



Weathering the Storm

Negotiating Transitions
in Britain Today

Beth Watts



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1 Introduction

This study asks ‘what makes a successful transition?’ and looks for answers in the stories of 34 people living in England and Scotland. The stories we gathered are rich and diverse and reveal how transitions affect every aspect of people’s lives: their emotions and mental health, their finances and relationships with others, their attitudes and outlook. The stories also reveal the myriad ways in which people respond to experiences of transition and draw on their resources, relationships and entitlements when thrust into challenging situations.

Everybody experiences transitions during their life: out of school, into adulthood, into and out of employment, into retirement and older age. People have to cope with bereavement, the onset of illness and transitions through parenthood. A smaller but still significant group have to deal with less common and often more difficult transitions, into and out of prison or mental health care, for example.

Transitions can mark turning points in people's lives, but depending on support structures, available resources and individual resilience, transitions can be for the better or worse. Transitions can be experienced as negative shocks that undermine and destabilise how people's needs are met and can leave them struggling to adjust to their new situation. Alternatively, they can be experienced as positive transformations, launching people into unexpected and more fulfilling ways of living, in which their needs are sustainably and stably met.

Numerous factors affect the kind of journeys people make through transition. These relate to the individual, their immediate support networks and the social systems and structures that surround them. Luck also plays a part. But threaded through these complicated stories are important messages about the things that can make a difference to way transitions affect people's lives.

Having a stable home, an adequate income, supportive relationships and a positive and optimistic attitude can inoculate people against the damaging impacts of transitions and provide the stability and energy needed to deal with them proactively. When transitions can be foreseen, preparing for them can help ease the process of change and minimise destabilising effects. Support and advice from a whole host of organisations can also buffer people from the worst impacts of transition, especially where their approach is non-judgemental, flexible and responsive to an individual's needs.

However, not everyone benefits from these supportive factors. Sometimes, the help and support offered is inadequate and ignores the simple things that can make the most difference. This leaves some particularly vulnerable during transitions, including people who have left prison, social care or abusive relationships. People often experience these things in the context of existing vulnerability, lack of resources and lack of support and these transitions can further entrench such disadvantages.

The risks for young people during transition also seem greater: they are less likely to have secured access to the resources, assets and attributes that often help their older counterparts negotiate transitions. Ensuring that young people are enabled and supported to make their first and seminal transitions successfully may help foster their ability to cope with challenges later in life.

Our research also points to a different kind of social divide, one that doesn't map clearly onto measures of vulnerability and disadvantage as typically understood. It is a divide between those who can draw on durable and supportive social networks and those who, for whatever reason, cannot. Those who were isolated and disconnected from supportive friends and family were at far greater risk during transition and had fewer opportunities to meet both their material and psychological needs.

2 Study aims and methods

This report provides a platform for the stories of 34 people who have recently experienced transition. Those who took part shared their different experiences and perspectives and this study uses them to develop insights into what makes transitions successful. It aims to provide guidance and provoke new ideas among those organizations and individuals seeking to support people through transition.

By telling the stories of people in Britain who've made important transitions, the study seeks to develop insights into the factors that make some transitions more successful than others. Drawing on existing understanding, it aims to paint a vivid picture of how people negotiate transition and to spark recommendations and innovations to ensure that as far as possible transitions are experienced as springboards rather than setbacks in people's lives.

The study draws primarily on the testimony of 34 transition makers, gathered through depth interviews. Seven kinds of transition were selected. These transitions were chosen because existing evidence suggests that they are likely to be associated with significant unmet need. In particular, these transitions involve categorical shifts in the opportunities available to people to meet their needs, relating to their statutory entitlements, access to services and relationships with key social contacts.

We spoke to 34 people who had:

- left prison
- left the care system
- left mental health care
- been made redundant
- left education and had a disability
- suffered bereavement
- left an abusive relationship.

We spoke to 34 people who had:

- 6 people from Black and Minority Ethnic groups
- 18 women and 16 men
- ages ranged from 19 to 57
- people came from across England and Scotland, from a mix of urban and rural areas
- 25 of the people we spoke to were unemployed or out of work.

