

Journal of Adolescent Health and Welfare

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***Special Feature Young Homeless
and Runaways***



Letter from the editor -

Dear Colleagues,

Welcome to the latest journal. You may have noticed that the timing of some of the journals has been a bit erratic over the last year - we were intending to produce three journals in 1994 but somehow we went into a time warp and the months of shot by at an alarming rate. So this is only the second one dated '94 and I hasten to get it out to you as old father time is creeping up on Big Ben ready to ring out the old year and the revellers in Trafalgar Square brave the cold to sing Auld Lang Syne. Mea culpa! No matter - I will try to time things better next year (tomorrow!).

We had a very successful meeting at the Royal Society of medicine again in October and confronted the problem of 'Child Protection and the family'. This coincided with the International Year of the Family which is just drawing to a close. Most voluntary agencies seem to regard the year as a failure so I hear. There has been a lot of criticism in the press this month of the Child Support Agency and policies which seem to have placed added strains on families. The trend towards fewer marriages, more single parent homes, and high divorce rates continues.

Nevertheless our meeting was a success and we will be publishing the proceedings in a few month's time. Continuing on that theme we produced a new book 'Bonds and Boundaries - Child protection and the family'. Our Youth Support publications section has expanded and we have produced several new titles this year. They now fall into two broad groups - 'scientific' publications and general titles published in aid of the charity. Hence do not be surprised if some of the titles seem to be on unrelated subjects.

This edition includes the report of our 1992 meeting on Homeless Youth and runaways. The theme of the other contributions continues on this note. Next volume will cover the 1993 meeting on Youth and Violence .. then we should be up to date!

Two reminders for the following months - the International meeting in Vancouver in March - and our tenth meeting at the RSM in October - please join us!

Best wishes,

Diana Birch

Director Youth Support



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Youth Support - Family Resource Centre

In the United Nations **International Year of the Family** we are proud to announce the further development of our **family Work**. A facility which was first developed to work with very young mothers is now accepting referrals of families of all ages - we have even worked with three generations - a true example of 'breaking the cycle'. We have full facilities for both residential and day assessment of families and for longer term rehabilitation including outreach work. Thanks to the efforts of our fund raising committee we have also acquired full video facilities for recording of sessions, disclosure, video feedback in therapy and 'ear bug' tuition of parenting skills.

For further information contact:-

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"When I told my manager that I wanted to send a family of six right across the country for an assessment - he thought I was mad! But the amount of information we acquired from a residential assessment was more than we could have ever put together in a year of intensive social work. We were able to reach concrete conclusions and make decisions to safeguard the welfare of the children - well worth the expense!"

**Youth Support Forum on Adolescent Health and Welfare
7th Annual Meeting 22nd October 1992**

"Homeless Youth - How do we tackle the problem?"

Transcript of the proceedings.

Introduction - Dr Diana Birch - Director Youth Support

It is nice to see so many new people, new faces at our meeting this year. We have been having meetings here at the Royal Society of Medicine for the last seven years and I still think our gatherings do come as a surprise - if not a shock - to some at the Royal Society - we must have the youngest audience of any group here. We have always made a point of including young people in our meetings.. A much more typical audience is that which you have all seen wandering off into the lecture hall next door - older, besuited, nearly all male. I do think that the medical profession, my profession - does need shaking up from time to time - because there are a number of issues which we just don't look at. A lot of people are very comfortably off in a National Health Service which is rapidly privatising and they are just avoiding certain issues because they are not comfortable to work with. One such issue is adolescence and another is homelessness and poverty.

I would like to tell you a little bit about Youth Support itself before we start - Youth Support was started in 1985/6 - a group of us broke away from the statutory organisations - social services, education and the health service and we set up a charity and began to do work

with young people. Some of the issues we looked at to start with were teenage pregnancy, contraception and sexuality and also working with abused young people because it is my opinion that very young children get some help with regard to abuse and child protection - but when you become a teenager, people look at you as if you should be able to sort your problems out for yourself. When you have a problem - Either it's your parents fault and so your parents should do something about it - or it's something you'll grow out of or maybe you're a bit of a delinquent and that's why you have problems. So young people tend to get forgotten by the medical profession. We have been trying to do quite a bit of work particularly in south London - we have a centre in south London and also we travel widely talking to groups and doing outreach work. It is good to see so many young people in the audience tonight and also there are some young people here who live in our unit and I hope you will have a chat with them afterwards. This evening we are concentrating on the problems of homeless Youth and particularly on the 'Runaway' type of homeless youth. I think there is a difference obviously between homelessness in terms of some one just not

having somewhere to live when you are going through adolescence growing up and moving away from their families in the natural sort of way - when their families are there for some kind of natural support. And some of the young people who perhaps don't have a family or are away from that family for some reason or another and are totally without any form of support and who may just be living on the street.

There are a lot of problems associated with homelessness which we can sometimes forget about. About a decade ago - twelve years ago to be precise, the president of the Royal College of Physicians, Douglas Black, produced a report which was called 'Inequalities in Health' and in that he put in a lot of very important information which was in many ways absolutely ignored. He drew a lot of inferences to the fact that people who were unemployed, people who were on low incomes, people who were in poor housing, had health problems associated with their life styles and he particularly drew attention to the health of children who were brought up in overcrowded homes or inadequate homes or whose families had been in bed and breakfast hostels and in inappropriate housing. That was a very important report and in twelve years we have really done nothing about following up some of these issues. People who are homeless are more likely to suffer from addictions, alcoholism, drug abuse and so on because of the fact that they are on the street and because they have to find alternative ways to survive -

but we also must not forget that they have higher rates of all sorts of other illnesses - infections, malnutrition, and so on - even in a country such as ours which is supposed not to be a third world country.

Last year at our meeting we discussed the possibility of doing a comparative study of homeless youth - looking at the population of runaway youth in London and comparing data with that obtained in our Russian (Urals) project and that which had been gathered in the USA by colleagues in Los Angeles children's hospital. The papers produced by Richard MacKenzie, Julia Pennbridge and colleagues are available for perusal after the meeting and I will draw your attention to some details from these reports in a moment.

I also showed a video recording to the meeting last year of some of the runaway children we were working with in the Soviet Union. The Russian children were at one end of the scale - children who were desperately poor with absolutely nothing - and who were running vast distances across the Soviet Union - getting themselves on trains and ending up thousands of miles from their homes with nothing but the rags they stood up in. They were ridden with lice and some of the shots we showed on the video were quite harrowing, youngsters with hair shaved in drab institutional clothes and with absolutely nothing of their own. A lot of those children had run away from situations where they were abused at home.

