in practice, hostel staff often detailed an implicit (and occasionally explicit) punitive purpose:

“what we were doing by moving him [to a different hostel] was trying to say, it's not okay . . . there's going to be like a punishment where you're going to have to start again. That . . . is messy and it's something that we're trying to think about.” (Hostel manager, psychology-oriented, various hostels)

Hostel managers and staff also suggested that exclusion was sometimes important (necessary even), not only because individual conduct might warrant some form of sanction, but because unsanctioned behaviours can negatively influence community behaviour and norms, and in doing so cede control away from staff to hostel residents:

“it's essentially like control . . . if you have three staff on the shift and you have people who are chaotic . . . if somebody is doing something which is wrong and is repeating it, better that the person is excluded . . . the person will start to think about their own actions, and other people will maybe start thinking about their own

actions, so there is going to be some kind of order in the service.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

The notion of exclusion as a motivator for behavioural order in others as well as, or even instead of, the person sanctioned themselves, was of such importance that exclusion might be considered necessary even where it acts to disrupt imminent exit from homelessness:

“[Someone] did something quite violent . . . bitten someone or something, and instead of evicting, he [the manager] said . . . ‘she’s got another move-on coming up in five days. I’m just going to hold her till then’. He . . . made a fundamental error. There was like nine violent incidents after that, because people were, oh, but you didn’t evict her, so it’s fine.” (Hostel manager, psychology-oriented, various hostels)

The motivating potential of exclusion was particularly valued in abstinence-oriented services, who tended to present exclusion as a necessary component of their service model. In part this was simply because sustaining an abstinent environment demands the exclusion of non-abstinent residents, with failure to do so imperilling others.

“It’s [remaining in service] just not an option . . . If [we were] to overlook one or two . . . it risks the next person.” (Key informant, voluntary sector, hostel provider)

Providers and managers of abstinence-oriented services also viewed any wavering on the enforcement of exclusion (in response to substance-use) as undermining the premise of the service model. That is, that the threat of exclusion acts as an extrinsic motivator where intrinsic motivation is absent or underdeveloped, with the theory being that intrinsic impetus will develop in time, and the need for extrinsic compulsion will diminish accordingly.

“our model would be . . . at the beginning of their stay they might be not going out to have a drink because . . . that could jeopardise their stay . . . [but] working towards them realising I don’t want to have a drink because actually I’ve got hope for my future . . . and my recovery’s really important to me . . . rather than that there’s a consequence.” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

In this context providers and managers felt that it was important that people know and understand that the threat exclusion can and will be actualised, because in the absence of real exclusion, threats lose their motivating force:

“the impact [of not excluding] on the community and the other people living here is too great . . . [it] sends a message to other people that actually that boundary isn't [real].” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

Although abstinence-oriented providers and managers viewed exclusion as necessary, they were also cognisant of its harmful impact, describing it as . . .

“one of the most horrific things . . . It's more extreme when people have . . . for the first time ever experienced this type of care and love . . . they're coming back to the door . . . they're quite childlike . . . they're missing it that much and so the hurt and the missing can come out in a bit of anger . . . it's life and death to them. We've all lost count of the amount of funerals we've been to . . . that's the reality, so it's not a game.” (Hostel manager, faith-based, abstinence-oriented, men only, medium hostel)

The primary means, here, of addressing the harm of exclusion was to rigorously evaluate the likelihood of an individual sustaining abstinence *prior* to admitting that individual to services, thus reducing the prospect of having to actualise threats of exclusion. Such evaluation involved a “*long assessment process*” with a focus on appraising individual motives for “*signing up to be in a dry environment*”. As one manager explained,

“Do they want to come because of the accommodation itself, or do they want to come because of the support attached to it and because they really want to change their life?” (Hostel manager, psychology-oriented, small hostel)

Here, the therapeutic agenda of abstinence-oriented hostels rubbed uncomfortably against the coexisting housing agenda. Predicting who will succeed or fail in therapeutic programmes - always already difficult - becomes acutely problematic when people want (and very obviously need) access to shelter. That people agree to conditions of stay that they do not want or are unable to observe, to obtain shelter, was a phenomenon acknowledged by all abstinence-oriented informants, including hostel providers:

“sometimes people know what to say! People know how to present . . . [the] real test is after they've moved in . . . People can surprise you!” (Hostel manager, faith-based, abstinence-oriented, women only, small hostel)

“Some people are drawn to [our addiction recovery service] . . . because of need, others are like interested just because they need a - want a place to stay.” (Key informant, voluntary sector, hostel provider)

Several non-hostel providers viewed this phenomenon as a necessary outcome of the “*marriage of health and homelessness*” evident in treatment first accommodation services, (Key informant voluntary sector, hostel provider) and as a profoundly problematic one where peoples’ options for obtaining shelter are so limited that they feel compelled to engage in therapeutic programmes:

“It should not be something that you're compelled to have to go into by virtue of the fact that you're broke . . . I should not have to withstand a therapeutic community, just because I am poor . . . it's not fair to co-mingle those missions . . . If in any way it's compelled upon them, because that's the only way that they get a place to sleep, that's bad . . . there's no service that's provided . . . that would not be better and more effective, if used voluntarily by a person who . . . was not compelled to be in these programmes . . . in an unequal power relationship . . . relative to their accommodation.” (Key informant, academic)

Hostel staff consistently suggested that exclusions that are necessary in the hostel environment, would not (for the most part) be necessary in self-contained accommodation, because behaviour considered (valid) grounds for exclusion from a hostel are most often premised on the harm such behaviour causes to other residents. In the absence of other residents, similar behaviours would not preclude access to support.

“if someone uses substances and lapses and I'm providing an addiction service in the community that's fine, I will keep supporting you . . . [I]f your behaviour's really aggressive to me . . . [or] you pose a threat to me . . . we'll be like cool, we'll double work you, . . . but you can't do that [in the hostel].” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

Here, trusted relationships (posited by most providers as the foundation of all beneficial outcomes) could and likely would continue to be fostered were it not for the communal nature of the hostel setting. A few hostel workers went further by arguing that behaviours considered (valid) grounds for exclusion, are often generated (rather than simply punished) by hostel accommodation, with proximity to others fuelling behaviour punishable by exclusion. One hostel manager, for example, described a decrease in the use of exclusion following a hostel decant to more spacious premises:

“[We excluded people] a wee bit more in the old [hostel] because people were on top of each other . . . it was just the logistics of that building . . . [We] would have used time out a bit more . . . [whereas] now, people have . . . their own private space . . . they’re not on top of each other.” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

Hostel residents agreed that hostels often generate behaviours punishable by exclusion. Joe, for example, spoke at length about the impact of hostel living on his state of mind and how the associated stress sometimes manifested in him being “*rude and abrupt to staff*” which, he said, was met with summary eviction:

“[I] got into a state where I was . . . it's the same sort of scenario there [as in my current hostel] . . . I was getting kept awake every night [by other residents], I was quite erratic on drug use. It felt like there was no one there to help and support . . . it just felt like it was getting worse rather [than] getting better so then, yes, I got into an argument with the manager, and she just evicted me straight away . . . it was an immediate, immediate eviction.” (Joe, psychology-oriented, medium hostel)

Several hostel residents described how their mental health had been impacted - sometimes “*severely*” – by living under constant threat of eviction, with the absence of meaningful recourse in the event of wrongful exclusion acting to compound a sense of helplessness:

“you're constantly on edge . . . worrying . . . because something could happen that you're not the cause of that will cause you to lose your bed. You could just be in the wrong place at the wrong time and trouble kicks off. . . you constantly have that stress of, am I going to lose my bed over something silly.” (James, harm-reduction oriented, shared, medium hostel)

A core difficulty here is that exclusion and the threat of exclusion must be reconciled with the fact that hostel providers and workers consistently put forward the view that housing security is fundamental to wellbeing and foundational to therapeutic interventions.

“people who've experienced complex trauma need to . . . be able to move on when they're ready to move on . . . [they need] a place that feels safe . . . that's not about to be removed from you.” (Hostel worker, faith-based, abstinence-oriented, women only, small hostel)

The concluding section looks at how hostel staff negotiated this tension between the importance of inclusion and the harms of exclusion.

7.3 Navigating the Inclusion-Exclusion Hypothesis

People who are excluded from homelessness services are sometimes (perhaps even often) returned to the most acute forms of homelessness (such as rough sleeping and shelter use), with hostel supports also being brought to an abrupt end. As one non-provider informant noted:

“What made me very nervous, is the high amount of people . . . leaving unplanned, leaving for disciplinary reasons . . . there is so much effort in developing a support plan . . . [and] personalised help and then they are thrown out, and then it’s finished.” (Key informant, academic)

Hostel staff acknowledged that summary exclusion occurs but were generally uncomfortable with how this form of exclusion sits against the value placed on inclusion. Many sought, where possible, to avoid exclusion entirely, with this being particularly true of harm reduction and psychology-oriented hostels. The drive to avoid exclusion was often premised on a posited association between behaviours that might warrant exclusion, and behaviours associated with the outworking of adversity and trauma. Such behaviours really ought to be understood rather than punished, staff suggested. This was true across all hostels but was particularly pronounced in those oriented toward psychology, largely because of the weight ascribed to relational attachments and the harms associated with *“rupturing that attachment”* (Hostel manager, psychology-oriented, large hostel).

There was, though, a tension here between avoiding exclusion and protecting other hostel residents from harm. In exploring this tension, most hostel managers and staff expressed a preference for middle-path exclusions, which aim to neither completely avoid nor fully enforce exclusion.

“We don't do it . . . excluding them out on to the street . . . There's something about . . . making someone automatically vulnerable . . . remembering why you took them off the street in the first place, so all those risks presented whilst on the street are what we are handing to them, there's a little bit of that I'm not okay with.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

In practice this middle-path compromise often gave rise to the use of partial or transfer exclusions. The partial exclusion was a temporary exclusion from hostel premises where the intention was to allow re-entry. As one hostel manager explained, people with *“extremely challenging”* behaviour might be excluded *“during the daytime, a lot of the time”*, with partial exclusion here being viewed as *“one of the main ways to keep a roof*

over someone's head, but to limit the impact on other residents" (Hostel manager, psychology-oriented, small hostel). The transfer exclusion was a permanent exclusion where transfer to an alternative hostel is facilitated. Most hostel staff suggested that transfer exclusions are a highly recognisable component of the hostel sector; hostels often do *"a lot of moving people around . . . as a way to limit impact on other people"*. One hostel manager explained how the Covid-19 pandemic had brought a temporary halt to transfer exclusions across the hostel sector. In the absence of transfer as a risk management tool, the safety of residents was undermined, they suggested, and demands on staff time increased:

"if you need someone to leave due to maybe verbal aggression or physical . . . we can't just ring up [now] and get them into another hostel, so that puts an enormous strain on the staff . . . if somebody was attacked in the service from another person, and that person is still in the service . . . the person is not going to feel safe."
(Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

In describing transfer exclusions, informants did not refer to or account for the (potential) impact of such transfers on other services, including the (potential) increase in risk to residents in the receiving hostel, with this being true even where exclusion was occasioned by physical aggression and violence. This suggests that if hostel accommodation is (in part) a repository of pre-existing risk, it is (at least in some measure) an outcome of this purposeful transfer of risk between and around services.

Conclusions

This chapter has illuminated that hostels are intended to foster (wider) social inclusion but are ill-suited to this purpose, having a clear countertendency to limit existing relationships and to impede the development of new social networks that are unconnected to, or unsanctioned by, the hostel.

It has also demonstrated that hostels foster (narrow) internal inclusion, meaning inclusion within the hostel community. Hostel managers often reported that internal inclusion is central to their theory of change, positing that the development of positive relational attachments (internal to the hostel) is therapeutically beneficial, particularly for those who have experienced trauma, and that such attachments build (in time) to wider social integration. Hostel workers and resident testimony did not challenge the idea that relational attachments can (sometimes) be therapeutically beneficial, but they did problematise the role of internal inclusion, illuminating a range of expressly detrimental

outcomes: including negative peer affects, traumatic social interactions, and experiences of loss and harm.

The key point here is that internal inclusion does not have a necessarily positive valence. If internal inclusion is to produce beneficial outcomes, it requires purposeful (and resource intensive) construction on the part of the provider and staff. Crucially, even where this construction is broadly successful, allowing for internal inclusion to be experienced as positive by (some) hostel residents, it has a highly recognisable tendency to produce resistance to planning for move-on from hostel living. Even proponents of internal inclusion tend to express misgivings about the capacity of hostels to actualise the (desired) final movement from inclusion in hostel life to wider social inclusion within a regular community. I would argue that this arises (at least in part) from the interaction between two key generative mechanisms at play in hostel accommodation, one which functions to diminish wider social networks and one which functions to foster attachment to the hostel community. Here, it seems reasonable to conclude that hostels cause (at least some) people to become increasingly excluded from wider society while simultaneously increasing dependence on the hostel community (against the independence hypothesis), thereby creating the phenomena of ‘stuck people’ postulated by some non-provider respondents.

This chapter also considered the exclusion hypothesis, presenting evidence to demonstrate that hostels purposefully exclude people from services. The possibility of exclusion is sometimes intended to act as an extrinsic motivator where intrinsic motivation is absent or insufficient, with housing insecurity deployed as a tool for behavioural management, and modification, including the behaviour of the evictee and those who are witness to the eviction. Exclusion (and the threat of exclusion) was considered by most respondents as necessary for the generation of safer environmental conditions (see chapter 5): if the generative mechanisms of harm within hostel accommodation are to be mitigated, exclusion is necessary. However, in considering the value of internal inclusion, the ending of (even the most positive) hostel stays were generally thought to require sensitive and consensual planning.

If we take seriously the assertion that relational attachment(s) are necessary to therapeutic interventions and more broadly to movement away from homelessness, then avoiding the traumatic rupturing of established relational attachments takes on a vital importance.

Where the trauma that hostels seek to address has its origins in (earlier) disrupted or stunted relational attachments, it seems reasonable to posit that hostels may (in the act of exclusion) be generative of such trauma where it is absent and compounding of such where it is pre-existing. This generates a complex tension in which exclusion is at once necessary for, and anathema to, core intended outcomes of hostel accommodation, particularly those of safety and inclusion.

Most hostel workers were cognisant of this tension and attempted to soften the trauma of summary exclusion by using partial or transfer exclusions. I would argue that partial retention within services and movement between hostels functions to obscure the unsuitability of hostel accommodation, for some, displacing people into an often-complex web of services and fuelling their movement around the same. At the same time, it is likely to be generating and augmenting the trauma that is generative of homelessness and that is considered by some to be necessitating of treatment first, thereby entrenching people within homelessness.