The study aims to gather a range of stories about transitions reflecting the different kinds of experiences they can involve. Transitions out of prison, the care system, mental health care, redundancy and leaving education for young disabled people involve movement out of institutions or organisations that have played a central role in that person's life. Transitions out of an abusive relationship or following bereavement involve equally important movements out of relationships.²

Between three and five interviews were completed for each of the seven target groups. These one-to-one interviews lasted for around an hour and covered people's personal circumstances, their experiences of transition, support and advice they drew on, and reflections on their current situation and the future.

Those who took part in the study were recruited in a variety of ways. Several were contacted through voluntary or statutory agencies offering services to people going through transition – for example, community projects offering support to ex-offenders or social services teams offering support to care leavers. This mode of recruitment tends to involve people engaged with services and therefore potentially negotiating transitions with more support and more success. In order to redress the balance of the study, other people we spoke to were recruited differently. Some were contacted through organisations *not* associated with the transitions in question – for example, one of the people we spoke to who had suffered bereavement was contacted through a hostel for rough sleepers. Others were accessed directly through community contacts not affiliated with organisations or service providers who knew people in their community that had experienced certain transitions. Opportunities for ‘snow ball’ sampling were also utilised, with several people we spoke to putting us in touch with other transition makers. Another method used was sampling through online support groups and websites targeting particular groups of transition makers – details of the research were posted on forums for people to respond to.

Overall, sampling was opportunistic and aimed to access people from across the seven target groups in a variety of ways to ensure that a diverse range of views and experiences were included. The aim was not to find a representative sample, but to ensure that a diverse range of voices and perspectives were included. The final group of 34 people reflects this approach and the full list, and more information about the sample, can be found in the appendix to this report. The people we spoke to ranged from high income professionals, to single mothers working part time, to long term unemployed due to health problems, mental health issues or drug and alcohol dependency.

Interviews took place in a variety of places, from isolated Derbyshire villages to London suburbs, Northern and Scottish ex-industrial cities, and small coastal towns. The interviews were conducted in locations that were accessible and comfortable for those involved: their homes, community centres or the premises of organizations they are involved with. Pseudonyms have been used to ensure the anonymity of participants.

The stories of these transition makers are the focus of this study. They are considered against a backdrop of existing data and research and are also informed by consultation with service providers and key informants from the statutory and voluntary sector. This study is not an evaluation of services and provision for the seven target groups. Instead, it aims to provide insights into the ways people experience transitions and the way they impact on their needs and ability to flourish in contemporary UK society.

3 Understanding transitions

Transitions are commonly experienced and involve shifts in how people live, including their ability and opportunity to meet their needs. Research shows how some people ‘bounce back’ after experiencing shock or adversity. The experiences of those we interviewed are used to think about what helps make transitions successful; how this relates to traditional patterns of vulnerability and how society can better support people to traverse transitions as positive transformations rather than processes of adversity with lasting and damaging impacts on their lives.

What is a transition?

Transitions are processes over time, prompted by events (leaving prison or getting divorced) or non-events (not having children despite efforts to) that involve shifts in how people live. The shifts that constitute transitions will occur at three levels:³

- 1 **Individual** transitions will involve shifts in how a person understands and feels about themselves and the world, including changes in their attitudes, beliefs, outlook, status, circumstance and identity.
- 2 **Immediate support** transitions will involve shifts in the kind of contact people have with their friends, family and other social contacts, and shifts in how an individual relates to others. The context and meaning of relationships will also change.
- 3 **Systems and structures** transitions will involve categorical shifts in status, eligibility and access to services in the public, private and voluntary sector, as well as broader shifts in people's position within social systems and structures.

Transitions are often thought of as involving a journey through several stages: from an acute phase of stress management or crisis response to a phase of reorganisation and acceptance, or from a denial of the changes occurring to the acceptance of those changes.⁴ The stories told in this study reflect how transitions can occur in stages: they sometimes begin with a phase of preparation or planning for the anticipated changes ahead, followed by a response to change and lastly a period of getting used to those changes and their impacts.