We could say that at the other end of the scale we have the children in Hollywood, surrounded by the twin evils - the wealth and squalor of LA. In London perhaps we are half way between. Generally speaking in England we tend to see the trends from America coming to our young population about one or two years later - but unfortunately we usually fail to learn from these patterns and make advance plans for prevention. In many situations if we saw what was happening in the states we could say - OK this is going to happen here in a couple of years time so let's get ready for it . let's provide some services - but no, we generally sit by and hide our heads in the sand until it's really upon us.

So let's look at what has been happening with the street youth in America. Hollywood is supposed to be the place with the streets paved with gold as it were, but in actual fact Hollywood is one of the poorest, seediest parts of California and of the young people who had run away to Hollywood 60% of them had been physically abused at home. Three quarters had been severely maltreated in the year before they ran away; many had been multiply abused and the researchers divided the sample up into kids who had not been abused; ones who had been physically abused; those who had been sexually abused and those who had been multiply abused and most of the street kids had been multiply abused. Other reasons for running away in the kids who had not been abused were parental death and family breakdown.

What problems did they have? Most had problems related to survival - how did they get enough money to live? Many ended up practising what in the USA they call 'survival sex'; prostituting themselves in order to buy food, clothing and essentials to live on the street and they were therefore also exposing themselves to the risk of HIV and other sexually transmitted diseases. At the moment the Hollywood area has apparently one of the highest rates of HIV infection among young people in America. Two years ago we were hearing that it was the youth in New York who were having the highest rates - associated with Crack cocaine use - but now it would appear that the street and runaway youth have the biggest problem.

So being a runaway means a lot more than just not having a place to live and we are running into enormous medical problems with runaways and homeless and I think any one who has lived in London over the last few years has noticed the enormous change that there has been in the street population of London. It used to be predominantly older people and people who had been on the street a long time. The typical winos and meths drinkers who were down at the 'Elephant and Castle' and on the benches outside the 'Old Vic' and the medical problems were malnutrition, TB, alcoholism. But now we have young people who are out on the streets for whatever reason it might be and these young people are prey to abuse - they often run from abuse in another part of the country and they come to be further abused in London so they are

at risk of HIV, they are at risk of sexually transmitted diseases; and they are at risk of physically harm.

So what are we going to do about it ? The conclusion really which seems to be coming forward from lots of professionals of all different disciplines - is that what you need to do is to give much more professional support to young people when they run away from home. Have more hostels, move them more quickly from a hostel environment into better housing and to give them an opportunity to get some education and to earn money. So perhaps the message that we seem to be learning from runaway youth which could be transposed from just about any town in the world right from south America, Rio, Russia, America, is that it seems that kids run away from home for similar reasons and they run

away because they are unhappy, they try to run away to a better life and they often end up in a worse environment and just as with other problems the philosophy which we have at Youth Support is to try to give education so that young people can be self supporting and perhaps there is no other group of youngsters where it is more obvious that this is what is required.

* * * * *

We do have a program change - Peter Blakeley from the 'Safe in the City Project' Manchester had an accident this afternoon and was thus unable to be with us - this is a disappointment because the Children's Society was involved in our meeting last year and Peter was bringing some of their young people with him.

* * * * *



REGISTERED CHARITY

LEAVING HOME PROJECT

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Leaving Home Project (LHP) is the main housing education agency in England and Wales. LHP works with teachers, youth workers, and others concerned with young people leaving home. Our aim is to create opportunities for young people to explore the choices and decisions they will need to make around housing and independent living - before they leave home or care.

Established in 1984, LHP is now part of CentrepoinT Soho's National Development Unit. LHP is funded from a number of sources including Charity Projects, the Department for Education and the Baring Foundation. For further information on any aspects of our work, please contact us. We would be happy to help you.

"Working with Homeless Families and Children".

Dominic Fox - The Thomas Coram Foundation

Thank you for inviting me - A slight change of emphasis now, in that I work for the Thomas Coram Foundation which is an organisation which is just over 250 years old and part of the great British tradition of abandoning children on the streets unfortunately.

It was previously known as the foundling hospital and set up in 1739, the oldest children's charity in world. It was set up by a man called Thomas Coram who was a Sea captain who walked through London and was horrified to see children just left to die on the streets which is why when I go about my work and see young teenagers on the streets I cannot help but draw unpalatable parallels in a way. The children are older, but things have changed very little.

The Foundation has adapted however and the foundling hospital closed as the welfare state took over the health and welfare of young children. We have 5 childcare and adoption projects, an adolescent and leaving care project provides three houses possibly similar to Youth Support for young people leaving care with support, counselling and group work. A meeting place for teenagers and parents who have been estranged which provides for access - it is supposed to be an alternative to social service waiting rooms and provides a friendly child centred space which can provide supervised access. I have worked for the past 4 years on the homeless children's' project. We are a mobile force, working all over London and focus on

families with children who are homeless. We have four houses for children who are homeless. We do not work with single people but I have recently finished setting up a unit in central London in a large day centre for homeless single people. It is important that those who work with single homeless get together with those professionals who work with family homeless because the issues are the same - basically the lack of reasonably priced accommodation.

The homeless Children's Project brief is for families with children who are homeless. The single homeless issue is very visible and has caused great outrage and has thus tapped limited government funds- the media coverage of those living off the streets in winter has sparked projects such as the rough sleepers initiative and getting people off the streets and into temporary accommodation - it has not helped those living in bed and breakfast (B&B) accommodation and more housing associations have been entering the market. We were set up by Thomas Coram to intervene where there are large concentrations of homeless families with children who are not getting support systems. I have worked in large parts of North, east and central London - there is a separate team being set up by Barnardos working in South London but we do not go south of the river. Perhaps I could remind you of the reasons for becoming homeless - it is not through

fault of the families - usually there is no property available; at the moment a lot of people are homeless due to repossessed homes; there have always been refugees; those fleeing disaster, women fleeing domestic violence, those who have been staying with relatives who kick them out, variety of different reasons. The other reason which has been quoted by Peter Lilley a government spokesman last week was 'Young ladies who get pregnant just to jump the housing list' - this is an old chestnut which comes up time after time and it is both untrue and also very depressing really because even the Department of the Environment say ".... the majority of young parents who become homeless have experienced breakdown of a marriage or partnership, and most have previously had their own accommodation either as tenants and a growing number as housebuyers. The average age of young parents in temporary accommodation is the late 20s and only a very small proportion is unmarried teenage girls". It is important to nail these details, because when government departments distort these facts they are blaming and increasing the suffering of the very people who are already suffering as a consequence of the failure of their housing policy. It is also assuming that teenage mothers somehow fail - thankfully there is research now that shows that teenage mothers don't fail, teenage mothers often do remarkably well. Despite that we hear extreme statements made by

people such as Margaret Thatcher's advisor Bernard Ingham who said they were even coming down from Leeds to London to jump the housing queues!

