

Appendix 1

Then and Now

Then

In our early days (late 70's onwards) the problems were dictated like now by the conditions of the time.

1. Psychiatric hospitals where many people were housed out of sight were closed but large numbers of people were accommodated in hostels run by voluntary agencies as institutionalised but cheaper to run. Compassionate staff struggled to cope with limited or no services in the community.
2. The majority of people came from institutions eg. Letterfrack, Artane etc. History has helped us focus on this issue but many people are still hurting from that experience.
3. All the people we met then came from the island of Ireland or our nearest neighbour, the United Kingdom.
4. The majority of these people continued to live their life in institutions including the army, hostels, psychiatric hospitals and prison.
5. The health problems were the same as today linked to lifestyle with little or no compliance with a care plan. TB was common but there were specific services in place at that time. AIDS was also a problem with growing fear and stigma.

Now

- Increased population with a number of families now becoming homeless. However we don't work with families or children.
- A range of addiction problems including alcohol, drugs and gambling etc.
- We have a huge drug problem which developed at great speed where the answer was in most cases replacing one drug with another one also addictive. This has been allowed to continue for decades where brave voices went unheard.
- Large numbers of non-Irish nationals exist in poverty on the street as I referred to earlier.
- Over-crowding is an ongoing issue in individual homes of low income and in asylum centres (resulting in, among other problems, rising levels of Covid-19 infections)
- Society in Ireland is only now admitting to the potentially widespread problem of abusive/violent relationships in which many people are trapped.
- Emphasis on success more pointed than before with many people feeling an enormous sense of failure if they are not deemed to have achieved.
- Accepting differences is not just about race, class, religious beliefs or none, gender, colour or ethnicity; it is also about people whose life chances have failed them in our eyes but who have a valuable contribution to make. This is reflected in the number of people now employed in the homeless "industry".
- Insufficient psychiatric hospital accommodation and very limited community care services for people with serious mental health problems.
- A complete lack of convalescent care centres or centres of hospitality and respite such as those run by the religious orders in the past.

Recommendations

- Agencies must ensure we are not creating dependency and we must encourage people we work with to accept some responsibility, however small. This is essential if we are properly treating people as adults and encouraging them to exert whatever control they have over their lives, no matter how limited their choices might be.
- Promoting peoples' rights and helping them access their rights requires accurate information being available otherwise vulnerable people can be exploited for the wrong reasons.
- People have a right to privacy; this includes not having their pictures used to promote agencies, especially for fundraising. Their permission should be sought and should be based on informed consent.
- Only open, mature discussion with all ideas explored, where the blame game isn't the main focus -- as is too often the case -- will lead to a productive outcome.
- Halfway houses, well run and supervised, and not time-limited would go some way to addressing the needs of the people we work with.
- Less intrusion into people's lives with limited pressure only to "change" to meet requirements for Grant Aid
- We hear too often of open drug taking in some hostels; however this is not always possible to verify. Clarification on this by the funding agencies would go a long way to reassuring staff and residents.
- Service agreements should not be seen as just ticking a box. More transparency is required about service planning.
- The more complex, "difficult" people require additional help and care and this could best be achieved by a greater understanding of the human condition -- coupled with common sense.
- Success of an agency should not always be measured by "through put" but rather by how people are helped to cope, in a sustainable way, in an ever challenging world.
- It is also important to acknowledge that not all problems can be solved and not everyone wants to be "fixed".