There are many ways of distinguishing between different kinds of transition. Three dimensions are particularly important to the discussion that follows:

- **Normative transition.** Transitions are a normal and inevitable part of life with certain transitions forming building blocks of the life course and experienced by most people. Examples include transitions from childhood to adulthood, through parenthood, into and out of employment and into older age. There are often events and rituals associated with these kinds of transitions, including ceremonies like graduation or celebrations. Although these transitions are normal, people may experience them as positive or negative processes. Other transitions are non-normative and experienced less often, ranging from divorce, to ill health or moving into and out of prison.
- **Anticipated and unanticipated transitions.** Some transitions are foreseeable and anticipated. This is the case for many of the life course transitions discussed above. Others are unanticipated and may be experienced as shocks or crises. Examples include redundancy or sudden bereavement. Many transitions will fall between these two extremes, anticipated and foreseen over longer or shorter timescales with different levels of certainty over the kind of

changes that will take place. Bereavement involving a long-term illness or relationship breakdown are examples.

- **Institutional transitions.** Some transitions are prompted or created by people's interactions with public institutions. In these cases they involve moving between, into or out of state defined categories. Examples include moving into or out of prison, or local authority care. Crucially, institutional transitions will mean that people are necessarily in contact with statutory and often non-statutory organisations during their transition and that their eligibility for and entitlement to services and support may change.

JAMIE'S STORY

Jamie is 24 and has severe dyslexia. He left school when he was 16 and went to college. However, he stopped attending after two months because it reminded him too much of school and he found it boring. He lived at home with his mother and siblings until a year ago, when he moved into supported housing nearby.

Jamie wanted to start work after he left school and was interested in being a computer engineer. However, he lacked the qualifications he required due to his dyslexia. None of the computer courses available offered the kind of support he would have needed.

Jamie remained unemployed until he was 22 and during that time he wasn't doing much. He found signing on at the Job Centre quite stressful, because he was worried about missing or being late for an appointment and having his benefits sanctioned.

When he was 21 he started going to a community centre

where he got involved in different activities, attending courses and engaged in voluntary work. He also received assistance applying for jobs, as the community centre staff helped him write his CV, complete application forms and improve his interview technique.

This helped him get his first job at a supermarket. Jamie is currently working for the local council cleaning streets, which he enjoys more than the supermarket as it allows him great freedom.

Jamie continues to go to the community centre. He is involved in DJ-ing and helps show other young people how to use the music equipment. However, Jamie is worried about the future as the projects at the community centre are only meant to be for people up to 25 years old and he may have to stop attending. That aside, Jamie's happy about his life at the moment and determined to keep learning and improving.

People can experience transitions simultaneously or one after the other. It may not be clear or obvious where transitions begin or end. This complexity and variety of experience is clear among those we spoke to in this study, only some of whom experienced transitions as phased processes with a beginning and an end. For others they were extended, continuous and multidimensional processes that often incorporated several different transitions interacting with each other.

Transitions therefore involve people treading different paths through different situations and the selection of target groups involved in this study aims to reflect these diverse experiences. The type of transition people experience and the context in which they do so will greatly affect their experiences, with research highlighting the very different experiences of people making the transition to adulthood through university and those from marginalised communities who lack the structure and support of this experience.⁵ All transition makers face the same challenge however, in so far as during a transition people have to rethink, renegotiate and reorganise the ways in which they live and meet their needs.

Transitions and need

Transitions are a crucial lens for organisations, policy makers and service providers seeking to understand, prevent and meet unmet needs: because they will involve shifts in how a person's needs are met, transitions are a time of vulnerability and exposure to risk. Making a transition successfully is therefore critically important to avoiding the harm and suffering associated with unmet need.

Needs are those things which must be met or satisfied to avoid harm or suffering.⁶ This encompasses things we need to physically survive (physical safety, food and basic shelter), as well as other material needs that are considered necessary for a socially acceptable quality of life in Britain today (access to transport and a decent home, for example). As well as material needs, which have invariably been the focus of social research and public policy, people also have psychological and social needs: to have positive and fulfilling relationships with others, to feel confident and comfortable with themselves, and to feel some level of control and ownership over their circumstances and actions.⁷

This study explores how transitions affect people's needs, both material and psychological. The approach to mapping needs pursued here seeks to reconcile what have been seen as two competing models of social research and intervention: deficit and asset models. Deficit models focus on identifying problems or deficiencies and work on an understanding that resources and interventions ought to be utilised to rectify these social problems. Asset based models focus instead on the capabilities of individuals and communities to

solve problems and utilise resources to find solutions. This study seeks to focus both on people's assets and deficits and the relationship between the two. This holistic perspective offers the best opportunity to understand how needs can be addressed in the future, both proactively (through prevention and the promotion of resilience and wellbeing) and reactively (by responding to unmet need).