There used to be 10,000 children in Bed and Breakfast accommodation each night in London. That figure has gone down but we now have a new figure of 42,000 homeless children in temporary accommodation in a wider area of London. They used to be in Kings Cross, Paddington and Victoria near main railway stations -but it has now spread to Barnet, Walthamstow, Merton- the suburbs are now becoming centres of homelessness and in the same way that Camden and Westminster were unable to cope with families in crisis now the outer boroughs are unable to cope with the numbers of homeless families with great need. Our team exists to help families and encourage local authorities and local groups to provide services.

The councils are moving people into self contained temporary accommodation quicker now. Families traditionally spent one year in B & B and 2 years in temporary accommodation, now it is a few months in B&B and 3 yrs temp accommodation. This means councils go further afield to find temporary housing. Lambeth place in Barnet for example, so doctor, school, family and friends links get lost in distant accommodation. Tower Hamlets place miles from peoples friends. The families are unsettled in the first place, they then get moved to the other end of London, then back again, so imagine the effect this has on children's schooling etc. It is

unsettling and causes great distress.

What do we do? We visit families where they live with a variety of approaches. We do sessions in B&B sitting rooms, and in hostels. We take in crates of toys, easels and do play sessions and attempt to counsel parents and play with children. We often get to know a great deal of intimate and painful details from families in a small time and this can be difficult to work with. We have to do casework very fast too and we do a lot of personal work, listening to people, giving them back some respect, some simple helping with housing applications. Lot of counselling peoples problems. The families are quite happy when we visit as they have no visitors otherwise. We organise a lot of outings to get them out of overheated rooms and cramped conditions. Families in B & B support each other in ways which restores faith in human nature when people around you seem not to care. As far as those who are moved to temporary accommodation is concerned our approach is different because they are isolated and may be placed in an area where they do not want to be identified as homeless which bears a certain stigma. We lend toys and books - this breaks the ice and gets their trust and then we can do counselling and let them talk to us. We visit them once per month and try to organise groups, outings to pantomimes. It is easier to give intense counselling in that situation where groups are placed closer together. We recruit some help from families themselves. We use

teenage children from refugee families to translate for others; we explain technical housing laws which can be traumatic for refugees interviews. Try to adapt to situations as they occur. In the past we worked with Somalis, Lebanese, Kurdish at the moment, Zaire. We try to reflect cultural background, always looking for good language books. Work in lot of different areas, Camden, Hackney, Westminster, Victoria - different areas every day. AT the moment we have an art group - art is a universal language and a Bengali Teenage Girls group in Bayswater.

We have recently been running a youth group in the London Connection near Trafalgar Square. These are mainly sleepers from the Strand and young people who have come down via the railway stations and make their first port of call Piccadilly circus and that area. It is very rough and ready and we get a lot of people newly off trains in some confusion, quite excited at being in London but not very successful at coping with some of the dangers.

Since 1991 increasing numbers of users started having babies and staff set up to deal with homeless youngsters started having to cope with babies in the day centre which is noisy, dirty and violent and not the place you would imagine you could take a baby and this worried me. However in the West End circuit the homeless street people have their support network and needed to see their friends. If they were rehoused in places out say in Swiss Cottage - they did not want to go to their local groups with babies, so the

centres asked us to help adapt and respond to this issue. We ran a young parents group each week for 2 hours for one year and half. We had three main themes - providing advice and support to prospective parents, work with parents with children along normal pattern of play for children and support for parents, in a way trying to ease them out of the centre by working with individuals to find more appropriate services in the areas they lived in. The atmosphere in the centre was tense, noisy and violent, so we partitioned off part of the cafe to provide space. We built up trust in parents and the more general membership. Thursdays became quiet for the entire membership who stopped throwing chairs around and were always protective of the children. We were encouraged by that. We went in when somebody gave birth in Trafalgar Square but mainly the parents did well. The babies were healthy and of good weights and the births were uncomplicated. They loved their children and they were remarkably well turned out and although a lot behave irresponsibly during pregnancy they all seem to exhibit responsible behaviour during groups. Some problems were related to inability to stop drinking, fighting, or staying out too late in the west end or did not choose perfect partners, but there were some women who tried very hard. Nearly all failed to get community care grants so they had no carpets, fridges and essentials and had problems when they did

get flats so we helped apply to trusts and mostly got small grants to help them. Most attended the centre only during the group to see their friends and kept out of west end otherwise which was a good sign. However there was an alarming level of violence in the group with assaults by members of the group - a pregnant woman struck in the stomach in Trafalgar square, one injured in the eye by a beer can, black eyes, cuts, retaliation and victims hospitalised - an incredible level of violence. It changed my view of pregnant women and opened my eyes - now if I saw a pregnant woman staggering across Trafalgar square late at night, I would keep out of her way if I were you!

The group ran on a permanent basis twice a week in the West End for 2 years and was helped with a grant from Capital Radio.

One last point we should consider is the Children's Act - I am concerned for children of homeless families who are a responsibility of the local authority and they should get services. Children under 18 and young single homeless people have rights under the Children's Act. Children in need who have been accommodated by Local Authority or who have left care aged under 21 have rights under the Children's Act to a care plan. I do not want to see the young children who I am currently working with in B&B under the arches in a few years time.

THE FAMILY HOME

THE CHILDREN ACT HAS NOW BEEN IN FORCE FOR ALMOST A year. It has given rights to children leaving care for the first time. But how far those rights are enforced still depends on where the child happens to be.

Leaving care at 18 can mean a council flat, a cheque for more than £1000 and a social worker for the next five years. Or it can mean a leaflet on benefits and the address of a hostel.

Since last October's Children Act, local authorities have had the legal duty to 'assist, befriend and advise' young people leaving care and considered in need, until they reach 21. Recognising that this group needed help (once left up to individual social workers) became law for the first time. After eight months and much frenzied activity by social services across the country, the effects are beginning to show. In some areas new schemes have started up, teaching skills such as cooking and budgeting. Money has been laid aside for grants and extra staff have been appointed. But in other boroughs, help remains minimal and young people who have been in care still face a kind of black hole after their 18th birthday.



WHEN THE CARING STOPS

One year after The Children Act was enforced, Harriet Swain investigates why the streets of London are still paved with homeless kids



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Comments and questions:-

DB: Of course one of the added hazards created by the decreasing age of street people is that as they get younger we are seeing women of childbearing age on the streets. Lack of antenatal care in this group is a very big problem. It seems you were lucky with your group but certainly there are problems with medical care, and people have reported particularly in some of the American studies that there have been lot of premature births, low birth weight and infant mortality associated with the lack of antenatal care on the streets. Low birth weight is associated with the poor diet associated with street living and of course alcoholism is an important factor - children may be born with foetal alcohol syndrome which may not be recognised at birth - we have had examples in our unit. Sadly the children you mention born on the streets are on the increase - and for many of your five year olds who you don't want to see sleeping under the arches - the way things are going - their fate has been sealed.