Chapter 8: The Progress-Entrenchment (Meta) Tension

Introduction

This chapter explores the meta-tension between conceptions of hostels as places that enable people to progress in a positive sense and opposing beliefs that figure hostel accommodation as generative of entrenchment, including entrenchment of the individual in homelessness and the entrenchment of the homelessness sector in the provision of hostels. The two main sections explore each hypothesis in turn. They do so by interweaving the testimony of all informants, drawing together the threads of the overarching arguments about the fundamental nature and contribution of hostels, rather than separating and clarifying components in the style of preceding chapters. In doing so this chapter aims to account for the continued dominance of hostels, despite the complex contradictions they embody.

8.1 The Progress Hypothesis

Some national key informants (both provider and non-provider) proposed that the homelessness sector is often impotent in the face of wider social structures. In this figuring, the hostel sector might be thought of as doing its best (despite any failings), considering the overwhelming forces it contends with but cannot control. As one academic informant conceived it, the homelessness sector is:

“... a mouse in bed with the elephant. The bigger social welfare programmes, the market forces, even bigger than that, labour market forces . . . even minor crisis in that . . . can overwhelm the homeless system very quickly . . . we don't control those things . . . we can't bail the boat faster than it's getting filled, and that's the basic math of that problem.” (Key informant, academic)

Hostel sector umbrella bodies tended to suggest that hostel providers have limited responsibility for hostel outcomes because they are simply delivering on the intent of (more powerful) others and are in any case powerless to deliver on the housing needed to enable exit from homelessness:

“I'm under no illusions how bad some hostels are and . . . a lot of [hostel providers] would also say, we would rather not be providing this . . . we're stuck in this cycle of this is what we've got, this is what we're being asked to deliver by our commissioners, so we may as well do it. . . because that's what they're asked to do, that's where the funding is.” (Key informant, homelessness sector, umbrella body)

“[we] cannot blame the hostel sector for not being able to organise the outflow into housing if housing is just not available.” (Key informant, homelessness sector, umbrella body)

Running alongside this argument, was the suggestion that if hostels are less ideal, it is only because they are under-valued and inadequately resourced:

“they can be much better than they are . . . [hostels are] being undermined . . . by lack of proper evidence. . . [and] revenue . . . it almost feels a bit unfair . . . providers . . . [are] very aware of what's wrong with [hostels] . . . they'd like to be doing things better but such is the environment we're in.” (Key informant, homelessness sector, umbrella body)

If only hostels were adequately resourced, those advocating for this position argued, their true potential could be realised and evidenced. Moreover, such resourcing would not even be necessary if a sufficient supply of affordable housing were to be made available, because access to housing would generate a corresponding (and organically occurring) dissolution of the hostel sector:

“This idea that you have to solve problems in the shelter sector before people can be housed . . . is an idea that can change quite easily if you can make sure that sufficient housing is available.” (Key informant, homelessness sector, umbrella body)

Some informants were, however, anxious about movement away from hostels. Even if hostels are less than ideal, they argued, things would likely be worse in their absence. It followed, then, that aspects of the existing hostel system ought to *always* be retained, even if only to guard against something worse:

“larger hostels have been closing and that's positive but, yes, what does it leave in its wake?” (Key informant, voluntary sector, hostel provider)

“[the] risk about disowning hostels . . . is you have the Housing First over here and then shelters . . . if we don't keep some of the system we've got, we're just going to revert back to the shelter side.” (Key informant, homelessness sector, umbrella body)

However, the figuring of providers as reluctantly offering hostels, or as hampered by lack of funds in the realisation of their full potential, rubbed uncomfortably against the

reasoning of most providers, who consistently pulled toward the defence or concretisation of established hostel provision based on its *existing* efficacy. For most providers, hostels (meaning their own provision) are *already* effective, so much so that even if a sufficient supply of affordable housing were to be made available, they would continue to offer hostel accommodation. As one informant explained:

“[we have] seen countless lives changed in shared accommodation in a way that . . . doesn't happen in single-tenancy accommodation . . . significant life change can take place within a shared environment . . . skills, confidence, recovery, healing, new opportunities . . . that is distinct to what can happen in a more general community.” (Key informant voluntary sector, hostel provider)

The “life change” described above is the outcome of the progress hypothesis. As postulated by providers, this hypothesis argues that hostels function to create (unique) conditions that are conducive to and enabling of personal progress, with this progress often being figured as a “*journey*”:

“our communities play a positive role in being a bridge between a tough reality and a sense of transformation . . . there's a deliberate journey, set by the individual themselves not by us, from a place of difficulty to a place of being able to take on the opportunities of life.” (Key informant voluntary sector, hostel provider)

The idea underpinning the progress hypothesis is that “*you are on the way to something else . . . to something better*” (Key informant, homelessness sector, umbrella body). Most providers postulated the central difference between “*unhelpful*” and “*helpful*” hostels as revolving around their enabling (or otherwise) of progress: poorer hostels produce a state of stasis by “*warehousing*” or “*holding*” people, while better hostels generate movement by “*transforming*” and “*progressing*” people. The generative mechanisms of transformation were multiple and diverse but could generally be located under the rubric of relational approaches, with faith-based providers often prioritising spiritual relationship:

“The best analogy I would have for it [the hostel] would be a greenhouse, so it concentrates love, which for us is God's love, concentrated into people's lives for a period that can result in healing.” (Key informant voluntary sector, hostel provider)

Most hostel staff agreed, in principle, that hostels are intended to support people to move forward and progress in a positive manner:

“the person who moves forward, that's what we're trying to sell, that's what we're trying to say we can do. You can move in here and we can help you move forward.”

(Hostel manager, psychology-oriented, various hostels)

And the idea of progress chimes with the aspirations of most hostel residents, with many being highly desirous of positive progress away from homelessness (albeit that they tended to figure this movement as one of returning to their former self):

“I'm just wanting to get back to college and just being a mum again and getting a good [job] . . . I've totally got a plan!” (Helena, faith-based, abstinence-oriented, women only, small hostel)

“I'm waiting for the detox and rehab again. After that, I'm going back to my construction course, get my driving licence back, get my business back and go back to work. Then get married to the woman of my dreams!” (Kieran, psychology-oriented, medium hostel)

One hostel resident felt that the support they received in their hostel *had* helped them envisage their “*future a wee bit more clearly*” (Melissa, faith-based, abstinence-oriented, young people, small), but most were of the view that planning for the future was problematised rather than enabled by hostel living:

“it's hard but you just try your best . . . you can't really plan for anything because you do and more than likely something is going to happen to mess up those plans.”

(James, harm reduction-oriented, shared room, large hostel)

There was, though, a consensus amongst hostel staff that some people *do* successfully move on from hostel accommodation, but whether success can be directly (causally) attributed to hostel accommodation stays was always unclear. There was also consensus that some people *do not* move on from homelessness. How to position and account for the latter group who fail to ‘progress’ was considered profoundly disconcerting to the sector:

“. . . the people who don't do that [move forward] or who backslide or . . . [who go] through the revolving door, or . . . never really seems to get better. They are like the thorn in our [the hostel sector] side, like [we say] shush . . . no, no, no, but they're non engagers, like it's their fault, rather than saying well actually what's not

working for them in this system.” (Hostel manager, psychology-oriented, various hostels)

This phenomenon, of attributing lack of progress to individual pathology, rather than any inadequacy in hostel provision, often emerged front and centre of provider responses, and figured at times in the testimony of hostel staff:

“[If] somebody is grappling with a whole series of circumstances in their lives that have led them to [homelessness] . . . it ceases to be about the accommodation [and is about] creating the space for people to heal and flourish.” (Key informant voluntary sector, hostel provider)

“I don't know that I agree with this concept of exiting homelessness . . . homelessness is a symptom of the problem, and the problem is complex trauma, and you don't ever exit from that . . . We're not talking about a housing problem. We're talking about a trauma problem that homelessness happens to be a symptom of . . . a homeless service is . . . [a complex trauma] service.” (Hostel manager, psychology-oriented, large hostel)

For hostel providers and most hostel staff the ‘transformative’ journey, then, is one that often occurs (at least in the first instance) at the psychological level (of the individual) and is one that is enabled by the psychosocial interventions of the given hostel. Transformation at a socioeconomic level is relegated as being of lesser concern (or beyond provider control), if even considered.

Academics were critical of this leaning toward individual pathology, on two counts. First, they considered the emphasis inaccurate, suggesting that one of the common experiences uniting residents of hostel accommodation is poverty. Several hostel staff agreed:

“This is a class issue. We've got no middle-class folks in here [the hostel]. There isn't anybody earning loads of money and . . . living in a hostel.” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

Second, academics and some hostel staff suggested that figurations of homelessness that lean toward ‘pathology first’, feed a particular framing of people who are homeless as being defective or incapable, so that cycling around hostels:

“seems absolutely fine . . . because you couldn't give them a house . . . so sure, big deal: if they're not there [in the hostel], they'd be in prison or in a psychiatric hospital.” (Key informant, academic)

“The biggest problem we have is identifying and seeing people that have been round every hostel in [this country] . . . [so] you end up with “the poor are always with us” sort of argument.” (Hostel manager, harm-reduction oriented, substance use permitted, medium hostel)

The second half of this chapter moves to look more closely at why entrenchment is recognised as an inevitable outcome of hostel accommodation, yet one that providers continue to view as causally unconnected to hostels.

8.2 The Entrenchment Hypothesis

Non-provider testimony, when considered collectively, allows for the sketching of an overarching entrenchment hypothesis, which covers both the entrenchment of the individual in homelessness, and the entrenchment of the homelessness sector in the provision of hostels. Both forms of entrenchment, I will argue, go some way to explaining why providers might be inclined to live with some of the tensions and contradictions of hostel accommodation.

Non-providers suggested that an inadequate supply of affordable housing generates a risk of rough sleeping and an associated need for shelter. Where rough sleeping is imminent or visibly occurring, an impetus to develop shelter-based responses is often generated. Such responses may be led by the state as part of a strategic response to homelessness or as an ad-hoc response to a given crisis or surges in public demand; or they may be led by voluntary and faith-based organisations, or even by concerned individuals. These responses, they suggested, are shaped by the nature and form of existing structures (a point often echoed by provider informants).

“the point about hostels that's worth making is what they are, and where they are, is often a complete historical accident. Certainly, if you were starting from scratch, very few of the things that we call hostels now, you wouldn't necessarily set off . . . to create them.” (Key informant, voluntary sector, hostel provider)

Responses may also be influenced by what feels intuitively or instinctively right (the common-sense approach) but such responses often reveal themselves as flawed (with the benefit of hindsight and enhanced knowledge), with this being a phenomenon of particular concern to commissioners.

“I think it's [the hostel sector] probably grown . . . [because] you think about homelessness and the obvious response is that people need somewhere to live. The

provision of accommodation seems like the best and most obvious solution to that. I think it's only people that have worked [in the sector] often . . . for years and years and years that really deeply understand that we don't want people in temporary accommodation. That isn't the best thing for them.” (Key informant, commissioner)

Irrespective of where the impetus arises – at state, organisation, or individual level – the provision of services generates interest groups, including people who use services; people who staff and volunteer in services; organisations who provide services; and commissioners who commission services.

Most non-provider informants proposed that these interest groups (and indeed the wider public) are influenced by normative values about people who are homeless: received opinions of who they are, their individual choices and preferences, what they want and deserve, and what their individual capabilities are. These values are often formed and viewed through ideological prisms, including, for example, faith-based notions of the intractable nature of poverty and the associated eternal existence of the poor. Where normative values position (some) homeless people as deviant or irrevocably damaged, rudimentary services - such as soup kitchens, street outreach services and night shelters – may be considered sufficient:

“I think that the primary driver is an understanding of homelessness as a form of deviancy or damaged people, so the appropriate response there is to get them in off the street and provide them with rudimentary facilities.” (Key informant, academic)

Other framings position (some) homeless people as deserving and, in this understanding, (particularly in the absence of timely access to regular housing) any advance on rudimentary services becomes a sought for and celebrated improvement, in so far as it is ‘better than’ the existing offering. This continuous improvement logic functions to create an ‘evolutionary’ momentum whereby staff and provider efforts (and resources) coalesce around the shortcomings of rudimentary responses. Non-diversified responses where all groups are accommodated together – singles and families, men, and women, young and old – emerge as less than ideal (for example) and so the need to ensure adequate diversification, with differentiated responses for different groupings, creates a further spur toward action. Where successful, this action will generate policy responses and income streams, which in turn allows for increases in staffing and associated structures,

including the accumulation of significant material artefacts (buildings, for example) and the more ephemeral structures underpinning status and influence (board membership, for example).

Some informants suggested that, where the evolutionary momentum fails to address the originating need (inadequate supply of affordable housing), efforts tend toward an exponential diversification of services, often by type - the assessment hub, the crisis shelter, the specialist hostel, the training apartment, and so on.

“you cannot put all people in the same type of hostel accommodation, you cannot put women and men together, you have to . . . provide separate accommodation for young and old, people with dogs, people with mental health and you diverse on . . . the profile of the person. Then . . . we have to create a system where people make progress . . . [so] they can move to different types of accommodation, if they make progress on their mental health . . . their addiction . . . their relational problems, etc . . . and I think those things . . . [create] continued growth.” (Key informant, homelessness sector, umbrella body)

This way an illusion of progress can be created within an environment that would otherwise be static (a waiting room or substitute for permanent housing). This ‘progress illusion’ allows people who are motivated to deliver positive social interventions a means of (sometimes) doing so (in a form that is more so within their grasp than procuring affordable move-on housing).