Evaluating transitions

In this report we hope to shed light on the factors that enable people to make better transitions. Applying the concept of 'success' to people's unique journeys through transition is problematic, especially given the focus here on seven different kinds of transition. In particular, any measure of 'betterness' or 'success' needs to be multi-dimensional, incorporating for example, people's subjective assessments of their experiences and objective accounts rooted in concepts like how well people's needs are met. These two dimensions may conflict with each other. In particular, the subjectively 'best' outcome for someone might relate to emotional rather than objectively rational outcomes.⁸ However, the understanding of 'need' in this project is that unmet needs cause socially recognisable harm and suffering. Given that, we can assume that for the most part objective and subjective accounts of better and worse transitions will tend to coincide.

On that basis, this section offers a framework for evaluating the process and outcomes of transitions. Transitions can be regressive, creating or precipitating unmet needs and undermining someone's wellbeing. Alternatively, they can be transformative, enabling people to reshape and improve the ways their needs are met and improving their wellbeing and happiness. A transition could also be neutral, involving a change in people's circumstances, but in the longer term not affecting how well their needs are met.⁹

Digging down further, if people in general are adaptive and strive to meet their own needs, it may not be enough to characterise transitions as regressive, neutral or transformative, as above. A more nuanced approach might add that transitions involve shifts from one situation or circumstance, in which their needs are met in a particular way, to another.

The situations people move from and to over the course of a transition can be characterised according to where they fall on the following spectrum. On the one hand, a person's needs can be met stably and simultaneously, with the mechanisms, resources and approaches used to meet needs reinforcing, supporting and complementing each other (for example, with a person coping with stress by talking to good friends, strengthening those relationships and simultaneously meeting their needs for companionship and building up networks that can be used for support in the future). The process of transition in getting

someone to this point will involve proactive management of transition and the development of strategies to find effective ways of meeting needs.

Alternatively, a person's needs can be met unsteadily and in ways that undermine, challenge and contradict each other (for example, with someone coping with stress by drinking, therefore undermining their health). This situation may nevertheless be relatively stable as people juggle, adapt and cope when things become difficult. The process of transition in getting someone to this point will involve responding reactively as difficulties arise. In this study, this is the framework we have in mind when transitions are described as successful or not successful.

Factors affecting transition

The experiences of those we spoke to provided insights into the contexts in which transitions can be transformative and not regressive. Research exploring specific transitions has shown how people react to key stressors and life events. Much of the research on youth and labour market transitions has focused on employment outcomes and career destinations,¹⁰ and research exploring bereavement often focuses on health and mental health outcomes for surviving relatives or partners.¹¹

A parallel body of research has emerged around the impact of significant life events and transitions on people's wellbeing and quality of life. This research can show us to what extent and how quickly people 'bounce back' emotionally from traumatic experiences.¹² The apparent resilience of some people in the face of significant adversity has been the subject of decades of research, especially in America. Much of it has focused on the things that have enabled children with traumatic histories to overcome their past and flourish nonetheless.¹³ The graphs below give two examples of this 'bouncing back' using data from the British Household panel survey. Figure 1 shows that life satisfaction tends to recover after the onset of disability. Figure 2 shows how psychiatric health (measured by GHQ score¹⁴) declines and then recovers for those who become widowed or get divorced. Other research has shown how this pattern varies for different people, with one study exploring resilience in older people finding that one in seven were resilient whilst others failed to 'bounce back' in this way.¹⁵

These kinds of response to shock events are known and observed, but less is known about the dynamics and subjective experiences that lay behind them. This research goes some way to fill this gap through detailed qualitative research with people who have negotiated transitions.