DF: Yes, I am pessimistic.

Q: How are you funded? I understand you have had money for small projects from charity donations and Capital radio but what of day to day expenses?

DF: Centres across London are funded by Trusts which are bending under the strain of work, local councils do not fund the homeless on streets. Government is going to have to fund in future.

DB: It is a shame that central government do not take more responsibility for this problem. Local authorities can so easily pass the buck - for example our local authority has said that they do not have a homeless problem although we know for fact from another source that there are at least 400 homeless in just one area of the borough - if you do not perceive a problem - you do not have to provide funding - it's as simple as that. Since the Children's Act came into force exactly a year ago very little has been done. The leaving care projects are a joke and the befriending programme has not happened. How can you befriend a homeless kid who has been moved from one borough to another.

Q: There are problems in Barnet - could you comment?

DF: Barnet is a very big borough, three housing associations work with us there and have an awful lot of temporary accommodation in Barnet.

Q: I am working in Barnet and we have problems because there are 6 local authorities placing in Barnet we have two soup kitchens operating in Barnet at the moment seeing between 70 and 120 people per day.

DB: Soup kitchens in Barnet? That's really something else!

Q: What level of success do you think you have with the families in your group?

DF: The bottom line is we kept families together. For example

with one mother when I went to see her in hospital there was a note on her hospital record that the child had to be taken into care. I persuaded the social worker that this was not necessary. Her history was of 15 different professionals involved in her case. I stuck my neck out, said it was over reaction. She almost did not get out of hospital with the child. Her probation officer called a network conference, the health visitor issued a missing persons notice and she was arrested for fare dodging. These were minor things but her behaviour had given hospital staff concern - really there were minor matters which were exaggerated because of the emphasis on child protection..

We had to do a lot of child protection work. I was generally happy with the way children were brought up there were concerns about children at various times. They needed someone to be advocate against system but I was not prepared to be blinded. It was to make them aware of stakes and how to play the system. Support them in a family and keep them together in difficult circumstances. The group were the most extreme group of young people I have worked with. There was a lot to do. After 18 months all the families were together and seem to be fine. I consider that a success story. But it was not just us or me - it was the group itself; giving status to parenthood, helped them grow up and plan ahead.

Q: Given that the government and the state are not really there to support people and the system is overloaded do you feel that you enable

families to stand up for themselves away from the system and stand up on their own two feet.

DF: Really families avoided the system with a bargepole. It was trying to get them aware of benefits and that Social Services had a role. Health services should be responding to their needs. Specialist health services exist for homeless in West End because General practitioners won't register them and they have to use accident and emergency departments at hospitals. They had to assert themselves to get services. We helped them to do this and to become more part of mainstream society. System preying on them to a certain extent. We could accompany them to solicitors and help communication.

Q: Talking about your west end project do you help with health services?

A: Always a problem for homeless families to get access to health services.

Q: It seems to me services are inefficient. I think that a lot of your services and these centres have a stigma attached and people don't necessarily want to go to them.

DF: What tends to happen is that you are running your organisation - you have budgets and targets; suddenly the families appear on your doorstep then disappear and I have seen schools where in Jan schools undersubscribed and in April had hundreds of children with no schoolplace; two years later they have gone. I like to think we can all adapt to

welcome homeless families but it tends to be a problem of too many or not enough - day care too, children miss out as they are often placed out of borough and do not get day care. This should change.

DB: Often they cannot get day care if mother is not working. I think one reason why you can provide a good service is that the attitude of your workers is right - it is so easy to set a family up to fail. You have all the ingredients there. A child born after mother has been on the streets, who probably drinks too much, not living in good conditions and therefore

tending to have a disordered household, difficulties with hygiene and feeding. A visiting carer could easily just clock up the problems 1,2,3,4, and the child gets taken into care. Whereas if you get someone who is going in and saying - well yes you obviously have these problems - so would anyone else in your situation - but you can still be a good mother with support. The trouble is often these families are perceived as problems and professionals do not want the responsibility of sticking their necks out and supporting them rather than condemning them.

HOMELESSNESS IN ENGLAND

- In 1992 148,250 households were accepted as homeless by councils in England (this figure includes about 6,000 households who were 'intentionally homeless'). Shelter estimates that this represents 426,000 individuals.
- In the first quarter of 1993 a total of 36,350 households were accepted as homeless by local authorities in England. This is an increase of 8% on the previous quarter.
- These figures are the tip of a very large iceberg because they only include those homeless households defined as being in "priority need" for rehousing. This does not, for example include the majority of single homeless people.
- Shelter estimates that there are up to two million unofficially homeless people in England.

THOUSANDS OF SINGLE HOMELESS PEOPLE

Shelter
THE NATIONAL CAMPAIGN FOR HOMELESS PEOPLE

- There are no comprehensive statistics for single homelessness nationally. In London alone the Association of London Authorities (ALA) and Single Homelessness in London (SHIL) have estimated that there are 140,000 single homeless people.
- It has been estimated that 30,000 single people in hostels in England and Wales needed rehousing in permanent accommodation in 1992.
- The 1991 Census recorded 2,674 people sleeping rough in England. The actual figure is likely to be much higher because of the difficulty in counting less visible homeless people, and those moving in and out of temporary accommodation.
- Shelter estimates that there are up 8,600 people sleeping rough in England. Sleeping rough is linked closely with low income and poor bargaining power in the housing market
- Shelter estimates that around 156,000 young people are homeless each year in Britain.

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YOUNG HOMELESSNESS

USUALLY leaving home is part of growing up, an entirely desirable and natural process. Sometimes it can be a response to an intolerable situation or because of the need to leave care or detention.

Young people who have been sleeping on the streets for some time often have serious problems. They may have poor physical health as a result of sleeping rough.

A significant proportion have mental health problems. Many try to escape their problems through alcohol or drug abuse.

These young people may feel the only way they can survive is by begging, crime or prostitution. They often have no trust left, and frustration sometimes boils over into violent or abusive behaviour.

LEAVING CARE OR DETENTION

Young people in Children's Homes are, like young people at home, subject to the pressures of growing up and wanting independence. Many run away because they are unhappy. Others may be forced to leave when the Local Authority no longer has a statutory responsibility for them. In common with young people leaving prison or juvenile detention, they are particularly likely to become homeless as they are unlikely to have friends or relatives who will take them in.

SHELTER estimates that there are 150,000 homeless young people in Britain. Young people are homeless for three main reasons. Firstly there is not enough housing. Secondly they have little money which would give access to it, and thirdly they face various forms of discrimination.