This increasingly fine-grained diversification generates a complex web of responses, and with it a sizeable sector with significant socio-economic interests, with the evolutionary momentum taking on a seemingly relentless quality:

“it's really hard to turn around . . . there are some really big providers and they've built their whole business model around hostels . . . financially they'd have to make some big changes.” (Key informant, homelessness sector, umbrella body)

“to change the internal momentum of these institutions is very difficult. You have to focus on how they're funded.” (Key informant, academic)

That this momentum tends toward growth is particularly evident in the testimony of commissioners. One, for example, described having commissioned a hostel and shelter-based response to rough sleeping, with the intention that these responses would act as a temporary agitator for change – a “*system jolter*” - by illuminating gaps within the existing

system, including the perceived failings of other hostels. With these gaps and failings illuminated, the existing system would right itself, occasioning a reduction in demand, and a corresponding shrinkage of the sector:

“the purpose of it was almost to have a bit of a system jolter that says why are we not providing anything for people that are rough sleeping . . . to develop and move forward and push people back into the system in places that are better for them, rather than just kind of trying to get bigger and bigger. Ideally, we would want it to get smaller and smaller.” (Key informant, commissioner)

Instead, the commissioned response, they explained, showed steady and continuous growth, with an increasingly diversified and larger hostel offering, alongside growing demands for longer-term funding and increased job security for staff. Where such demands are met, a concretisation of the ground gained occurs and alongside this sense of permanency, path dependencies emerge:

“I think it [hostel accommodation] has become absolutely front and centre, to the detriment of better prevention and relief practice . . . [and] has really become seen as . . . the only solution/pathway for homelessness . . . working against that pattern of commissioning and go-to response to homelessness relief is really challenging, not least because of the lack of policy development in that space . . . the accommodation infrastructure challenges and because the funding . . . [is] tied up in welfare accommodation funding, so it's a natural response . . . to make.” (Key informant, commissioner)

Of course, policy approaches can produce shifts in the number and form of hostels, including overall reductions in provision. An increasing emphasis on homelessness prevention in England and Scotland, for example, including explicit moves to rapid rehousing and hostel decommissioning in the latter has achieved some shrinkage in the sector (Scottish Government 2020). Informants none-the-less consistently suggested that hostels occupy a particularly obdurate position in the context of responses to homelessness, often on account of their built infrastructure. As one provider informant noted:

“It's also definitely the case that . . . hostels have been harder things to cut by local government than say floating support and . . . Housing First. You can take the funding away from a Housing First service and nobody will really notice, but if you

close down a hostel you've got a big building sat there doing nothing . . . politically it's very difficult.” (Key informant, voluntary sector, hostel provider)

Some non-provider informants alleged that providers expend considerable energy in defending (and growing) this dependency, even in the face of failure, and that they are enabled to do so on account of the power and status they accumulate alongside their evolution:

“these organisations are very effective marketers and fundraisers for their cause. They have boards of directors that are stocked full of philanthropists, wealthy citizens, civic leaders, who have power and influence and go to bat for them all the time whenever they encounter any issues.” (Key informant, academic)

One provider described a deep tension between promoting services that are effective in addressing homelessness and advancing those that engage the public imagination in a way that inspires financial giving. Having established a new service, the provider lamented that its outcomes were poor and that, in short, the approach “*doesn't work*”. He continued,

“my goodness, it connected the public to homelessness, and it gets ten out of ten for that, but it also connects the public to a solution to homelessness that wasn't really a solution . . . [but] everybody loved it and people were going to cough up cash for it.” (Key informant, voluntary sector, hostel provider)

Where the wider public are connected to approaches that don't work it may generate considerable revenue streams but, according to non-providers, it also feeds the ideological prisms through which people who are homeless (and the homeless sector) are viewed and in doing so undermines efforts to dispel or counter erroneous assumptions that hamper more effective solutions.

“[providers are] incredible fundraising machines . . . keep giving me the money . . . for the thing that's going to pay me to keep doing what I'm doing . . . it undermines the really more effective civic education that we've done around the issue.” (Key informant, academic)

The cumulative evolutionary momentum of the sector (and its associated accoutrements) function in a way that pushes the original impetus (to address a lack of access to settled housing) into the background as – at most - a co-morbid issue of secondary concern. Hostels can emerge then as spaces intended to give people time “*to heal and flourish*”.

But as one provider suggested, this intention may instead function to produce people who are “*stuck and service-dependent*”, so that the hostel system “*perpetuates*” itself in generating a “*significant number [of people who] are too long in the system*” (Key informant, voluntary sector, hostel provider). Many frontline workers agreed:

“the problem is there are not enough places [regular housing], so you get people who are waiting . . . years on the list to get an apartment . . . They are moving from one hostel to another . . . changing one addiction with another . . . getting in fights, they're getting . . . exploited or they're bullied. . . The situation is, I would say, like a circle.” (Hostel worker, harm reduction-oriented, shared room, large hostel)

“With all the will in the world . . . social housing is like gold dust nowadays, very difficult to rehouse people . . . they're spending a longer time within a hostel . . . some people might come in with one addiction and might end up dabbling in other[s].” (Hostel worker, harm reduction-oriented, alcohol use permitted, medium hostel)

That significant numbers of people cycle around hostels in seeming perpetuity is a phenomenon recognised by all hostel informants - providers and staff - and one articulated by most hostel residents who participated in this study. All had had at least one previous hostel stay, with many describing repeat hostel placements spanning many years.

“I have been homeless now I'd say for give or take almost 12 to 13 years . . . I was spending six months at a time on the streets, and I'd get myself into a shelter or something and then just didn't feel comfortable, so I tend to be going back out on the streets again.” (Joe, psychology-oriented, medium hostel)

“I've covered [this area]! . . . There's not one [hostel] you could name that I don't know . . . seriously.” (David, psychology-oriented, medium hostel)

“I've been [in hostels] here, there, and everywhere. I've been in [area one] . . . , I've been in [area two] . . . , I've been in [area three] . . . , I've been in [area four]. . . , [area five] . . .” (Chris, psychology-oriented, medium hostel)

As established in chapter 7, people are not simply cycling between and around hostels of their own volition, they are often purposefully transferred between hostels by hostel providers and staff. While most providers and staff viewed this as a regrettable phenomenon, it was (for the most part) considered entirely justifiable, either on account of the need to protect others from harm, or on the basis that the alternatives (such as rough

sleeping) would likely be worse. Identifying common characteristics or traits that might allow for the early identification and separation of those likely to become entrenched might offer a way of halting this phenomenon. However, hostel staff suggested that early identification of this group was difficult (if not impossible), often attributing the futility of such filtering to the postulated uniqueness of all people (itself a seeming contradiction to the grouping principles that underpin diversification and specialisation within the hostel sector):

“It's very hard to group it [entrenchment] or say for one person because everyone's so different and their needs are so different . . . It really does depend on the individual.” (Hostel manager, harm reduction-oriented, shared room, large hostel)

The phenomenon of people cycling around hostels forms at least part of the demand for hostels and, as such, functions to justify their existence. Where patterns of cycling are established, and harms are incurred as a result, the need for the therapeutic work of hostel provision seems to grow, and as it does their focus on progress in the form of psychosocial transformation appears warranted and right. Even where the scale or harms of cycling raises concerns, viable accommodation alternatives are often elusive, with this lack then further driving the need to cycle between hostels.

Several hostel managers lamented an inability within the sector to *“stop talking about the problems that those clients [who don't progress] represent and start talking about how we could more helpfully house them”* (Hostel manager, psychology-oriented, various hostels). Here non-providers pointed to path dependence as the origins of this stasis, with several hostel managers agreeing:

“we'll have all these meetings with all the different organisations . . . and try and work out a goal . . . [but] all we can do is just try and spread [people] around so that you don't have other residents totally burn out and staff as well. There is no real options for them other than that [cycling between hostels].” (Hostel manager, harm reduction-oriented, shared room, large hostel)

“[Entrenchment] is inevitable . . . because there isn't enough alternative options here to challenge it [hostel provision] . . . [my organisation] set up that bloody [Rapid Rehousing] project and I've never heard anything about it [since], the Housing First that [another organisation] were involved in, I've never heard anything about that, same with the private rental schemes . . . [so] how do you

explore alternatives?” (Hostel worker, harm reduction-oriented, substance use permitted, medium hostel)

Providers tended to dismiss notions of path dependence, suggesting that alternative responses such as Rapid Rehousing and Housing First, are already enthusiastically accepted by providers and even advanced, albeit as a further diversification (a final rung on the ladder) of a system which continues to view hostels as logically prior to other options:

“Yes, let's argue for Housing First. We are the biggest provider for Housing First in [our area] so we are totally in favour [of] it but it's not an alternative, it's in addition to. Often, a lot of the people moving into Housing First are actually moving in having had a period of stability . . . in a hostel.” (Key informant, voluntary sector, hostel provider)

Conclusion

This chapter explored the progress hypothesis; this hypothesis argues that good hostels function to create conditions that are conducive to and enabling of personal progress, including progress away from homelessness. Some hostels may be hampered in this intent by wider social forces over which they have limited control, but other providers view the work of good hostels as highly effective in this regard and unique in the sense that they are irreplicable in non-hostel environments. The testimony of hostel staff supported this in the limited sense that (some) people do move on from hostels successfully, but their testimony – along with that of residents - also illuminated a cohort of people who *do not* exit homelessness, instead becoming entrenched within the hostel system.

This chapter also explored the entrenchment hypothesis. This hypothesis holds that the hostel sector is premised on a foundational belief that people ought to be offered shelter (see safety hypothesis) and is possessed of an evolutionary momentum that is driven by the value ascribed to individual progress (see progress hypothesis). This evolutionary momentum tends toward the concretisation, expansion, and specialisation of provision, that gathers to the sector significant socio-economic interests (spanning built and human infrastructure) that function to generate path dependence, effectively committing hostels to their given evolutionary trajectory while also drawing intellectual and material resources away from the development of alternatives. However, it is not simply that hostels persist because of an accumulated socio-economic legacy. The valuing of

progress in an environment that functions as an impediment to progress (for some), generates associated phenomena (such as entrenchment and transfer) that validate the role of hostel accommodation in the very simple sense of generating demand via footfall and length of stay. The components that function as an impediment to progress do so because they are generative of harm, and these harms generate patterns of human behaviour that confirm the need for the therapeutic work hostels often seek to undertake. This tips hostel provision toward a focus on individual pathology, not as an illusory focus but as a rational response to harm-associated needs and behaviours. The error of thinking here is in the attribution of healing properties to an environment that is generative of harm.

Chapter 9: Conclusion

Introduction

This research is set against a long-established body of knowledge about the harms of congregate responses to housing and health crises (Crowther 1991; Irving-Clarke 2019; Murphy 1991; O’Sullivan and O’Donnell 2012), but engages most fully with an expanding body of research that documents the harms associated with a particular form of congregate accommodation: the homeless hostel (Boyle and Pleace 2017; Busch-Geertsema and Sahlin 2007; Credland 2004; Dordick 2002; Fitzpatrick et al. 2010; Mackie, Johnsen, and Wood 2017; McMordie 2020; Mitchell et al. 2004; Watts et al. 2018; Watts and Blenkinsopp 2021; Watts et al. 2021).

Knowledge of the harms of congregate accommodation have prompted paradigm shifts in housing and health intervention in many sectors (Ridgeway and Zippel 1990) but have had a more muted impact on the homeless hostel, which remains ubiquitous across the United Kingdom and Ireland (Homeless Link 2018; O’Sullivan 2016; Watts et al. 2018). While few would deny the existence of harmful hostels, many continue to extol the impact of ‘good’ hostels, arguing that they play a unique and important role in resolving homelessness and associated support needs (Homeless Link 2018; St Mungo’s no date). This role is one that some argue cannot be replicated in Housing First, housing led, or rapid rehousing models, despite a growing consensus regarding the efficacy of these approaches (Boyle, Palmer and Ahmed 2016; Johnsen 2013; Padgett, Henwood and Tsemberis 2016).

This study took as its starting point this contested terrain. It set out to explore the intended outcomes of hostels (that is what phenomena hostels are intended to actualise) and to ask what exactly it is about hostels that is expected to bring about these intended outcomes (that is what causal mechanisms are postulated as being capable of actualising the intended phenomena of hostels). It also sought to explore the actual outcomes of hostels (that is what phenomena hostels actualise) and to ask what exactly it is about hostels that produces such outcomes (that is what the causal tendencies of hostels are and how these tendencies actualise hostel phenomena).

Critical realism acted as an under-labouring framework for this analysis, allowing for a distinction to be drawn between three ontological domains of reality – the real, the actual, and the empirical - with this stratified ontology then allowing for a close exploration of the divergence between the intended and actual outcomes of hostel accommodation

(Bhaskar 1979; 1993; 2016; Sayer 1992). This work of course builds on that of other critical realist scholars, who have applied its tenets to the sphere of homelessness (Fitzpatrick 2005; McNaughton-Nicholls 2010).

9.1 Main Findings

The critical realist approach as described above allowed for the identification of four ‘tensions’ arising between that which is intended and that which is actualised in hostel accommodation. Throughout this thesis the intended and actual outcomes have, therefore, been explored in tension with one another, but in this concluding chapter they are taken more fully out of their ‘tensions’ and considered (for the most part) in two separate groupings. This move allows for a consideration of intended outcomes in relation to one another (and so too for actual outcomes) but also provides a structure within which a direct response to each of the study’s core research questions may be offered. Research questions two and three (what are the intended outcomes of hostels and what exactly is it about hostels that is expected to bring about intended outcomes?) are answered in section 9.1.1. Research questions four and five (what are the actual outcomes of hostels and what exactly is it about hostels that produces such outcomes?) are answered in section 9.1.2. This separation also allows for a closer exploration of the studies final research question, which sought to explore what people are able to be and do in hostels (that is to what extent is human flourishing is possible), with the answer to this question coming into view through the concluding consideration of actual outcomes, again in section 9.1.2.

9.1.1: Intended outcomes and the generation of need

Hostel provider testimony suggested that it is important that hostels should actualise three outcomes, namely: safety, independence, and social inclusion. Other respondents agreed on the importance of these outcomes and there are substantial bodies of literature that support this view (Forsman et al. 2013; Frazier et al 2017; Nussbaum 2013). Each of these outcomes were considered important in a singular sense but they were also thought to function collectively to produce a meta-outcome, namely positive progress. We have sufficient reason, I would argue, to take seriously the importance providers place on these outcomes and to value living environments that enable their actualisation.

There was a difference between the importance ascribed to these intended outcomes and the priority they are given in the day-to-day work of hostel accommodation. Above all other intended outcomes, safety occupied pole position in hostel staff priorities; it was not only considered vital to human wellbeing but was also thought foundational to all

other outcomes. Without safety hostels hold limited (if any) potential to generate positive outcomes of any kind. This prioritisation was also informed by a sense that safety is vital in every moment, whereas independence and social inclusion (while always important) only become truly vital upon exit from hostel accommodation, where they are considered central to successful sustainment of (most) tenancy options.

Activities that foster social inclusion and independent living skills therefore tend to take on a subordinate ranking in terms of priority within the hostel; staff acknowledge their importance, but the immediacy of safety demands consumes much of their time and energy (bearing in mind that efforts toward safety must counter the tendency of hostel accommodation toward harm) (Lazarus and Folkman 1984). We can begin to see a schism, then, in the core intended outcomes between what holds priority in the context of hostel living (generating safety) and what is considered important in a successful exit from such environments (independence and social inclusion) (Parsell 2018).