Figure 1: Life satisfaction and becoming disabled¹⁶

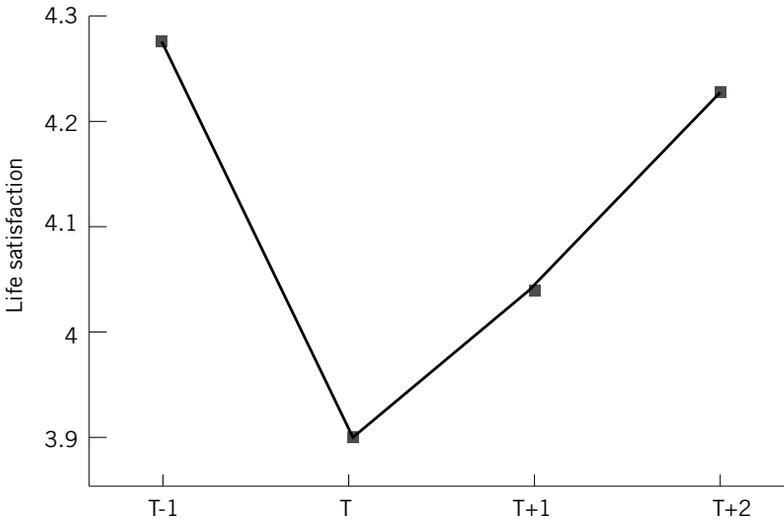
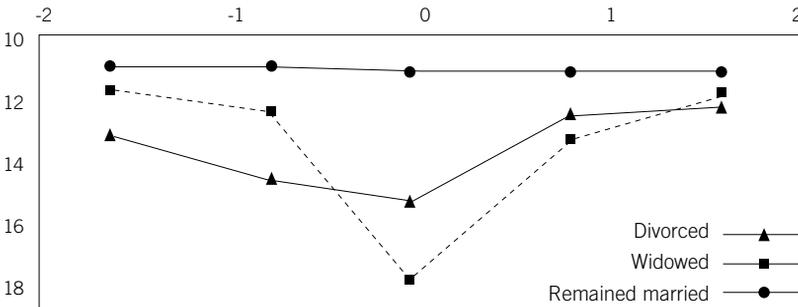


Figure 2: Marital transitions and psychiatric health



Source: BHPS

Previous research identifies a series of factors that will affect transitions by promoting or undermining resilience (see Figure 3). According to the approach taken here, factors operating at all these three levels (individual and self; immediate supports; systems and structures) will affect how successfully people experience transitions. One factor, for example, individual income or wealth or eligibility services, will not usually be enough to explain why one person’s transition is successful or unsuccessful. Instead, the complicated ways in which all factors, from someone’s subjective understanding of the world, to their position within it, interact and relate will determine the outcomes of people’s transitions.¹⁷

Individual and self	Immediate supports	Systems and structures
including characteristics, attitudes and dispositions, outlook and sense of self	including size, quality and characteristics of social contacts and support networks	including economic, social, cultural, political and policy contexts
<ul style="list-style-type: none"> • previous experience of change • sense of self • faith and religion • employment and financial security • optimism • open and effective communication • genetics • gender 	<ul style="list-style-type: none"> • family support • support of friends or peers • community resources • role models or examples of positive coping strategies 	<ul style="list-style-type: none"> • eligibility and access to services • cultural context and resources • cohort effects e.g. relating to economic climate

Factors operating on each of these levels are not independent of each other and may be related in several ways. For example, cultures and social norms (around relationships and families for example) will affect people's attitudes (towards marriage for example); individual circumstances like employment and financial security will be highly dependent on broader economic trends, and people's genetic and inherited characteristics will interact with environmental risk factors and traumatic experiences.¹⁸

It is also important not to consider these factors as static and stable: people's resources and deficits across these three levels will shift over time, with research showing for example that women may be more resilient than men, with women gaining resilience with age.¹⁹ Resources and deficits may also shift during the course of transitions. For example, if a person lacks social support, or a sense of control or self-worth or income, can plugging these gaps during or at the start of a transition make a difference? Or is it too late? In other words, how important is the legacy of past circumstances and what implications does this have for how organisations can respond to transitions?

Lastly, the nature of the transition itself (in isolation from broader contexts and the characteristics of the people involved) is likely to have independent effects on how that transition is experienced. Transitions will vary in their magnitude, abruptness and pace, with implications for how well people are able and enabled to respond and renegotiate their behaviours, relationships and entitlements.

4 What makes a transition successful?

This chapter provides an overview of the findings of this study, laying out the key factors that seem to enable or facilitate successful transitions. First, transitions are shown to involve balancing making choices and actively managing options, coping with and accepting circumstances beyond the transition maker's control. It is then argued that having a foundation of stability in a series of key domains can help anchor people's journeys through transition and buffer them from the worst impacts of change.