**Can you give him
a bed for the night**



A NATIONAL SCANDAL



Len Bass - Teenage Information Network (TIN)

"Counselling Homeless Youth"

It is good to be here but sad that I have to talk about the sorry state of our country and of our young homeless. I speak from an experienced viewpoint working with homeless young people.

Earlier this year we had 200,000 young people in London alone homeless. Today a few more thousands added to that list.

I think it is a frightening thing that we care so little for young people and we need to consider - if we don't care for them now how will they care for us when we are old? When we are pensioners and we need help ourselves. So a little compassion is important for everyone - even for selfish reasons.

Tin is a voluntary organisation and I think sometimes that our programmes are too wide - we seek to support the young in everything - in every field, and if we do not have the answer ourselves we help them look for it. We cannot cope sufficiently because of lack of resource. We operate on an equal opportunity basis. We are sad to see so many young white people suffering most, especially if they are strong and independent - therefore some advice for young people is to show some weakness in case someone looks at your case. If they are too independent and try to do things themselves - it can act against them because others won't help. I have a list of white lies drawn up for interviews at different places. Different criteria

for each place to make the young appear more needy and able to get through to the help available.

We negotiate for young people. They do not see us as part of an institution, but as friends. The listening agency. Whatever it is we try to turn negatives into positives. Young people are sometimes afraid to explain themselves, who they are and what they are going through - some are going through changes of sexuality and they need to be able to talk openly in a friendly place where they can trust us. Every case is dealt with on a confidential basis. My friends have spoken about work with mixed cultures and background and ability. Some things have already been mentioned about the homeless; one common factor is the breakdown of the family unit, where many parents have their own agendas of unhappiness, unemployment and other problems they may be unable to cope with changes in growing people with the stresses involved in growing up.

The homeless still behave like other young people - with the same needs but their resources, their income is quite small and they cannot share. If young people are still sharing accommodation with parents they do not get full income support. There are many different kinds of institutional harassment, unable to get answers from school, college, Social

Services - who try to hide behind organisations. Bedroom sharing, age differences, privacy, etc. all cause overcrowding problems in the home and sometimes sexual relationships begin early. For those in other cities - unemployment makes London seem to be an attraction. So they come to London but the number of young faces out there sometimes with a smile but empty. Abuse is great. We need some time to think of various types and they have to flee from that. Living on fast food, begging for food, whatever. Vulnerable on the streets. Someone mentioned refugees - not just from other countries but fleeing here - from homes - to where? Abuse is a big reason why young people flee. Ex-prison offenders - where do they go. No place. Young people going through change of identity, young people who are gay, doors shut against them. HIV infection - the only way you are considered for a place as a homeless is if you become pregnant or totally depressed then you can be placed in an institution or bed breakfast.

Special needs, but not counted as priority cases today. Students without grants - what do they do? Income support declaring you are a student cannot claim. No housing benefits, because you are a student. How do they survive. Working people on low income cannot afford to rent rooms because of exploitation. Young people homeless because they cannot find jobs. Just a few of the list. We work closely with hostels, and they need to register with agency. We ring up the housing associations and act on their behalf.

We now have a high percentage of homeless in the 16/17 age group. Local authorities have to be reminded that according to the law they must do something to house these young people. But we must keep good relationship with them. We refer them directly now. We ring Lambeth and Lewisham and speak to the housing unit by using the law, stressing their liability. We support any project which gets young people housed.

Questions and discussion -

DB: It is very interesting what you said about using the law. In my experience the difficulty is getting the law to work in time. For instance, with regard to young people in private rented accommodation waiting for housing benefit to come through to landlords who are not willing to wait, or students coming to London on hugely cut housing benefits, or hostels being taken over by other boroughs; difficult

enough to identify placements in hostels but how to use them best? Our residential unit could have been given over to young homeless people but this has been disastrous; councils phone us with requests, we agree, and nothing happens. Lewisham has a large hostel which has recently been closed down; we were asked to take a young girl who was homeless as emergency for back up. She came to us the following day,

and was told when applying for benefit that there was none because she was now in Bromley Borough. How does that happen?

Len: You should go immediately you move to the borough you currently live in and register for housing benefit. They cannot get it unless they have a place but placement form should be filled in and although not immediately they should get it through.

DB: Yes, we have been waiting eight months for rent money from those we have taken in. When there is such a shortage of rented accommodation there is no incentive for anyone to help the homeless is there?

Len: No none. Local councils are now to make plans to put all their housing in trusts, which creates another problem because an epidemic will be on their hands with no new houses being built. I am feeling sometimes when seeing a young person that I am running out of answers and I need to have some way of encouraging them.

DB: Yes we need a positive note.

R Quinn: What is being done to try to get money into housing for young homeless - what can be done?

Len: Many local councils do not have money for building programmes. Housing associations are building for sale to professional people not lower income homeless groups. Central government should act, I am sorry for councils as just to get our funding last year, the only one in Southwark on this scale, it will be a blow to

young people. A real fight is on - I think this will have to be a political issue.

Q: One of the ways that this issue could be tackled is through the research data coming out of the research like that which is being done by Youth Support and Dr Birch.

Could we hear something of the information that has come out of that.

DB What we were trying to do was a comparative study to look at planning for homeless young people to see what similarities were and from that see what attempts had been made to redress the problem. I was involved regarding the issues as to why people run away from home. The point is we have a complex problem with the homeless in this country because London and Manchester for example has problem of runaways who run to and from London - should we do more preventive work with families to help young people stay with their families and not run away? We have the homeless units who are seeing young people who are naturally progressing out of their families to set up their own households, students needing homes and the young girl having a baby who should have somewhere decent to live. Unless we have information about who the homeless people are, their age group and problems, we cannot begin to cope with it. The falsehood about young women becoming pregnant just to get housing is something I have had put to me more times than I care to think. Every time I go to a regional talk about schoolgirl pregnancy which is my subject I get

this thrown at me. Unfortunately one of the girls who was coming today who was going to be in our panel was unable to come. There were two actually and one who went into labour and one is heavily pregnant - but one of the girls who was part of my first study on schoolgirl pregnancy and her first baby the one I worked with is now 11 years old. She is homeless. She is not the only one - 157 schoolgirls ten years later is an eye-opener because a lot of them still have the same housing problems they had ten years ago. If you saw the desperate conditions some of them live in after they have left home you would never again imagine that anyone got pregnant and would live like that in order to get a council flat. A schoolgirl with a baby will not even be considered until the child is at least two and a half so what is she to do until then? Some can go to mother and baby homes perhaps but that is not ideal. She cannot have the father of the baby with her there. A pregnant schoolgirl has often been deprived of her own father in a one parent home and the lack of father figure is an important factor in the history of early child bearing - so we are setting up a repeat of this situation. We are re-creating another deprived group - a young girl pregnant setting her up in a situation where her child is inevitably being brought up in a single parent situation because you are not giving her the accommodation where she could possibly be with the father of her baby even if he wanted to be there - The research shows that 45% of the boys still want to be around 2 years on so we are not giving young girls the

sort of support that we should be. Some end up squatting. This is not a wonderful existence as some people think, where you can just live rent free at someone else's expense - it is somewhere where you have to be careful of every knock on the door in case it is someone checking up on you, you cannot get repairs done, leaky roofs, damp, you are prey to vandals on the estate because you cannot call out the police when you are there illegally yourself; you see tremendous misery in squat situations.