It is not only that the fostering of social inclusion and independent living skills are low in staff priorities in the hostel setting; hostels also tend to restrict opportunities to exercise independent living skills and to engage with wider social networks (Nussbaum 2013). This does not mean that hostels cannot generate positive outcomes in these areas, but it does mean that doing so requires purposeful and resource intensive efforts that are steadfastly oriented against the necessary tendency of the hostels. In short, hostels are always already swimming upstream in the drive to generate independence and social inclusion, as by extension are those who are resident in hostel accommodation. Where independence and social inclusion are unexercised or curtailed, the true capabilities of people who are resident in hostels may remain unrecognised or underestimated (Lazarus and Folkman 1984).

This creates a movement where independence and social inclusion are thought necessary to successful exits from hostel accommodation but are thought so in an environment where such attributes are difficult to demonstrate (where they exist) and difficult to acquire (where they do not). The outcome of this movement is (in part) the generation of illusory need: people may appear less skilled in independent living or less socially connected than they are, with this (spurious) perception having a knock-on impact on how people view themselves and how they are viewed by others. This holds great significance in the context of attaining positive progress outcomes because both independent living skills and social inclusion are important factors when it comes to staff assessments of people's potential for successful exit from homelessness.

These needs are not always or only illusory: people often *are* less independent and less socially connected because of the limiting impact of the hostel environment - these needs are real but are contingent in the sense that they are generated by the environmental conditions of the hostel. This means that hostels actualise outcomes that are not only directly contrary to their intended outcomes (of independence and social inclusion) but are (at least in part) generative of the need and demand that informs these intentions in the first instance. This also opens the possibility that where hostels claim to have successfully addressed a lack of independence or social inclusion, it is possible that (at least some) of that lack may not have existed in alternative environments.

What we see, then, is that the core intended outcomes of providers (safety, independence, and social inclusion) are not necessary tendencies of hostel accommodation. Providers must diligently construct a set of environmental conditions that are (more) conducive to their generation. This would be a relatively resource intensive process in environmental conditions that were broadly neutral, but in hostel accommodation this is not the case. Instead, the necessary tendencies function to compromise safety, independence, and social inclusion, meaning that diligent construction must function against the grain. This does not mean that positive outcomes cannot be generated in hostels; but it does mean that generating positive outcomes requires very significant efforts and that *even with optimal efforts*, slippage toward the outcomes that run with the grain of hostel accommodations tendencies is ever present.

There is, then, a deep schism between the intended and actual outcomes of hostel accommodation (Parsell 2018). It is within the bounds of this schism that hostel staff begin to emphasise two further (internally related) outcomes: namely, internal inclusion and health benefits. Before we explore the role of these outcomes in bridging the schism it is important to recall two matters. First, hostel accommodation has a necessary tendency toward the generation of internal inclusion, but the form of internal inclusion that is generated is heavily oriented toward negative outcomes. This means that (again) providers must always engage in proactive efforts that counterweight this tendency if the postulated positives of internal inclusion are to be actualised. Second, internal inclusion was thought to hold some worth as an end-goal, but only in a compensatory sense - where people are chronically socially excluded, internal inclusion might compensate by affording some relational attachments – but as an end state this was rarely considered satisfactory or sustainable, given the temporary nature of hostel provision.

The true value of internal inclusion was instead located, not in its compensatory nature, but in its postulated causal relationship to health benefits and, thereafter, its capacity to generate the intended outcomes of safety, which might allow then for independence and social inclusion to be attained. We might think of these as stepwise outcomes in this respect: internal inclusion generates therapeutic conditions which lead to health-related outcomes that are enabling of safety (Lazarus and Folkman 1984). In turn safety forms the foundation of independence and social inclusion; the highly valued outcomes that enable exit from homelessness. Here, internal inclusion is conceived of as a therapeutic intervention. This postulated causal pathway creates a tendency to hold health-related outcomes (most often the treatment of trauma) as *logically prior* to housing related outcomes (Lazarus and Folkman 1984).

Recalling here that hostels are possessed of tendencies that are (internally) generative of harm, including direct and vicarious traumas, I would argue that hostels generate or compound (at least some of) the health-related needs in focus. This opens the possibility that some hostels offer themselves as a therapeutic intervention that self-generates (at least in part) the need it seeks to address. There is an obvious problematic in this, but it is one that, I would argue, is particularly toxic in circumstances where exiting that intervention is held as secondary to addressing those needs. It seems reasonable to conclude that hostels cause (at least some) people to experience (compound) trauma, and that in prioritising the treatment of such trauma prior to move-on, creates a form of demand for itself that is (at least to some extent) without end. If we hold as true the assertion that homelessness is symptomatic of trauma and that unresolved trauma prevents successful move on from hostel accommodation, it seems possible that hostels (in generating trauma) play an active role in the generation of homelessness, and even more so in its subsequent entrenchment and repetition.

9.1.2: Actual outcomes and the possibility of human flourishing

This study also set out to explore the actual outcomes of hostel accommodation. Some of these – such as constrained opportunities to exercise social connections and independent living skills – came into view through an exploration of intended outcomes. However, informant testimony tended to focus on three actual outcomes as being of particular importance in hostel accommodation: namely, harm, exclusion, and dependence. These outcomes were of a different order to the negative outcomes (explored above) which function to constrain or disable intended outcomes. These outcomes are instead ones which exist in direct tension with those that are intended. This

is true in the sense that they are oppositional tensions – harm is the antithesis of safety (and so on), but it is not simply the case that the tension between each given pair is evenly distributed. Because these (negative) actual outcomes are generated by (rather than against the grain of) the necessary tendencies of hostel accommodation, we can say that the tension is generally weighted toward the negative.

These tendencies will be actualised with differing frequency and intensity depending on the presence (or absence) of other contingent factors, but they remain necessary tendencies none-the-less. There are, however, important distinctions with regards to how that weighting occurs for each of the actual outcomes. Where hostel conditions are functioning optimally with respect to safety, the weighting tendency of the safety-harm tension (toward the latter) may be reduced or even (at times) reversed. However, to function optimally with respect to safety the exclusion component of hostel accommodation must necessarily be exercised, thus increasing the weighting tendency of the inclusion-exclusion tension (toward the latter). Where exclusion is exercised harm tends to be caused to the individual who is subject to exclusion. This means that the reduction or reversal (of harm) is in a sense illusory. Those who remain in the given hostel may confirm a reduction in exposure to harm or may even report a sense of safety, but it is not the case that harm is not occurring. Instead, harm is being displaced elsewhere and being experienced by those now outside the given hostel setting.

This displacement of harm might find justification in a ‘greater good’ argument – if harm can be displaced to elsewhere the possibility of (positive) internal inclusion increases and with it the generation of therapeutic conditions which lead to health-related outcomes that are enabling of safety. If safety in turn functions as a foundation for other positive outcomes, then we might tolerate the harm occasioned to those who are excluded because (in theory) such an acceptance allows for the actualisation of hostels postulated meta-outcome: namely, positive transformation (albeit not for all). The findings of this study suggest that this process is highly resource intensive with outcomes that are variable.

Even where the environmental conditions that are (thought) generative of (therapeutic) internal inclusion can be constructed and then sustained for a time, another problematic weighting occurs: the independence-dependence tension tends to cede toward dependence. People experience internal inclusion and do not want to move on to more independent forms of accommodation. Where this occurs people will (sometimes) report that they are flourishing in hostel accommodation, but this sense of flourishing is contingent in that it is generated by a set of environmental conditions that require intense

and ongoing construction. This creates a profound pincer movement where hostels are expending efforts on fostering internal inclusion as a compensatory or gateway outcome to the wider social inclusion that they act to constrain, while generating unwanted dependence outcomes in the process.

There is a sense, then, in which non-optimally performing *and* optimally performing hostels function to tilt tensions further towards their negative weightings, albeit that the specific tension affected may differ. This means that hostel providers and staff teams may be working hard to construct conditions that allow for flourishing, and that those efforts will sometimes generate a subjective and contingent experience of flourishing for some people (Bhaskar 2016; Nussbaum 2013). There is a kind of logic, then, underpinning the determination of providers to guard their existing resources and to seek and make the case for more.

The key findings of this research implicate this logic in the reluctance or reticence of the homelessness sector to drive forward more effective responses to homelessness (Parsell 2018). The tensions detailed above go deeper than a straightforward oppositional positioning. It is not simply that providers intend to offer safety (for example) and hostels have an unfortunate tendency to generate harm. Rather the oppositional outcomes of each tension are heavily implicated in one another. The actual tendencies of hostels generate a level of illusory and contingent need (harm, dependency, and exclusion) that function to validate provider efforts to generate intended outcomes (safety, independence, and inclusion).

9.2 Implications for Policy

The findings of this study are in keeping with existing evidence that hostels have a range of detrimental outcomes. Where it pushes further is in suggesting that there is a *necessity* to the detrimental outcomes of hostels accommodation. This does not mean that every individual in a hostel setting will be subject to negative outcomes, or that such outcomes will define their experience; but rather that hostels have a necessary *tendency* to produce such outcomes. Mitigating against these necessary tendencies can (sometimes) reduce the nature and degree of harms incurred and while we continue to utilise hostels as an intervention, such efforts will remain important. However, mitigating against necessary tendencies is – in the hostel setting - a demanding undertaking, one that is resource intensive and ultimately produces variable results even under optimal conditions. Often there simply is no means of avoiding or circumventing these harms and some of the actions that *are* considered helpful – such as diversification and specialisation – are also

those that function to sustain the sector and to draw resources away from alternatives that are known to be less harmful (Sahlin 2005). This strongly suggests that the continual reconceiving and reconfiguring of hostels is not what real progress looks like, in terms of effective responses to homelessness. There is a clear basis, then, for saying that our efforts and resources should be expended in moving away from hostel accommodation use entirely.

We know that movement away from communal living environments *is possible*, and that in many respects homeless hostels are one of the last bastions of this form of intervention (Busch-Geertsema and Shalin 2007). It is not the case that homeless hostels are - for whatever reason - an unavoidable anomaly in the drive toward deinstitutionalisation, with other countries having already evidenced the do-ability of movement away from hostel provision, albeit that much of their provision retains a congregate element (Y-Foundation 2017). That default responses to pressing housing crises often favour congregate settings as an immediate response (as has been the case with hotels during the pandemic), with this impulse often forming the origins of the hostels of the future, suggests that any meaningful movement away from hostel accommodation will require purposeful and continuous efforts to prevent their re-emergence. Moreover, current funding and commissioning structures often act to incentivise hostels, so efforts to halt the evolutionary momentum of the hostel sector must necessarily involve paradigm shifts at this level.

Even where political and provider buy-in is fully secured, such movement takes time to achieve. It seems very likely, then, that hostels will continue to play a role for some time. Where hostels continue to be used, it is vital that efforts are focused on minimising exposure to the hostel environment. This would mean working to a rapid rehousing ethos, with the aim of making stays in hostel accommodation as short as possible (see Scottish Government 2020), including the avoidance of approaches that prioritise treatment as a necessary antecedent of move-on from hostel accommodation. It is also important that clarity is brought to bear on the intended outcomes of hostels and the priority that each outcome is afforded. It seems reasonable to suggest that housing stability ought to occupy a position of prime importance and that where providers claim that other outcomes are a necessary antecedent of these, that a theory of change ought to be outlined and tested against empirical data. Exposure to the congregate nature of the hostel environment might also be helpfully limited during a stay. This might include a cessation of the use of shared-room accommodation and move toward single-room accommodation only, with

a specific focus on maximising the self-contained nature of rooms (offering en-suite bathroom facilities, for example, and access to individual laundry and cooking facilities where possible).

The key point, though, is that mitigation efforts are important, but they remain just that (even when successful). It is important that the gloss applied to hostels (in fundraising and promotional activities, for example) is removed and that the harms of hostel living are acknowledged openly, so that we might more properly mitigate against them (Dean 2020). This would involve a commitment to evidencing and understanding the harmful outcomes of hostel accommodation, just as much (if not more) than seeking to do so with any positive outcomes that are achieved. This is likely to involve the monitoring and evaluation of summary eviction, exclusion, avoidance, abandonment, and repeat hostel use; alongside greater efforts to capture adverse incidents and their associated impacts.

9.3 Ideas for Future Research

Undertaking to evaluate the outcomes of hostel accommodation (as detailed above) is important in the context of individual hostels. Ultimately though these outcomes need to be explored and understood at a sectoral level (Swain 2021). How much of the existing demand for hostel accommodation is fuelled by movement between hostels? To what extent is this movement fuelled by exclusion and abandonment? How many people are partially housed within the hostel sector; neither evicted nor avoiding but subject to regular time-out and similar practices? These questions can only be fully addressed with the buy-in and commitment of key actors across the homelessness sector, including providers of hostel accommodation. However, research could play an important and supportive role. Here, quantitative research that seeks to establish the frequency of hostel accommodation outcomes (and the pattern of their occurrence across segmented group and hostels) would be helpful. It is important that such research seeks to understand the dynamics of the hostel sector as a totality and to avoid where possible the practice of extruding from the sphere of consideration certain groups, such as those who are excluded or abandon services, for example.

Critical realist informed research that seeks to define and clarify the components of accommodation-based responses to homelessness in a broader sense than achieved in this thesis, would also be of benefit. This might include emergency and temporary homelessness accommodation, alongside accommodation-based interventions that are more permanent in nature, such as housing-led and Housing First responses. Such research might go so far as to addressing the well-rehearsed difficulties around classifying

and conceptualising homelessness interventions. Understanding the ways in which components cluster and interact to produce outcomes and, crucially, their tendency to do so within specific forms of accommodation, would no doubt enhance our understanding of what works, for whom and in what ways. A recent meta-analysis of accommodation-based programmes provides a welcome and important foundation for such component-based research but lacks a means of incorporating key environmental components (whether housing is scattered or congregate, communal, or self-contained, for example) (Keenan et al. 2021). It is important that future research pays attention to these factors, and that typologies of accommodation-based interventions allow for them to be fully considered and evaluated.

Finally, longitudinal, qualitative research that has a particular regard for *intraindividual* comparison would also prove fruitful. That is, research that seeks not to evaluate individual capabilities against a normative standard but, rather, to contextualise and compare intraindividual capabilities across time, and in varying environments (DeSteno, Gross and Kubzansky, 2013; Lazarus and Folkman, 1984; Wynn and Williams, 2012). This would allow for a deeper exploration of the impacts of environmental conditions on those outcomes that are desired by hostel providers (safety, independence, inclusion), and for an expanded understanding of how (or if) illusory and contingent need arise with greater intensity or differing expression across shifting environments.

9.4 Study Limitations

This study has many limitations, with most finding a locus in the qualitative nature of the research. Great care was taken to develop and put into practice a case-study selection strategy that encompassed hostel diversity across a range of components. However, the dictates of time and researcher capacity restricted the number of hostels studied. This matters because the hostel sector is recognised for – and some might even say characterised by – its sheer diversity. There can be little doubt that hostels take on forms and function in ways that fall outside the reach of this study, and this includes the possibility of hostels that have intended and actual outcomes that are not explored here. The number of informants who participated in this study was equally limited by capacity considerations and, again, while diversity was purposefully sought across a range of variables, the findings of this study cannot be extrapolated across all populations in all contexts. The small number of residents interviewed, while justified within the critical realist approach adopted, might be seen as the study's main limitation. With the intended and actual outcomes of hostel accommodation having been firmly postulated in this study,

further research that seeks to hold these up against the experiences of hostel residents (in greater depth and across a larger sample) would no doubt bring a further range of insights to bear upon the findings of this study.

Against these limitations it is important to note that the intended purpose of the study was not to establish the statistical frequency of hostel outcomes or their patterns of occurrence across segmented hostels or participant groups. It was instead to uncover the generative mechanisms at play in hostel accommodation and to understand the continuous process by which these mechanisms function to generate outcomes. In this respect, the study has sought to identify the necessary tendencies of hostel accommodation. Provided the identified tendencies are conceptually correct, the limitations ordinarily associated with qualitative research - around sample size and generalisability – are perhaps mitigated (in some respect) because the causal claims are asserted not on statistical grounds but, rather, on grounds that are theoretical.

Compounding these limitations, the data that informs this study was drawn entirely from remote (telephone or online) interviews. This was the direct result of Covid-related restrictions in place throughout the entirety of the fieldwork phase and as such was beyond the control of the researcher. However, this means that the research was heavily reliant of the sensed experience of participants and while this is often the case, it is possible that ethnographic observations would have opened understandings that are not captured here. Moreover, only those agreeable to speak to the researcher by phone or online were able to participate in the research. It seems likely that this will have acted as a barrier to participation for some whose views and experiences could have been more readily captured in a face-to-face setting.

The arguments set out in this thesis are in many ways uncompromising in their critique of hostel accommodation. This is in large part informed by a drive to take seriously the importance of the intentions of hostel providers. If safety, independence, and social inclusion are central to human wellbeing, then it is imperative that the sector should be unflinching in its exploration and exposition of their antithesis (harm, dependence, and exclusion) where it exists. That is not to devalue the work of hostel providers and staff. On the contrary, this research demonstrates that the contingent components of hostel accommodation matter. How hostels are configured and the ways in which they are delivered, managed, and staffed, can mitigate (though not obviate) against their necessary tendencies. Here, the findings of this research are entirely in keeping with the argument advanced by many providers: that to produce positive outcomes, hostels require

significant investment and resources (both human and monetary). Where it departs, though, is in the central contention of this thesis: that much of this investment is expended in mitigating against the harms that are necessarily generated by the hostel environment.

In considering the conclusions reached here it is important to recall critical realism's assertion that a direct alignment between the transient and intransient aspects of being is not possible. In the critical realist tradition, knowledge is always already transient and fallible. The causal mechanisms described and detailed throughout this study have been carefully extrapolated from the testimony of participants, tested against the empirical data, and held up against the existing evidence. However, as with all such endeavours, the mechanisms outlined are postulated mechanisms, set out here as being entirely open to correction, challenge or dismissal, where evidence can be set out that backs such a course. Critical realism demands that we should not accept anything in a non-critical manner and should, rather, evaluate every proposition against our experience of the world (Bhaskar 2016). The findings of this study are offered in this spirit.

Appendix A: National key informant topic guide

Section 1: Introduction

- Thank you and introduction
- Reiterate nature and purpose of research
- Briefly explain structure and (likely) length of interview
- Explain confidentiality/anonymity and remind of voluntary nature of participation
- Check if participant has any questions?
- Ask for consent to record
- Begin audio recording and confirm consent to record.

Section 2: Job Role and Organisation

1. What is your current role? And what is your involvement with hostel accommodation?

Section 3: Role of Hostel Accommodation

1. What role does hostel accommodation currently play in responses to homelessness?

Alt 1: Is hostel accommodation a major element of our responses to homelessness?

Alt 2: Does hostel accommodation play a positive part in responses to homelessness, or do you see it as a less positive role?

2. Is the role played by hostel accommodation changing?

- a. Why is its role changing / not changing?

Probes: policy; evidence; pathway dependence; crisis; resources.

- b. How is increasing awareness of and support for the Housing First model changing the role hostel accommodation plays, if at all?

- c. Is that change/lack of change a good thing or a bad thing? Why is it a good thing or a bad thing?

3. How important are hostels in responding to homelessness?

Alt 1: Could we respond well to homelessness without hostels?

Section 4: Recognising a hostel

1. When people use the term hostel, what does that mean for you? What does the term conjure up in your mind?

Alt 1: What are the main features of hostel accommodation?

Alt 2: What characteristics, if any, do all or the vast majority of hostels hold in common. What is it that unites hostels?

Section 5: Who uses Hostel Accommodation

1. In your experience, what key groups are hostels used for?
2. Why is that do you think? Is that a good rationale?
 - a. Does that rationale apply to singles/couples/families?

If not, why does it not apply to these groups?

Section 6: Outcomes of Hostel Accommodation

1. What are hostels meant to achieve in practice? Or what are hostels for?

For each identified outcome:

- a. What is the theory of change behind this outcome? Or, is there a particular logic model that informs this outcome?

Probe: use example hypotheses below if needed/helpful

Alt 1: What works to help/support people to [identified outcome]?

- b. How successful is hostel accommodation at helping people to [identified outcome]? Why do you say this?

Probe: experience; evidence.

- c. Is there anything that stops or hinders people from [identified outcome]?

- d. Could [identified outcome] be achieved in other forms of accommodation?

Probe: achieved in other forms of accommodation with greater/lesser frequency; with more/less effort; to better/worse effect?

2. Does hostel accommodation produce any unintended or counterproductive outcomes? What are these?

For each identified outcome:

- a. Is there anything that is particularly likely to lead to [identified outcome]?

Probe: use example hypotheses below if needed/helpful

- b. Is there anything in particular that works to prevent [identified outcome] happening?

- c. How likely is hostel accommodation to lead to [identified outcome]? Why do you say this?

Probe: experience; evidence.

- d. Does [identified outcome] occur in other forms of accommodation?

Probe: occurs in other forms of accommodation with greater/lesser frequency; with greater/lesser impact; prevented with more/less effort?

Section Seven: Next Stage

The next phase of the research will include case studies of individual hostels and I wonder

...

1. Is there anything in particular that I should take into account when selecting cases?
2. Do you have any suggestions of individual hostels that you think I should consider?
3. Is there anything else you would like to add?

Appendix B: Hostel managers topic guide

Section 1: Job Role, Organisation and Service

- a. Can you tell me briefly what your job is and how it relates to [service name]?

Can you tell me a little bit more about [service name] . . . ?

- b. Why was the service established and what was it set up to achieve?
- c. Does the service have a particular philosophy or set of values that guide how it is run?

Section 2: Outcomes

I would like to understand a bit more about what [service name] is intended to do and what it does in practice. To help with that I'm going to make some suggestions about what hostels are for – and then we can chat through what each of those suggestions mean for your hostel. So, to start off . . .

Section 3A: Safety

- a. *Some people say that hostels offer people a place of safety or sanctuary – to what extent do you feel you achieve this?*
- b. Is there anything that especially helps or hinders people from feeling safe in [service name]?

Example (helps): Some people say that hostels offer people a place of safety or sanctuary because staff are continuously available on site or because access to the building is controlled.

*Example (hinders): Some people say that hostels increase **risk of harm** because people are exposed to conflict and aggression, for example, or intimidation and exploitation.*

- c. Is there anything that works well to reduce or prevent risk of harm in [service name]? Is there anything that increases the likelihood of harm?
- d. Could people equally be supported to feel safe in other forms of accommodation (*e.g., supported accommodation; self-contained TA; Housing First*) or is [service name] the best kind of accommodation for helping people to feel safe?

Probe: safety achieved in other forms of accommodation with greater/lesser frequency; with more/less effort; greater/lesser cost?

Section 3B: Independence-Dependence

- a. *Some people say that hostels help people to build independent living skills – is this a goal that [service name] would share? If yes, why is this important? If no, why is this not important (move to 3C)?*
- b. Is there anything that especially helps or hinders people’s independence in [service name]?

Example (helps): Some people say that hostels help people to sustain a home of their own because it allows them time to prepare for independent living, for example, or provides access to life-skills training.

*Example (hinders): Some people say that hostels lead to loss of independent living skills because the rules and routines encourage **dependence** on others.*

- c. Is there anything that works well to prevent increased dependence on others? Is there anything that increases the likelihood of dependence?
- d. Could people equally be supported to build independent living skills in other forms of accommodation (*like supported accommodation, self-contained TA, or Housing First*), or is [service name] the best kind of accommodation for building independent living skills?

Probe: independent living skills developed in other forms of accommodation with greater/lesser frequency; with more/less effort; greater/lesser cost?

Section 3C: Inclusion-Exclusion

- a. *Some people say that hostels foster social inclusion – is this a goal that [service name] would share? If yes, why is this important? If no, why is this not important (move to 3D)?*
- b. Is there anything that especially helps or hinders social inclusion in [service name]?

Example (helps): Some people say that hostels foster a sense of belonging because people can rapidly form relationships - with staff or peers - which are caring, non-judgemental, and empathetic.

*Example (hinders): Some people say that hostels can lead to **exclusion** or abandonment because people can feel uncomfortable, frightened, or intimidated by living in proximity with others; or to estrangement from family and friends because people do not have private space where they can meet with others.*

- c. Is there anything that works well to prevent exclusion? Is there anything that increases risk of exclusion?
- d. Could social inclusion equally be fostered in other forms of accommodation (*like supported accommodation, self-contained TA, or Housing First*), or is [service name] the best kind of accommodation for fostering social inclusion?

Probe: social inclusion fostered in other forms of accommodation with greater/lesser frequency; with more/less effort; greater/lesser cost?

Section 3D: Positive-Negative Effect

- a. *Some people say that hostel accommodation helps people to move forward with their lives – is this a goal that [service name] would share? If yes, why is this important? If no, why is this not important (move to 4)?*
- b. Is there anything that especially helps or hinders people’s ability to move forward with their lives in [service name]?

Example (helps): Some people say that hostel accommodation increases feelings of self-worth through time spent in a therapeutic community or through access to relational support.

*Example (hinders): Some people say that hostel accommodation can lead to increased substance use because people are exposed to **negative effects**, have easier access to substances or use more to cope with environmental stressors.*

- c. Is there anything that works well to prevent negative effects? Is there anything that increases the risk of negative effects?
- e. Could people equally be supported to move forward with their lives in other forms of accommodation (*like supported accommodation, self-contained TA, or Housing First*), or is [service name] the best kind of accommodation to support people in moving forward with their lives?

Probe: supported to move forward in other forms of accommodation with greater/lesser frequency; with more/less effort; greater/lesser cost?

Section 4: Wider Context

It would be great to finish off by getting a sense of where [service name] sits in the wider context of hostel provision . . .

- a. How does [service name] compare to other hostels? Is it typical of hostel provision or more specialist in nature?
- b. Is the role played by hostel accommodation changing?

If not covered in response, probe: How is increasing awareness of Rapid Rehousing and Housing First changing the role hostel accommodation plays, if at all?

- c. Is that change/lack of change a good thing or a bad thing? Why is it a good thing or a bad thing?
- d. How important are hostels in responding to homelessness? Could we respond well to homelessness without hostels?

Section Five: Conclusion

1. Is there anything else that you think I should have asked or that you would like to add?

Appendix C: Hostel worker topic guide

Section 1: Job Role, Organisation and Service

- a. Can each of you tell me very briefly what your job is and how it relates to hostel accommodation?

Can you tell me a little bit more about your hostel...?

- b. Why was your hostel established and what was it set up to achieve?

- c. Does your hostel have a particular philosophy or set of values that guide how it is run?

Section 2: Outcomes

I would like to understand a bit more about what hostels are intended to do and what they do in practice. To help with that I'm going to make some suggestions about what other people have told me hostels are for – and then we can chat through what each of those suggestions mean for your hostel. So, to start off. . .

Section 2A: Positive

1. *Some people say that hostels help people to build their capacity for independent living...*
 - a. Is this something that you recognise? If yes, what does 'building capacity for independent living' mean to you/your service? How much of a priority is it compared with the other demands/goals of your day-to-day work?
 - b. How does your service seek to build capacity for independent living?
 - c. Is there anything that especially helps or hinders people to build their capacity for independent living?
 - d. Does **time** spent in hostel accommodation help/hinder people to prepare for independent living? What about access to life-skills **training**? Available/unavailable? Helpful/hindrance? Prompt: tenancy management, budgeting, cooking, etc.
- a. Do some people especially need or benefit from efforts to build capacity for independent living?
2. *Some people say that hostels foster social inclusion...*
 - a. Is this something that you recognise? If yes, what does 'fostering social inclusion' mean to you/your service? How much of a priority is it compared with the other demands/goals of your day-to-day work?
 - b. How does your service seek to foster social inclusion?
 - c. Is there anything that especially helps or hinders the building of social inclusion in your service?

- d. Do hostels help/hinder people to form/maintain **relationships**? Who with? Prompt: with staff, with other hostel residents, with existing family/friends. If yes, do the relationships formed help/hinder social inclusion?
 - e. Do some people especially need or benefit from efforts to foster social inclusion within the hostel?
- 3. *Some people say that hostels offer people a place of safety...***

- a. Is this something that you recognise? If yes, what does ‘place of safety’ mean for you/your service? How much of a priority is it compared with the other demands/goals of your day-to-day work?
- b. How does your service seek to foster a sense of safety?
- c. Is there anything that especially makes people feel more or less safe in your service(s)?

Does having **staff available** on-site increase/decrease feelings of safety? Prompt: support staff; housing management staff; security staff. What about **access** to the building being **controlled**?

- d. Do some people especially need or benefit from the safety hostels seek to offer?

Section 2B: Negative Outcomes

1. *Some people say that hostels can put people at risk of harm . . .*

- a. Is this something that you recognise as happening in hostel accommodation? If yes, what form does it take? How does this impact on your day-to-day work?
- b. Is there anything that works well to reduce or prevent risk of harm in hostels? Is there anything that increases the likelihood of harm?
- c. Does hostel accommodation protect people from/expose people to the behaviour of others, like induction to new or increased substance use? Does it prevent/enable negative interpersonal interaction, like exploitation or coercion?
- d. Are some people especially at risk of harm in hostel accommodation? Are some people especially likely to perpetrate harm? Prompt: service users, staff members, volunteers?