Girls who have been living in that sort of situation, perhaps even after they have had a second child they are so used to not being able to do anything for themselves, they lose any power and self esteem which they may have started off with and they very rapidly fall into the sort of situation of the families that we have been hearing about - of being set up to fail. Looking at what happens to these families and what happens to young mothers is extremely important because there are so many myths and there is so much hearsay and this can be used in wrong way by politicians and so on and there is so much buck passing politicians.

I get very angry about the children's act and other pronouncements because there are so many intentions and promises and nothing is happening - life is more difficult now because people think Oh Yes, it's all there! But where is the money to back it up? When it comes to voluntary agencies like ourselves, I get sick to death of people asking 'where is your funding

coming from' and being frozen into inaction by lack of Government grants. Funding comes from putting your hand in your pocket every now and then and trying to carry on one more day without getting funding from anywhere. At Youth Support we have had no 'funding' ever from anyone, we set out to be self sufficient, we charge the statutory authorities (social services, health) for items of service we provide. But of course they will only pay for a narrow area of casework. The number of people we have to turn away is ridiculous - last new year eve we had to turn away a young girl on the doorstep heavily pregnant. We passed her on to social services who could not help. She wasn't mentally ill, she was not going to injure this child - she wanted this child but she wanted support - and this was not available to her.

Q: What is the role of voluntary agencies - should you be doing more?

DB: There are too many voluntary agencies propping

the statutory services up. We need to stick in there and make a noise - so that we avoid the pitfall of 'Oh we have not got a problem'. But we need to be careful not to take on too much of what should be government's responsibility towards the young and homeless.

Further discussion continued in our panel which included representatives from the **Samaritans** commenting on the depression, cries for help and suicidal despair of some of the homeless; street artists and seller of the '**Big Issue**' magazine - sold in aid of the homeless; and young people in the audience. The charitable organisations '**Shelter**' and '**Centrepointh Soho**' were unable to send representatives but provided us with written material which is presented in collage form in these pages. We are grateful to them for the material and also acknowledge inclusion of a quote from Harriet Swain of City Limits on 'When the caring stops' - (Sept 92) which was discussed in the panel.

Useful References -

"Runaway and Homeless Youth in Los Angeles County, California" Julia Pennbridge; Gary Yates; Thomas David; Richard MacKenzie. Journal of Adolescent Health Care 1990; 11:159-165.

"A Risk profile Comparison of Homeless Youth Involved in Prostitution and Homeless Youth Not Involved" Gary Yates; Richard MacKenzie; Julia Pennbridge; Avon Swofford. Journal of Adolescent Health 1991; 12:545-548.

"The abused/Non Abused Dichotomy, does it hold for runaway and homeless Youth?" Julia Pennbridge; Elizabeth Chanesky; Richard MacKenzie; Thomas David.

"High Risk Behaviours among street youth in Hollywood California" Julia Pennbridge; Thomas Freese; Richard MacKenzie.

"Risk profile of Homeless Pregnant Adolescents and Youth" Julia Pennbridge; Richard MacKenzie; Avon Swofford. Journal of Adolescent Health 1991; 12:534-538.

"Survey of Runaway Youth in the Urals"

For some time we have tried to gather information on runaway Youth in the Soviet Union. Youth Support became involved in a variety of projects with the "Lenin Children's Fund". Those successfully completed included training programmes for Medical and Psychotherapy staff; Exchanges for Russian teenagers who spent time in London Schools; enabling gifted students to pursue degree courses; talking to Soviet Youth in schools and social clubs; advising on sexual and emotional health. We have published a number of essays and comments written by Russian Youth in this Journal. Our last and most exciting project was to have been the establishment of a 'Youth Support House Urals' - a counselling centre with residential refuge attached which would specifically cater to incest victims, abused youth and emotionally disturbed teenagers - most of which had hitherto been dealt with punitively if at all. One of the establishments which we visited regularly in the planning of our centre, was the hostel for runaway youth (see page 5) - the plight of these young people deserved our attention. The Soviet Union went through a period of intense turmoil and then ceased to exist during the period of our study. We began planning the study in 1991 at a time when the state was still communist, still poor but to a degree stable. The rouble was officially three or four to the pound and the hierarchy of local officials was present, albeit confused in the typical Russian style. There were few runaways, few street children, prostitution 'rich men's tarts'. During the following year the economy and society were overturned, all values seemed to be lost, children and youth were being left to fend for themselves in Moscow and the main railway stations were hiding places for young runaways who resorted to survival sex. It became acceptable for girls in reasonable families to earn the equivalent of their father's yearly salary by spending a few nights as call girls for rich tourists. This is not the first, and sadly probably not the last time that social upheaval has caused a surge of street children - the same thing happened in the wake of the Russian Revolution -

For us the result of political and social unrest meant that our survey material was out of date and unreliable as soon as it was collected. The funds put aside for our projects became worthless overnight and the hierarchy of colleagues we were working with collapsed resulting in the loss of important data.

" The kids there walking about who were free, well you could call it 'free' I suppose - Oh there were so many children. There were the Besprisornik - the dispossessed children - walking the streets, ...so many children, ...hopeless, ...

... they were afraid we would all die. It was so dangerous in Moscow. No food, children foraging in the street. There were different gangs trying to survive. One was the 'Papringunchi' - the jumpers. they lay in the snow wearing white sheets so you wouldn't see them and they had springs on their feet and they would suddenly spring up and rob you when you passed. There were such terrible rumours - another gang threatened to spit on you and give you syphilis if you didn't give them your food and money, or your boots. I had nightmares about them."

From "Retracing the Echoes"
(Youth Support Publications)

We had planned to survey 50 girls and 50 boys from Moscow and the same number from the Urals. The Moscow data and that on the Urals girls has been 'lost'. Nevertheless, we do have limited data on the Urals runaway boys which is set out below with the provisos that it may not be representative of any other part of the country and it also may be 'time expired'. For these reasons I have not attempted to set out the study in formal 'scientific' style but confine this report to narrative form for general interest only.