2. *Some people say that hostels lead to loss of independent living skills . . .*

- a. Is this something that you recognise as happening in hostel accommodation? If yes, what form does it take? How does it impact on your day-to-day work?
- b. Is there anything that works well to prevent increased dependence in hostel accommodation? Is there anything that increases the likelihood of dependence?
- c. Does having health and other services on site increase/decrease dependence on hostel accommodation? What about the rules and routines of hostel accommodation, do they encourage/discourage dependence on others?
- d. Are some people especially at risk of increased dependence in hostel accommodation?

3. *Some people say that hostels can lead to exclusion or abandonment . . .*

- a. Is this something that you recognise as happening in hostel accommodation? If yes, what form does it take? How does it impact on your day-to-day work?
- b. Is there anything that works well to prevent exclusion or abandonment? Is there anything that increases risk of exclusion or abandonment?
- c. Does living in close proximity to others help/hinder people to feel comfortable and settled in their accommodation?
- d. Are some people more at risk of exclusion/abandonment than others? Are some staff more/less likely to exclude people? Why is that? What protections or appeal rights are there for people who are excluded? Do you follow-up with people who abandon services? What about those who do not show up following a referral?

Section 4: Wider Context

It would be great to reflect on the overall role of hostels in responding to homelessness...

1. Could we respond well to homelessness without hostels? How important are hostels in responding to homelessness?

2. Do hostels help people to exit homelessness, or do they keep people in homelessness? How do they do this/not do this?
3. Could people equally/better be supported to exit homelessness in other forms of accommodation (e.g., supported accommodation; self-contained TA; Housing First) or are hostels the best kind of accommodation for helping people to exit homelessness?

Probe: exit from homelessness achieved in other forms of accommodation with greater/lesser frequency; with more/less effort; greater/lesser cost?

Section Five: Resolving tensions

We have discussed some of the positive things about hostel accommodation - around safety and inclusion for example - but also some parts that are less positive - around risk of harm and exclusion say - so in your experience...

1. Do the positive and not so positive aspect of hostel accommodation balance themselves out in the end or are there trade-offs and compromises that you find difficult/challenging?

Section Six: Finish

4. Is there anything else that you think I should have asked or that you would like to add?

Thank you so much for your time

Appendix D: Hostel resident topic guide

Section 1: Facilities, Building and Rules

- 1) I believe you are currently staying in [service name]. Is that right?
- 2) Can you tell me what the hostel is like (describe your room, the facilities, the building) so I can get a bit of a picture of it?
 - Do you have your own private space or bedroom? Are you allowed visitors/guests? Can you stop people coming in if you do not want them there?

- Do you have access to the facilities you need? (Laundry, bathroom, kitchen, storage) Are these shared? Does that work out okay or not? Are they safe, clean, etc.?
 - Do you have access to Wi-Fi and/or phone?
 - Are there any rules you need to stick to (curfews, visitors, alcohol/drug use, etc.)? How do you find these? Probe: can you come and go as you please at any time?
 - What about the location? Does it suit you or not?
- 3) What do you like best about staying in [service name]? Why is that?
 - 4) And what do you like least about [service name]? Why is that?
 - 5) Any other things that you particularly like or dislike about the accommodation? That suit you particularly well or that make things difficult?

Section 2: Before Current Accommodation

- 1) Where were you staying/what was your situation before you moved to [service name]? Why did you have to leave/could not stay there?
- 2) Have you stayed in any other hostels before moving to [service name]?
If yes, a) how did it/they compare to the hostel you are in now? Was it/they better or worse (or different)? Why and in what way?

b) how did you come to leave your last hostel(s)? Where did you go to? What was it like for you?

Probe: planned move-on; unplanned move-on; exclusion; abandonment; moved to another hostel.

Section 3: Accessing Current Accommodation

- 1) How did you get into/access [service name]? Did someone/some service refer you there?

- 2) Did you have any other options of where you could stay? How did you feel about those options?
- 3) Were you happy to accept the offer here? Did you consider refusing it? Why/why not?
- 4) Have you considered leaving since you got here? Have you ever left and come back? If so, why?

Section 4: Experience in Current Accommodation

- 1) Overall, has staying where you are now been a good or bad experience for you? In what ways? What (if any) impact has it had on your physical or mental health? What about your relationships with others?
- 2) What is the atmosphere like there? Overall, do you feel relaxed or tense in your hostel?

Section 5: General Support and Planning for the Future

- 1) While you have been staying in [service name], have you wanted or needed help or support with anything? What kind of support have you wanted/needed?
- 2) Have you had anyone who help you out or give you support in [service name]? Who is this?

If yes: How helpful is the support, is it the kind of help you want/need? Any gaps?

If no: Is there support available that you could access? If yes, is there anything that stops/hinders you from accessing this support? If no, what (if any) kind of support would be helpful?

- 3) Have you had the headspace you need to sort yourself/your life out - or to plan your next steps?

If yes, what is next for you now? What are your main priorities or longer-term plans?

If no, why is that? Is there anything in particular that makes it difficult for you to sort yourself out/plan for the future?

Probe: education, employment, volunteering, health, substance use, family.

4) How long have you been staying where you are now? How long do you think you might stay? How do you feel about being there for that length of time?

5) Do you have any hopes or plans around moving-on from [service name]?

If no: Why is that?

If yes: What kind of place would you like to move on to? How likely do you think it is that you will get somewhere like that? Is there a plan for moving on? Do you know what you have to do and what others are doing to help you move on?

Section 6: Close

1) Is there anything else that you think I should have asked or that you would like to add?

2) Arrange voucher.

Thank you so much for your time

Bibliography

- Allen, C. (2000) On the ‘‘physiological dope’’ problematic in housing and illness research: towards a critical realism of home and health. *Housing, Theory & Society*. (17) 49–67.
- Ackroyd, S., & Karlsson, J. C. (2014) Critical Realism, Research Techniques, and Research Designs. In: K. Edwards, J. O’Mahoney, and S. Vincent (Eds.) *Studying Organizations using Critical Realism: A Practical Guide* (21–45). Oxford: Oxford University Press.
- Akerman, G. (2019). Communal living as the agent of change. In D. Polaschek, A. Day, and C. Hollin (Eds.) *The Wiley International Handbook of Psychology and Corrections*. (Chapter 37). Wiley: USA.
- Aldridge, W.R. et.al. (2018) Morbidity and Mortality in Homeless Individuals, Prisoners, Sex Workers, and Individuals with Substance Use Disorders in High-Income Countries: A Systematic Review and Meta-analysis. *The Lancet*. 391(10117): 41–250.
- Archer, M., Decoteau, C., Gorski, P., Little, D., Porpora, D., Rutzou, T., Smith, C., Steinmetz, G., Vandenberghe, F. (2016) What is Critical Realism? *American Sociological Association: Section on Theory*. Available from: <http://www.asatheory.org/current-newsletter-online/what-is-critical-realism>
- Atherton, I. and McNaughton Nicholls, C. (2008) Housing First as a means of addressing multiple needs and homelessness. *European Journal of Homelessness*. 2: 289-303.
- Bachelard, G. (1953) *Le Mat rialisme Rationnel*. Paris: Les Presses universitaires de France
- Barrow, S. and Sotto, G. (2000) *Closer to Home: Interim housing for long-term shelter residents*. Corporation for Supportive Housing.
- Barrow, S. and Zimmer, R. (1999) ‘Transitional Housing and Services: A Synthesis’, in Fosburg, L. and Dennis, D. (eds) *Practical Lessons: The 1998 National Symposium on Homelessness Research*. Washington DC: Department of Housing and Urban Development: 11–31. Available at: http://www.urbancentre.utoronto.ca/pdfs/elibrary/1998_Transitional-Housing-S.pdf.

- Barrow, S., Soto, G., and Cordova, P. (2004) *Final Report on the Evaluation of the Closer to Home Initiative*. Corporation for Supportive Housing.
- Bassett, K. (1999) Is there Progress in Human Geography? The problem of progress in light of recent work in the philosophy and sociology of science. *Progress in Human Geography*. 23(1): 27-47.
- Benjaminsen, L. (2016) Homelessness in a Scandinavian Welfare State: The Risk of Shelter Use in the Danish Adult Population. *Urban Studies*. 53(10): 2041-2063.
- Benjaminsen, L., Dyb, E., and O'Sullivan, E. (2009) The Governance of Homelessness in Liberal and Social Democratic Welfare Regimes: National Strategies and models of Intervention. *European Journal of Homelessness* 3: 23-51
- Bhaskar, R. (1979) *A Realist Theory of Science*. Leeds: Leeds Books.
- Bhaskar, R. (1986) *Scientific Realism and Human Emancipation*. Taylor and Francis. Kindle Edition.
- Bhaskar, R. (1979a) *The Possibility of Naturalism* (3rd edition). London: Routledge.
- Bhaskar, R. (1989) *Reclaiming Reality*. London: Verso.
- Bhaskar, R. (1993) *Dialectic. The Pulse of Freedom*. London: Verso.
- Bhaskar, R. (1997) On the Ontological Status of Ideas. *Journal for the Theory of Social Behaviour*. 27(2): 139-147.
- Bhaskar, R. (2016) *Enlightened Common Sense: The Philosophy of Critical Realism*. Taylor and Francis. Kindle Edition.
- Bhaskar, R and Danermark, B. (2006) Metatheory, Interdisciplinarity and Disability Research: A Critical Realist Perspective. *Scandinavian Journal of Disability Research*. 8(4): 278-297.
- Bhaskar, R., Danermark, B., and Price, L. (2017) *Interdisciplinarity and Wellbeing: A Critical Realist General Theory of Interdisciplinarity*. London: Routledge.
- Boyle, F., and Palmer, J., with Ahmed, S. (2016) *The Efficiency and Effectiveness of the Housing First Support Service Piloted by Depaul in Belfast, Funded by Supporting People: An SROI Evaluation*. Belfast: NIHE.
- Boyle, F., and Pleace, N. (2017). *The Homelessness Strategy for Northern Ireland 2012-2017: An Evaluation*. Belfast: Northern Ireland Housing Executive.

- Bourdieu, P. (1992) *Language and Symbolic Power*. Cambridge: Polity Press.
- Bramley, G., and Fitzpatrick, S. (2018) Homelessness in the UK: Who is Most at Risk? *Housing Studies*. 33(1): 96-116.
- Breedvelt, J.F. (2016) *Psychologically Informed Environments: A Literature Review*. London: Mental Health Foundation.
- Broadway (2010) *Clearing House: A Review: one year on*. London: Broadway
- Bryman, A. (2016) *Social Research Methods* (5th Edition). Oxford: Oxford University Press.
- Busch-Geertsema, V., and Sahlin, I. (2007) The Role of Hostels and Temporary Accommodation. *European Journal of Homelessness*. 1(1): 67-93.
- Busch-Geertsema, V., Edgar, W., O'Sullivan, E., & Pleace, N. (2010). *Homelessness and Homeless Policies in Europe: Lessons from Research*. Brussels: European Commission.
- Butler, J. (1990) *Gender Trouble: Feminism and the Subversion of Identity*. Abington: Routledge.
- Butler, J. (1993) *Bodies that Matter: On the Discursive Limits of 'Sex'*. Abington: Routledge.
- Butler, J. (1997) *The Psychic Life of Power: Theories of Subjection*. Stanford, CA: Stanford University Press.
- Camus, A. (1942) The Myth of Sisyphus, in *The Existentialist Reader: An Anthology of Key Texts* (2001) Ed. Paul S MacDonald. New York: Routledge.
- Caton, C. L. M., Wilkins, C. W. and Anderson, J. (2007) People who experience long-term homelessness: characteristics and interventions, in Dennis, D., Locke, G. and Khadduri, J. (eds.) *Toward Understanding Homelessness: The 2007 National Symposium on Homelessness Research*. Washington DC: Department of Health and Human Services and U.S. Department of Housing and Urban Development.
- Centre for Homelessness Impact (2021) *Evidence Standards*. Online: CHI. <https://www.homelessnessimpact.org/tools>
- Chilvers, R., MacDonald, G. and Hayes, A. (2009) *Supported Housing for People with Severe Mental Disorders*. John Wiley & Sons Ltd.

- Churchard, A., Ryder, M., Greenhill, A. & Mandy, W. (2018). The prevalence of autistic traits in a homeless population. *Autism*. 23(3), 665-676. DOI: 10.1177/1362361318768484.
- Criminal Justice Inspection Northern Ireland (2013). *A Review of Approved Premises in Northern Ireland*. Belfast: Criminal Justice Inspection Northern Ireland
- Cockersell, P. (2016) PIEs Five Years On. *Mental Health and Social Inclusion*. 20(4): 221-230.
- Collier, A. (1989). *Scientific Realism and Socialist Thought*. Hemel Hempstead: Harvester Wheatsheaf.
- Council for the Homeless Northern Ireland (2013) *Temporary Accommodation Census: Summary*. Belfast: CHNI
- Council for the Homeless Northern Ireland (no date) *Northern Ireland Findings: A Picture of Health*. Belfast: CHNI, HSC, PHA.
- Crane, M., Warnes, A. M., and Coward, S. (2012) Preparing Homeless People for Independent Living and its Influence on Resettlement Outcomes. *European Journal of Homelessness* 6(2): 17-45
- Credland, S. (2004) *Sick and Tired: The Impact of Temporary Accommodation on the Health of Homelessness Families*. London: Shelter.
- Crisis (no date) *Housing Models and Types* [online]. London: Crisis. [viewed 29/10/19]. Available from: <https://www.crisis.org.uk/ending-homelessness/housing/housing-models-and-types/>
- Crowther, M (1991) *The Workhouse System, 1834–1929: The History of an English Social Institution*. Methuen: London.
- Daly, A., Craig, S., and O’Sullivan, E. (2018) The Institutional Circuit: Single Homelessness in Ireland. *European Journal of Homelessness*. 12(2): 79-94.
- Dean, J. (2020) *The Good Glow: Charity and the Symbolic Power of Doing Good*. Bristol: Policy Press.
- Department of Health (2010) *Fulfilling and Rewarding Lives: The Strategy for Adults with Autism in England*. London: The Stationery Office Ltd. United States, 2010. MMWR, 63(SS02): 1–21.

- DeSteno, D., Gross, J. J., and Kubzansky, L. (2013) Affective Science and Health: The Importance of Emotion and Emotion Regulation. *Health Psychology*. 32(5): 474–486.
- Dordick, G. A. (2002) Recovering from homelessness: Determining the “quality of sobriety” in a transitional housing program. *Qualitative Sociology*. 25(1): 7–32.
- Easton, G. (2010) Critical Realism in Case Study Research. *Industrial Marketing Management*. 39: 118-128.
- Echo Steering Group (2015) *Homelessness Scoping Study Report*. Jane Turnball Education and Development.
- Edgar, B., and Meert, H. (2005) Fourth Review of Statistics on Homelessness in Europe. *European Observatory on Homelessness*. Brussels: FEANTSA
- Ellison, A., Pleace, N., and Hanvey, E. (2012) *Meeting the Housing Needs of Vulnerable Homeless People in the Private Rented Sector in Northern Ireland*. Housing Rights Service, Policies, and the University of York.
- Evans, R (2011). *The life we choose: shaping autism services in Wales*. Cardiff: National Autistic Society
- Everyone Home Collective (2021) *Route-Map 1: Ending the Need for Night Shelter & Hotel Room Provision*. Online: Everyone Home Collective.
<https://www.everyonehome.scot/pdf/route-map.pdf>
- FEANTSA. (Winter 2017) *Homelessness in Europe: Trauma and Homelessness*. Belgium: FEANTSA.
- Fitzpatrick, S. (2005) Explaining Homelessness: A Critical Realist Perspective. *Housing, Theory and Society*. 22(1): 1-17.
- Fitzpatrick, S., and Wagnanska, J. (2007) Harmonising Hostel Standards: Comparing the UK and Poland. *European Journal of Homelessness*. 1: 41-66.
- Fitzpatrick, S., Bramley, G., and Johnsen, S. (2012) *Multiple Exclusion Homelessness in the UK: Briefing Paper No. 1*. Edinburgh: Heriot-Watt University.
- Fitzpatrick, S., Bretherton, J., Jones, A., Pleace, N., and Quilgars, D. (2010) *The Glasgow Hostel Closure and Re-provisioning Programme: Final report on the findings of a longitudinal evaluation*. York: Centre for Housing Policy, University of York.
- Fitzpatrick, S., Pawson, H., Bramley, G., Wilcox, S., and Watts, B. (2015) *The Homelessness Monitor: Scotland 2015*. London: Crisis.

- Fitzpatrick, S., Pawson, H., Bramley, G., Wilcox, S., and Watts, B. (2016) *The Homeless Monitor: Northern Ireland 2016*. London: Crisis.
- Fitzpatrick, S., Pawson, H., Bramley, G., Wilcox, S., and Watts, B. (2017) *The Homelessness Monitor: England 2017*. London: Crisis.
- Fitzpatrick, S., Pawson, H., Bramley, G., Wilcox, S., Watts, B. and Wood, J. (2018) *The Homelessness Monitor: England 2018*. London: Crisis.
- Fitzpatrick, S., Pawson, H., Bramley, G., Wilcox, S., Watts, B., and Wood, J., (2017). *The Homelessness Monitor: Wales 2017*. London: Crisis.
- Fitzpatrick, S., Pawson, H., Bramley, G., Wood, J., Watts, B., Stephens, M. & Blenkinsopp, J. (2019) *The Homelessness Monitor: England 2019*. London: Crisis.
- Fitzpatrick, S. (2020) Communal Shelters for Homeless People Cannot Belong in our Future. *Inside Housing*. 10 August. Online: Inside Housing.
<https://www.insidehousing.co.uk/comment/comment/communal-shelters-for-homeless-people-cannot-belong-in-our-future-67432>
- Folkman, S. (2010) Stress, Coping and Hope. *Psycho-Oncology*. 19, 901-908.
- Folkman, S., and Lazarus R.S. (1985) If it Changes it Must be a Process: Study of Emotion and Coping during Three Stages of a College Examination. *Journal of Personality and Social Psychology*. 48(1): 150-70.
- Folkman, S., Lazarus, R.S., Dunkel-Schetter, C., DeLongis, A., and Gruen, R. J., (1986) Dynamics of a Stressful Encounter: Cognitive Appraisal, Coping, and Encounter Outcomes. *Journal of Personality and Social Psychology*. 50(5) 992-1003.
- Forsman, A., Herberts, C., Nyqvist, F., Walbeck, K., & Schierenbeck. (2013) Understanding the role of social capital for mental wellbeing among older adults. *Ageing and Society*. 33(5): 804-825. Doi:10.1017/S0144686X12000256
- Foucault, M. (1977) *Discipline and punish*. New York: Pantheon Books.
- Frazier, M. L., Fainshmidt, S., Klinger, R. L., Pezeshkan, A. and Vracheva, V. (2017) 'Psychological Safety: A Meta-Analytic Review and Extension', *Personnel psychology*. 70(1): 113–165. doi: 10.1111/peps.12183.
- Goffman, E. (1961/1991) *Asylums. Essays on the social situation of mental patients and other inmates*. London: Penguin Books.

- Gomez, M. & Kuronen, M. (2011) Comparing Local Strategies and Practices: Recollections from Two Qualitative Cross-national Research Projects, *Qualitative Research*. 11(6): 683-698.
- Gray, P. (2012) Conceiving and constructing the Irish workhouse, 1836-45, *Power, the State, and Institutions in Ireland*, 38(149): 22-35
- Grunberg, J., and Eagle, P. (1990) Shelterization: How the Homeless Adapt to Shelter Living. *Hospital and Community Psychiatry* 41: 521-525.
- Gulcur, L., Stefancic, A., Shinn, S., Tsemberis, S. and Fischer, S. N. (2003) Housing, hospitalization, and cost outcomes for homeless individuals with psychiatric disabilities participating in continuum of care and housing first programmes. *Journal of Community & Applied Social Psychology*. 13: 171-186.
- Gustafsson, C., Goulding, A., Abrams, D., Nylander, R. M., Wiberg, C., Orem, E. (2009) Boendeformer och Boendeinsatser för Personer Med Psykiska Funktionshinder. Systematisk Kartläggning av Publikationer 1980–2007. Socialstyrelsen: Stockholm, Sweden.
- Haigh, R., Harrison, T., Johnson, R., Paget, S. and Williams, S. (2012) Psychologically informed environments and the “Enabling Environments” initiative”. *Housing, Care and Support*. 15(1): 34-42. <https://doi.org/10.1108/14608791211238412>
- Hansen Lofstrand, C. (2010) Reforming the work to combat long-term homelessness in Sweden. *Acta Sociologica*. 53: 19-34.
- Henwood, B., Stanhope, V., and Padgett, D. (2011) The role of housing: A comparison of front-line provider views in Housing First and traditional programs. *Administration and Policy in Mental Health and Mental Health Services Research*. 38: 77–85.
- Hirvikoski, T., Mittendorfer-Rutz, E., Boman, M, Larsson, H., Lichtenstein, P., and Bolte, S. (2016) *Premature Mortality in Autism Spectrum Disorder*. *The British Journal of Psychiatry*. 208: 232–238.
- H.M. Government (2014) *Think Autism: Fulfilling and Rewarding Lives, the Strategy for Adults with Autism in England: An Update*. London: The Stationery Office
- Homeless Link (2014) *The Unhealthy State of Homelessness: Health Audit Results 2014*. London: Homeless Link.

- Homeless Link. (2013) *Personally Speaking: A Review of Personalisation in Services for Rough Sleepers*. London: Homeless Link.
- Homeless Link. (2017) *Support for Single Homeless People in England: Annual Review 2017*. Homeless Link.
- Homeless Link (2018) *The Future Hostel: The Role of Hostels in Helping to End Homelessness*. London: Homeless Link.
- Homeless Link., (2010) *Staying In: Understanding Evictions and Abandonment from London's hostels*. London: Homeless Link.
- Homelessness and Rough Sleeping Action Group (HRSAG) (2018) *Ending Homelessness The report on the final recommendations of the Homelessness and Rough Sleeping Action Group*. Available from:
<https://beta.gov.scot/publications/homelessness-and-rough-sleeping-action-group-final-report/>
- Hoch, C. (2000) Sheltering the homeless in the US: social improvement and the continuum of care. *Housing Studies*. 15: 865-876.
- Hughes, B. and Patterson, K. (1997) The Social Model of Disability and the Disappearing Body: Towards a Sociology of Impairment. *Disability and Society* 12(3): 325-340.
- House of Commons (2004) *Housing the Homeless*. HC 559. 20th May 2004. House of Commons: Committee of Public Accounts.
- The Housing Benefit Regulations (Northern Ireland) 2006
- Irving-Clarke, Y. (2019) *Supported Housing: Past, Present and Future*. London: Routledge
- Isaksen, R. K. (2016) Reclaiming Rational Theory Choice as Central: A Critique of Methodological Applications of Critical Realism. *Journal of Critical Realism*. 15(3): 245-262.
- Johnsen, S. (2013) *Turning Point Scotland's Housing First Project Evaluation: Executive Summary*. Edinburgh: Heriot-Watt University.
- Johnsen, S., and Teixeira, L. (2010) *Staircases, Elevators and Cycles of Change*. London: Crisis.

- Johnsen, S., and Teixeira, L. (2012) 'Doing it Already?': Stakeholder Perceptions of Housing First in the UK. *International Journal of Housing Policy*. 12(2): 183-203
- Johnson, R. (2010) Complex Trauma and Homelessness Work. *Housing, Care and Support*. 13(2): 48-49
- Jones, K. (1972) *A History of the Mental Health Services*. London: Routledge.
- JRF (2016) *UK Poverty: Causes, Costs and Solutions*. York: JRF.
- Kargas, N., Harley, K.M., Roberts, A., and Sharman, S. (2019) Prevalence of clinical autistic traits within a homeless population: barriers to accessing homeless services. *Journal of Social Distress and Homelessness*. 28(2): 90-95. DOI: 10.1080/10530789.2019.1607139
- Keats, H., Maguire, N., Jonson, R., and Cockersell, P. (2012) *Psychologically Informed Services for Homeless People. A Good Practice Guide*. Southampton: University of Southampton.
- Keenan, C., Miller, S., and Hanratty, J. (2019) *Accommodation-based Interventions for Individuals Experiencing, or at Risk of Experiencing, Homelessness: A Network Meta-analysis*. The Campbell Collaboration. https://www.campbellcollaboration.org/library/homelessness-accommodation-based-interventions-network-meta_analysis.htm
- Kelso, T., French, D., and Fernandez, M. (2005) Stress and Coping in Primary Caregivers of Children with a Disability: A Qualitative Study using the Lazarus and Folkman Process Model of Coping. *Journal of Research in Special Educational Needs*. 5(1): 3-10.
- Kertesz, S., Mullins, A. N., Schumacher, J. E., Wallace, D., Kirk, K. and Milby, J. B. (2006) Long term work and housing outcomes among treated cocaine-using homeless persons. *Journal of Behavioral Health Services & Research*. 34: 17-33.
- King, P. (2008) Memory and exile: Time and place in Tarkovsky's Mirror. *Housing, Theory and Society*. 25(1): 66-78.
- Kresky-Wolff, M., Larson, M. J., O'Brien, R. W. and McGraw, S. A. (2010) Supportive housing approaches in the Collaborative Initiative to help end Chronic Homelessness (CICH). *Journal of Behavioral Services & Research*.

- Kuhn, R., & Culhane, D. (1998) Applying Cluster Analysis to Test a Typology of Homelessness by Pattern of Shelter Utilization: Results from the Analysis of Administrative Data. *American Journal of Community Psychology*. 26(2): 207-23.
- Lazarus, R. S. (1999) *Stress and Emotion: A New Synthesis*. New York: Springer.
- Lazarus, R.S. (1993) From Psychological Stress to the Emotions: A History of Changing Outlooks. *Annual Reviews Psychology*. 44, 1-21.
- Lazarus, R.S. and Folkman, S. (1984) *Stress, Appraisal and Coping*. New York: Springer Publishing Company.
- Leca, B., and Naccache, P. (2006) A Critical Realist Approach to Institutional Entrepreneurship. *Organization* 13(5): 627–651.
- Leng Teo, P., and Yu-Lung Chiu, M. (2016) An Ecological Study of Families in Transitional Housing – ‘Housed but not Homed’. *Housing Studies* 31(5): 560-577.
- Mackie, P., Johnsen, S., and Wood, J. (2017) *Ending Rough Sleeping: What Works? An International Evidence Review*. London: Crisis.
- Maguire, N., Johnson, R., and Vostanis, P. (2010) *Mental Health Good Practice Guide: Meeting the Psychological and Emotional Needs of Homeless People*. Communities and Local Government and National Mental Health Development Unit.
- Mallon, S. (2016). *Knowledge Exchange Seminar Series: The role of paramilitary punishment attacks and intimidation in death by suicide in Northern Ireland*. Belfast: Northern Ireland Assembly
- Marcus, A. (2003) Shelterization Revisited: Some Methodological Dangers of Institutional Studies of the *Homeless*. *Human Organisation*. 62(2): 134-142.
- Matthieu, M. M., and Ivanoff, A. (2006) Using Stress, Appraisal and Coping Theories in Clinical Practice: Assessments of Coping Strategies after Disasters. *Brief Treatment and Crisis Intervention*. 6, 337-348.
- May, J., Cloke, P. and Johnsen, S. (2006) Shelter at the margins: New Labour and the changing state of emergency accommodation for single homeless people in Britain. *Policy & Politics*. 34(4): 711–729.
- Mayday Trust (no date) *Wisdom from Behind Closed Doors: Capturing the Voices of People Living in Supported Accommodation, Sleeping Rough and Sofa-surfing*. Mayday Trust.