Data collection - We decided to use a simple questionnaire which was adapted from the HEAADS medical encounter form used in Los Angeles and supplied to us by Julia Pennbridge. Many of the research instruments used by the US team proved too sophisticated for our use for several reasons. We required an easily translatable form which for example would not categorise sexual practices too finely running the risk of confusing the patients or administrators of the questionnaires. The level of medical care, access to laboratory and sophisticated diagnostic tools was very limited in the area, thus we confined our health comments to general problems.

Questionnaires were prepared in London but administered by Dr Andrei Smirnov who had visited Youth Support House for

orientation and training and was permanently based in the Urals town of Sverdlovsk (now Ekaterinburg). The boys were all interviewed in the detention centre / temporary children's home which was featured in our video recording (see above) and they had mainly been picked up by the militia from the railway station and off the streets. One of our Urals students Boris Slobodkin translated the records back into English.

Results:- Age and Family - The average age of the sample was 15 with the youngest runaway being 11 years old. They had on average two siblings and mainly came from two parent families often with a grandmother or both grandparents present -most had both mother and father in the household. These are unusually large families from the Russian point of view and thus there was some overcrowding and pressure on the young boys to leave.

Pattern of 'runaways' - Half ran away within their own town - a large industrial provincial town; 25% from another town in the same region and 25% from another region involving very long distances. 85% had only been away from home for 2 months and 15% for a year or more; most ran only once (50%); 40% 3 times and 10% a high number of times (max 25 times).

Activities/Crime - Sixty percent were involved in crime including all the long term and repeat runners, 23% were involved in gangs. Two of the older boys had managed to obtain some work.

Sexual Experience - Only 15% had experienced sex and the youngest intercourse was 13 years - thus this was not a largely sexually experienced or exploited sample. Only one boy of 14 had been involved in prostitution. All of the other reported sexual

"How old are you Alyosha?"

"Thirteen"

"Just thirteen - How do you like it here? Are you pleased you were found?"

"Yes, at first I thought this was a bad place, but now I think they're all right. I have to stay until my parents come"

"Do you want to see your parents? Why did you leave home?"

"I want to go home. I left because my friends were going. My friend had been badly beaten at home. I was found by the Militia and they ran off"

"Your friends must be frightened. Are you worried about them?"

"Yes, I worry very much. They are still travelling. I don't know where they are and I don't know what will happen to them. ..."

experiences were heterosexual involving vaginal sex.

Drugs - Only one boy took drugs - the same boy who had been involved in prostitution. 60% drank alcohol and the same percentage smoked. Alcohol was also used as a way to keep warm.

Health - 35% of the boys were suffering from malnutrition and 40% were significantly depressed.

Reason for leaving

home - 40% left after a family row but 50% left because their families turned them out or abandoned them - most did not wish to leave. 10% admitted to being bullied.

Comments - Overall the reasons leaving home are much the same as in other groups of runaways. When I spoke to individual boys and girls I did find that many had been physically abused although in the questionnaire answers this feature was masked by 'family rows'. Many of the children were from very poor rural households where physical chastisement was accepted as part of the norm. The economics of family life with children being turned out to fend for themselves is similar to the patterns seen in some South American street children.

For many years abuse of children, particularly sexual abuse was hardly spoken of and certainly not officially reported in the Soviet Union. Medical personnel are very aware of the

high level of incest and sexual abuse which does exist in overcrowded disordered families. Some of the rural areas are particularly affected. Dr Vadim Romanov, a gynaecologist who spent a 6 month training period at Youth Support described a high rate of incest and girls of 9 and 10 who became pregnant.

"...We were driving down yet another Leninski Prospect in a God forsaken town in the northern Urals. The incongruity, the contrast of new and old Russia was vividly apparent as the little old wooden houses, with their decayed carved ornamental windows and a few struggling Birch trees stood out starkly against the background of chimneys, cooling towers and smoke from the metal works - the heaviest metal plant in the region, that which produced the first steam engine in the Soviet Union - and placed conveniently right in the centre of town; Right where it can pollute the air to the fullest extent and prematurely blacken the ancient houses while it prematurely ages the inhabitants - that is, those who live long enough to age. The childhood leukaemia rate is the highest in the region due to the pollution.

Dust clouds pirouetted across the station square as a group of ragged children with pinched wind-tanned faces scuffed their worn through shoes as they patiently waited in the queue for the circus. The scene seemed from a past era, colourless except for the clown's face on the side of one of the trailers. Many of the faces looked eastern, definitely Asian rather than European with a good number of Romany people .. and I thought how caravans of performers must have travelled these towns for centuries. Here the travelling circus was still a major source of entertainment even in the nineties, no videos or computer games ... no arcades of bleeping toys. Just a dilapidated group of trailers with a motley set of circus animals, a camel who fell asleep and wouldn't get up for the children, a rather moth-eaten lion, a few horses ... but enough to bring some excitement into the children's lives.

And while I was resigning myself to being in a such austere, poverty ridden surroundings, another contrast glared out .. as we entered the station hotel - a typical communist post war building which could have been anywhere in the USSR - and walked through to the restaurant for a meal ... We had been expected and a special table was laid out on the balcony, overlooking the main floor. The four course meal which followed was one of the best I had eaten in Russia with touches of unexpected elegance - the swirls of carrot and cucumber flowers parodying the swirls of dust outside in the real world...."

The **European Forum for Adolescent Health** had a very successful meeting in Utrecht in July this year - many thanks to Gerben Sinnema for such an interesting event. His conference report follows.

The WHO is concerned about the growing problem of **substance abuse amongst street children and runaway youth** and has launched a pilot project to confront this - it began in 7 countries Brazil, Egypt, Honduras, Mexico, the Philippines and Zambia. Now a number of other states have joined the initiative. For further information please contact Andrew Ball of WHO FAX 41 22 791 0746.

SAM meeting is coming up in **Vancouver March 23-25 1995** - with the **IAAH meeting** overlapping from 20-22 March (for details see last issue). Anyone in UK wishing to attend as part of YS group please contact office.

XXI International Congress on Paediatrics Cairo 10-15 September for information fax 202 354 2556

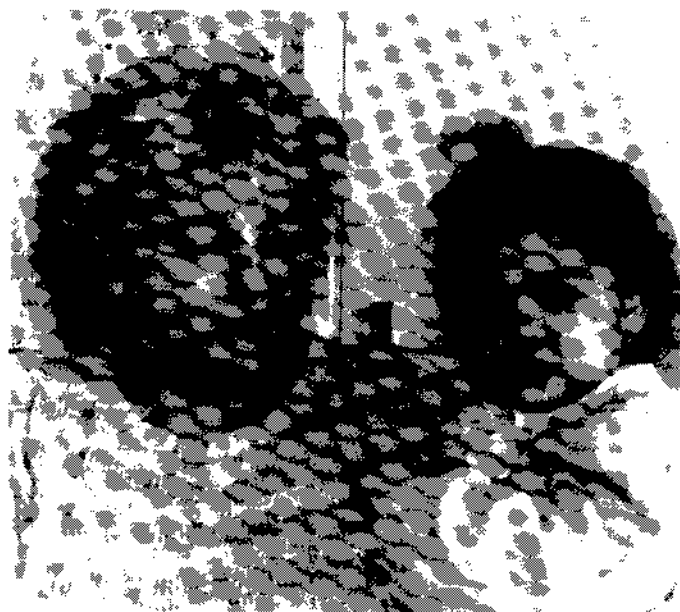
Homelessness and Ill Health - the report of the Royal College of Physicians working party is available from the college at price of £8.50 - contact publications department 11 St Andrew's Place Regent's Park NW1 4LE.