- Mayor of London and Department of Health (2015) *The Mayor's Housing Covenant: Homelessness Change and Platform for Life Fund*. London: Greater London Authority.
- McCarthy, L. (2018) (Re)conceptualising the boundaries between home and homelessness: the unheimlich. *Housing Studies*. 33(6): 960-985.
- McMordie, L. (2018) *Chronic Homelessness and Temporary Accommodation Placement in Belfast*. Edinburgh: Heriot-Watt University.
- McMordie, L. (2019) The Homeless Person in Contemporary Society. *Housing Studies*. 34(6): 1064-1065, DOI: [10.1080/02673037.2019.1626597](https://doi.org/10.1080/02673037.2019.1626597)
- McMordie, L. (2021) Avoidance strategies: stress, appraisal and coping in hostel accommodation. *Housing Studies*. 36 (3): 380-396.
- McNaughton Nicholls, C. (2008) *Transitions through Homelessness: Lives on the Edge*. Hampshire: Palgrave MacMillan.
- McNaughton Nicholls, C. (2009) Agency, Transgression, and the Causation of Homelessness: A Contextualised Rational Action Analysis. *European Journal of Housing Policy*. 9(1): 69-84
- McNaughton Nicholls, C. (2010) Housing, Homelessness and Capabilities. *Housing, Theory and Society*. 27(1): 23-41. DOI: 10.1080/14036090902764588
- McPherson, P., Krotofil, J., and Killaspy, H. (2018) *What Works? Toward a New Classification System for Mental Health Supported Accommodation Services: The Simple Taxonomy for Supported Accommodation (STAX-SA)*. *International Journal of Environmental Research and Public Health*. 15. doi:10.3390/ijerph15020190
- Mead, L. (2011) *Expanding Work Programmes for Poor Men*. Washington: American Enterprise Institute Press.
- Mitchell, F., Newburger, J., Radebe, D., and Rayne, R., (2004) *Living in Limbo: Survey of Homeless Households Living in Temporary Accommodation*. London: Shelter.
- Moors, A. (2014) Flavors of Appraisal Theories of Emotion. *Emotion Review*. 6(4): 303–307.
- Murphy, E. (1991) *After the Asylums: Community Care for People with Mental Illness*. London: Faber & Faber,

- Murray, R., Baier, M., North, C., Lato, M., and Eskew, C. (1997) One Year Status of Homeless Mentally Ill Clients Who Completed a Transitional Residential Programme. *Community Mental Health Journal*. 33(1): 43-50.
- National Alliance to End Homelessness (2010) *What is a Continuum of Care*. [Viewed 01 December 2018]. Available from: <https://www.nationalallianceendoendhomelessness.org/resource/what-is-a-continuum-of-care/>
- National Audit Office (2017) *Homelessness*. Newcastle: National Audit Office.
- Nagel, T. (1979) The Limits of Objectivity. *The Tanner Lecture on Human Values*. Delivered at Brasenose College, Oxford University.
- Nicholas, J., Volmert, A., Busso, D., Pineau, M.G., O'Neil, M., and Kendall-Taylor, N. (2018) *Reframing Homelessness in the United Kingdom: A Frameworks MessageMemo*. Frameworks Institute.
- North Harbour Consulting (2011) *Strategic Review of Supported Accommodation in Northern Ireland by the Supporting People Programme*. Belfast: North Harbour Consulting.
- Northern Ireland Housing Executive (2005) *Supporting People, Changing Lives*. Belfast: NIHE.
- Northern Ireland Housing Executive (2012) *Homelessness Strategy for Northern Ireland 2012-17*. Belfast: NIHE.
- Northern Ireland Housing Executive (2012a) *Housing Related Support Strategy: 2012-2015*. Belfast: NIHE/SP.
- Northern Ireland Housing Executive, The Welcome Organisation, Depaul, and Belfast City Centre Management. (2016) *Belfast Street Needs Audit*. Belfast: Northern Ireland Housing Executive.
- Nussbaum, M. C. (1992) Human functioning and social justice: in defence of Aristotelian essentialism. *Political Theory*. 20(2): 202–246.
- Nussbaum, M. C. (2003) Capabilities as fundamental entitlements: Sen and global justice. *Feminist Economics*. 9(2): 33–59.
- Nussbaum, M. (2011) *Creating Capabilities: The Human Development Approach*. Cambridge: Harvard University Press.

- Nussbaum, M. (2013) *Political Emotions: Why Love Matters for Justice*. Cambridge: Harvard University Press.
- Nussbaum, M. (2016) *Anger and Forgiveness: Resentment, Generosity and Justice*. New York: Oxford University Press.
- O'Connor, J. (1995) *The Workhouses of Ireland: The fate of Ireland's Poor*. Anvil Books
- O'Hare, P. (2007) Merseyside, the first harm reduction conferences, and the early history of harm reduction. *International Journal of Drug Policy* (18)2: 141-144.
- O'Neil, M., Pineau, M., Kendall-Taylor, N., Volmert, D., and Stevens, A. (2017) *Finding a Better Frame: How to Create More Effective Messages on Homelessness in the United Kingdom*. Frameworks Institute.
- O'Sullivan, E., and O'Donnell, I. (2012) *Coercive Confinement in Ireland: Patients, Prisoners and Penitents*. Manchester: Manchester University Press.
- O'Sullivan, E. (2016) Ending Homelessness in Ireland: Ambition, Adversity, Adaptation? *European Journal of Homelessness*. 10(2): 11-39
- Oliver, C. (2012) Critical Realist Grounded Theory: A New Approach for Social Work Research. *British Journal of Social Work*. 42: 371–387.
- Olvitt, L. L. (2017) Education in the Anthropocene: Ethicomoral dimensions and critical realist openings. *Journal of Moral Education*. 46(4): 396-409.
- Padgett, D., Henwood, B., and Tsemberis, S. (2016) *Housing First: Ending Homelessness, Transforming Systems, and Changing Lives*. New York: Oxford University Press.
- Parsell, C. (2010) Homeless is what I am, not who I am: Insights from an inner-city Brisbane Study. *Urban Policy and Research* 28(2): 181-194.
- Parsell, C. (2018) *The Homeless Person in Contemporary Society*. New York: Routledge.
- Parsell, C., and Parsell, M. (2012) Homelessness as a Choice. *Housing, Theory and Society*. 29(4): 420-434.
- Patient and Client Council (2015) *Issues Faced by People who are Homeless in Accessing Health and Social Care Services*. Belfast: Patient and Client Council.

- Paulmann, S., Furnes, D., Bøkenes, A. M., and Cozzolino, P. J. (2016) How Psychological Stress Affects Emotional Prosody. *PLOS: ONE*. 11(11): 1-21.
- Pawson, H. (2007) *Local Authority Homelessness Prevention in England: Empowering Consumers or Denying Rights?* *Housing Studies*. 22(6): 867-884.
- Pilgrim, D. (2017) Critical Realism, Psychology, and the Legacies of Psychoanalysis. *Journal of Critical Realism*. 16(5): 468-482.
- Pleace, N., Fitzpatrick, S., Johnson, S., Quilgars, D., and Sanderson, D., (2008) *Statutory Homelessness in England: The Experience of Families and 16–17-Year-Olds*. London: Communities and Local Government.
- Pritchard, C. (2010) *An Evaluation of the Devon Individualized Budget Project to Encourage Rough Sleepers into Accommodation*. Exeter: Exeter City Council
- Prochaska, J. O., & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. *Journal of Consulting and Clinical Psychology*. 51(3): 390-395.
- Prochaska J.O., DiClemente C.C. (1986) Toward a Comprehensive Model of Change. In: Miller W.R., Heather N. (eds) *Treating Addictive Behaviors*. *Applied Clinical Psychology, vol 13*. Boston: Springer
- Quilgars, D., Johnsen, S. and Pleace, N. (2008). *Youth homelessness in the UK, A decade of progress?* York: Joseph Rowntree Foundation.
- Reisenzein, R. (2019) Cognition and Emotion: A Plea for Theory. *Cognition and Emotion* 33(1): 109–118.
- Ridgway, P., and Zippel, A. M. (1990) The Paradigm Shift in Residential Services: From the Linear Continuum to Supported Housing Approaches. *Psychosocial Rehabilitation Journal*. 13: 11-31.
- Rose, N. (1998) *Inventing Our Selves: Psychology, Power and Personhood*. Cambridge: Cambridge University Press.
- Rosengard, A. (2001) *The Future Role of Hostels for Homeless People*. Edinburgh: Scottish Executive.
- RSM McClure Watters (2015) *An Evaluation of Accommodation Based Services Funded by Supporting People*. Belfast: NIHE.

- Rutzou, T. (2016) What are the Criteria of Judgmental Rationality? *Critical Realism Network: Theoretical Reflections*. Available from:
<http://criticalrealismnetwork.org/2016/07/13/rationality/>
- Sahlin, I. (1998) The Staircase of Transition. *National Report to the European Observatory on Homelessness 1997*. Brussels: FEANTSA.
- Sahlin, I. (2005) The Staircase of Transition. *The European Journal of Social Science Research*. 18(2): 115-136.
- Sahlin, I. (2013) Preparing or Postponing? *European Journal of Homelessness*. 7(2): 303-309.
- Salvation Army (no date) *Lifeshouses: Supported Housing*. Online: Salvation Army.
<https://www.salvationarmy.org.uk/homelessness/lifeshouses>
- Sayer, A. (1992) *Method in Social Science: A Realist Approach*. 2nd Edition. London: Routledge.
- Scherer, K. R. (2009) The Dynamic Architecture of Emotion: Evidence for the Component Process Model. *Cognition and Emotion*. 23: 1307–1351.
- Scherer, K. R., and Moors, A. (2019) The Emotion Process: Event Appraisal and Component Differentiation. *Annual Review of Psychology*. 70(1): 719–745.
- Scottish Government (2020) *Ending homelessness together: Updated Action Plan - October 2020*. Online: Scottish Government. <https://www.gov.scot/publications/ending-homelessness-together-updated-action-plan-october-2020/>
- Scottish Housing Regulator (2014) *Housing Options in Scotland: A Thematic Inquiry*. Edinburgh: Scottish Housing Regulator.
- Scott, D., with Bhaskar, R. (2015). *A Theory of Education*. Springer.
- Sen, A. (1984) Rights and Capabilities, in: A. Sen (Ed.), *Resources, Values and Development*. Oxford: Blackwell.
- Sen, A. (1993) Capability and well-being, in: M. Nussbaum & A. Sen (Eds), *The Quality of Life*. Oxford: Oxford University Press.
- Sen, A. (2004) Capabilities, list, and public reason: continuing the conversation. *Feminist Economics*. 10(3): 77–80.
- Somerville, P., and Bengtsson, B. (2002) Constructionism, Realism and Housing Theory. *Housing, Theory and Society*. 19: 121-136.

- Stake, Robert E. (2006) *Multiple Case Study Analysis*. Guilford Publications. Kindle Edition.
- Stefancic, A. and Tsemberis, S. (2007) Housing First for long-term shelter dwellers with psychiatric disabilities in a suburban county: a four-year study of housing access and retention. *Journal of Primary Prevention*. 28: 265-279.
- Steffansen, R. (2016) Critical Realist Methodology Guiding Theory Development: The Case of the Norwegian Second Home Ownership Paradox. *Journal of Critical Realism*. 15(2): 122-141.
- Stewart, B. R. A. (2018) Housing Rites: Young People's Experience of Conditional Pathways out of *Homelessness*. *Housing Studies*.
DOI: 10.1080/02673037.2018.1520818
- St Mungo's (no date) *Save Hostels Rebuild Lives*. Online: St Mungo's.
https://www.mungos.org/app/uploads/2018/03/Save_Hostels_Report_updated.pdf
- Swain, J. (2021) *Not mission impossible: An evidenced-driven approach to ending homelessness is within our grasp*. 28 May. Online: Centre for Homelessness Impact.
<https://www.homelessnessimpact.org/post/jeremy-swain>
- Tainio, H. and Fredriksson, P. (2009) The Finnish homelessness strategy: from a 'staircase' model to a 'housing first' approach to tackling long-term homelessness. *European Journal of Homelessness*. 3: 181-199.
- The Bamford Review of Mental Health and Learning Disability Northern Ireland (2007) *Promoting the Social Inclusion of People with a Mental Health Problem or a Learning Disability*.
- Theodorou, N., and Johnsen, S. (2017). Homelessness and Adverse Childhood Experience (ACE). *Homeless in Europe: Trauma and Homelessness*. Winter 2017: 4-6.
- Timonen, V. and Doyle, M. (2008) From the workhouse to the home: evolution of care policy for older people in Ireland, *International Journal of Sociology and Social Policy*, 28(3): 76-89. Doi.org/10.1108/01443330810862151
- Trembath, D., Germano, C., Johanson, G., Dissanayake, C. (2012) The experience of anxiety in young adults with autism spectrum disorders. *Focus on Autism and Other Developmental Disabilities*. 27 (4): 213 – 224.

- Tsemberis, S., Gulcur, L., and Nakae, M. (2004) Housing First, consumer choice, and harm reduction for homeless individuals with a dual diagnosis. *American journal of public health*. 94(4): 651–656.
- Tsemberis, S. (2010) *Housing First: The Pathways Model to End Homelessness for People with Mental Illness and Addiction Manual*. Minnesota: Hazelden.
- Vohra, R., Madhavan, S., & Sambamoorthi, U. (2016) Emergency department use among adults with Autism Spectrum Disorders (ASD). *Journal of Autism and Developmental Disorders* 46: 1441–1454.
- Watts, B. (2013) *The Impact of Legal Rights to Housing for Homeless People: A Normative Comparison of Scotland and Ireland*. University of York.
- Watts, B. (2013) Rights, needs and stigma: A comparison of homelessness policy in Scotland and Ireland. *European Journal of Homelessness*. 7(1): 41–68.
- Watts, B. (2014) Homelessness, empowerment and self-reliance in Scotland and Ireland: The impact of legal rights to housing for homeless people. *Journal of Social Policy*. 43(04): 793–810.
- Watts, B. and Blenkinsopp, J. (2021) Valuing Control over One’s Immediate Living Environment: How Homelessness Responses Corrode Capabilities. *Housing, theory, and society*. 1–18. Doi: 10.1080/14036096.2020.1867236.
- Watts, B., Littlewood, M., Blenkinsopp, J., and Jackson, F. (2018) *Temporary Accommodation in Scotland: Final Report*. Scotland: Social Bites.
- Watts, B, McMordie, L, Espinoza, M, Welker, D & Johnsen, S. (2021) *Greater Manchester’s A Bed Every Night programme: An independent evaluation (Full Report)*. Edinburgh: Heriot-Watt University.
- Williams, M. & May, T. (1996) *Introduction to the Philosophy of Social Research*. London: UCL Press
- Williams, M. (2003) The Problem of Representation: Realism and Operationalisation in Survey Research. *Sociological Research Online*. 8(1). Available from: <http://www.socresonline.org.uk/8/1/williams.html>.
- Wilson, W., and Barton, C. (2018) Comparison of homelessness duties in England, Wales, Scotland, and Northern Ireland. *Briefing Paper Number 7201*. 5th April 2018. London: House of Commons Library.

- Wolcott, H. F. (1990). Making a Study 'More Ethnographic'. *Journal of Contemporary Ethnography* 19: 44-72.
- Woodhall-Melnik, J.R., and Dunn, R.J. (2015) A Systematic Review of Outcomes Associated with participation in Housing First Programs. *Housing Studies*. 31(3): 287-304.
- Wynn, D., and Clay K. W. (2012) Principles for Conducting Critical Realist Case Study Research in Information Systems. *MIS Quarterly* 36(3): 787–810.
- Yeung, H. W. (1997) Critical realism and realist research in human geography: A method or a philosophy in search of a method? *Progress in Human Geography* 21: 51–74.
- Y-Foundation (2017) A Home of Your Own: Housing First and Ending Homelessness in Finland. Keuruu: Otava https://ysaatio.fi/assets/files/2018/01/A_Home_of_Your_Own_lowres_spreads.pdf
- Yin, R. K. (2009) *Case Study Research: Design and Methods* (4th Edition). LA: Sage Publishing
- Yin, R. K. (2018) *Case Study Research Design and Methods* (6th Ed.). LA: Sage Publishing.