International Association for Adolescent Psychiatry meeting Athens Greece July 5-8 1995. Information from Shelley Doctors Fax 212 873 3841.

Homelessness and ill health

SUMMARY OF A REPORT OF A WORKING PARTY OF THE ROYAL COLLEGE OF PHYSICIANS

The Royal College of Physicians has a long tradition of concern for the factors which affect health as well as for the treatment of disease. This report continues that tradition by drawing attention to the relationships between health and homelessness. The number of people who are homeless has risen sharply over the past decade. Some become homeless because of ill health and most experience deterioration in their health as a result of homelessness. Many have difficulty in obtaining appropriate medical care. By gathering together a wide range of published data, this report aims to define the relationship between homelessness and health and makes recommendations to government, local authorities, family health service authorities and GP fundholders for the coordination and improvement of services for people who are homeless.



Conference report

European Forum for Adolescent Health

On July 4 and 5 1994 the Third European Forum for Adolescent Health was held in Utrecht, the Netherlands. This conference, hosted by the University Hospital for Children and Youth, primarily aimed at strengthening the European network of the International Association for Adolescent Health (IAAH). Some 50 participants from 14 European countries actively discussed issues of adolescent health (care). Kenneth Legins participated as a representative of the WHO Regional Office for Europe.

With 15 presentations, a kaleidoscope of activities in the field of adolescent health was offered. In his keynote address on contemporary youth problems and cross-cultural solutions, Dirck van Bekkum focused on the lessons to be learnt from anthropology. Provocatively, he concluded that the European aboriginal adolescent is being left alone in entering adult life. Starting from his clinical experience in psychiatric and vocational rehabilitation, Dirck van Bekkum made a strong plea to re-establish initiation rules and rituals for youths, offering them a better understanding of the complex adult world. The impact of cultural factors on adolescent development also showed up in the research of Joan-Carles Suris (Institut Dexeus, Barcelona, Spain) and Petra Kolip (University of Bielefeld, Germany). Due to differences in the socialization process, adolescent girls report more (psycho)somatic complaints than boys do and they are stronger inclined to use health care services. Wim Wolters (Utrecht, the Netherlands) pointed out how foreign adopted adolescents are struggling with their double cultural identities. Similar problems, but at quite a larger scale were reported from Tel Aviv (Israel), where Manny Chigier has been involved, for many years, in programs for the social integration of adolescents raised in other cultures. Pierre-André Michaud (Lausanne, Switzerland) explained how the Swiss health care services try to meet the needs of foreign teenagers.

In western societies, schools can play a crucial role in the prevention of behavioural and health problems. Onno Syperda (Zwolle, the Netherlands) demonstrated an impressive intervention program to reduce aggression and bullying at school in early adolescence. Demetrios Stasinou (Ioannina, Greece) made a plea to teach teachers how to foster the mental health of adolescents. On the other hand, the training of social skills of young adolescents also can have beneficial effects on mental health and behaviour (Jan Bijstra, Groningen, the Netherlands). In the field of prevention of unwanted teenage pregnancies, an elaborate instruction package on "Living together and sexuality" was presented by Mette Hvalstad (Oslo, Norway). This package includes a preventive health computer game for (otherwise difficult to reach) male adolescents. At the conference, the first steps were made to have this computergame translated and modified for several European countries.

The unconditional commitment that is essential for working with youths from severely underprivileged communities, was demonstrated by Diana Birch (Youth Support, London, UK) and Helena da Fonseca (Lisboa, Portugal). Helena da Fonseca runs a primary health care clinic for adolescents in one of the poorest areas of Lisboa.

The array of adolescent health issues at the conference furthermore included alcohol abuse (Teresa Garcia Jimenez, Madrid, Spain) and hospital treatment of adolescents with psychosomatic illness (Ueli Bühlmann and Daniel Bischof, Zürich, Switzerland).

With IAAH conferences of the European Region in Madrid (1992), Jerusalem (1993) and Utrecht (1994), a valuable tradition has been established by now. The 4th European Forum for Adolescent Health will be held in Portugal (1996). I hope to meet (again) many of you over there.

FORUM ON ADOLESCENT HEALTH AND WELFARE

The **Youth Support Forum on Adolescent Health and Welfare** was founded in 1986 as a support network and professional body linking together all those interested in working with teenagers.

Teenage welfare and Adolescent health have been neglected by statutory services and there has been no career structure in the UK for those working in what is often a very stressful but very rewarding field.

If you would like to be involved in:-

- **promoting the health and welfare** of young people.
- being part of a rapidly expanding **professional network**

Or if you are:-

- working at the 'front line' in '**high risk**' areas such as schoolgirl pregnancy; teenage sexuality; young people and AIDS; sexual abuse; drugs and violence.
- feeling that you do not have the **support** of your professional peer group.

Now is the time to **Join our Forum** -

Contact:

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13 Crescent Road
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Annual subscription £20
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**Articles for our Journal and requests for meeting topics
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"Bonds and Boundaries"

- Child Protection and The Family -

Diana M. L. Birch

* * * * *

To work in the field of child protection and particularly when it involves assessment of a family and possible rehabilitation is an area fraught with difficulties.

All families have problems of one degree or another. All children make their parents angry at times, most toddlers have tantrums, 'normal' married couples have blazing rows, children will compete with each other for attention and little girls do have crushes on their fathers and get jealous of their mothers. Where do we draw the line, the boundary between what is acceptable and what is harmful, abusive and requires professional intervention?

And if we do intervene - how can we be sure that our intervention is helpful and does not in itself cause more harm than good?

The needs of the individual are not necessarily compatible with the needs of the group - in this case the family - and weighing up these needs and placing them in some order of priority can be nigh on impossible. It requires empathy and sensitivity - but most of all a high degree of professionalism.

Subject matter includes: Rehabilitation and The Family - Working with Families - Bonding, Separation and the Rehabilitation process - Results of Rehabilitation including outcomes of our experience at Youth Support - Disordered Family Structures.



Contact YOUTH SUPPORT for a full list of publications -
all sold in aid of disadvantaged young people.

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