The two sides of transitions

We have suggested that the factors effecting transition operate at three levels: individual and self; immediate supports; and systems and structures. This was reflected in the way people described their experiences of transition as both processes they managed, controlled and made choices about and processes that thrust them into situations and circumstances they had no control over.

On the one hand, people actively managed and negotiated transitions; developed strategies to cope with change; managed a constellation of relationships with friends, family, and professionals; balanced priorities; and reconciled their needs with the needs and expectations of those around them. On the other hand, transitions were experienced as periods of powerlessness and uncertainty during which people were constrained by unpredictable events or circumstances, luck, structural conditions like a lack of job opportunities, a lack of information or income and the actions of people around them.

Making a transition successfully involves steering a course through change and engaging with choices and options, but also coping with circumstances you would not choose and cannot alter, as Pete (see Pete's story) has managed to do. Other people we spoke to found striking this balance more difficult, often because their efforts to take control and manage situations hadn't worked out.

Compare Pete's story to what happened to Erika: she is 42 and after leaving an abusive relationship and spending time in a refuge, she struggled to find accommodation for her and her children. She sought advocacy and support and tried to access social housing. Unable to do so, Erika rented privately, but had problems with her landlord. Erika explained what this period was like: "I had to fight and fight every step of the way. I don't know, in the end if someone says no, you accept it. I didn't have any fight left in me." Experiences like these leave people feeling powerless and seemed to undermine their ability to pursue help and think through new ways of meeting their needs. They also seemed to affect people's views about the future, which seemed unpredictable and therefore impossible to prepare for.

This stood in stark contrast to those, like Callum, who felt control over their situation. Callum is 30 and his wife died suddenly in a car crash almost a year ago. As Callum approached the year anniversary of his wife's death, he explained the emotional turmoil of losing his wife, as well as the practical burden of dealing with their finances and mountains of paperwork. Now, though, he is looking forward: "I'm determined to get on with my life, to keep being happy, I might move house, I might move country, I don't know the world is my oyster, so yeah I'm alright."

PETE'S STORY

Pete is 42. His wife died of cancer three years ago and since then his life has changed dramatically. He had to leave their family home as he couldn't afford to keep it and, after having been in a high-pressure job, was made redundant, and has now been unemployed for the past 18 months.

Pete's financial situation is very tight. For some time, he was spending beyond his means. He had little experience of managing bills as his wife had always taken care of that, but he's managed to get his finances in order now, and strictly budgets and prioritises what he needs: "the first thing I do is get my food... basically I want to be comfortable, I want to eat, I want to have warmth in my flat ...

I think it's made me maybe better with money, believe it or not". Bereavement counselling and support groups have helped Pete deal with the emotional side of things. He's found talking about it, and getting it out of his system really helpful. He found caring for his wife difficult, especially because other people always wanted to come and visit and this would tire her out. With hindsight he's proud of how he dealt with it and with the funeral because he hadn't had to do anything like that before.

Looking back on everything that's happened, Pete thinks he's learnt a lot. In particular, he's realised that "if you are worried about something, do something about it... If you can't do anything about it... there is no point in worrying about it. And that's what I learned over the last year."

The people who took part in this research varied in the extent to which they experienced transitions actively and passively. Those who dealt with transitions best seemed to strike a balance, doing the best they could to meet their own needs, but understanding that some things were beyond their control. They avoided both feelings of powerlessness, and over-ambitious accounts of what they could achieve. Striking this balance and experiencing a successful transition was easier in certain contexts, which are explored in the next section.

Negotiating transitions

The stories of those who took part in this study reveal the very different experiences people have of transitions in Britain today. At one extreme, some people experience traumatic and extended transitions that entrench existing needs and create new ones. At the other extreme some people were able to bounce through transitions, experiencing change as a process of (self-)discovery, rather than strain, stress and disadvantage.

The interviews conducted provide numerous insights into what can help people make successful transitions. The key message is that having a foundation of stability gives people the best chance of managing change. Having constancy and certainty in a few key areas can anchor people's experiences of change and enable them to cope better with challenges. People often aren't able to secure this foundation of stability however, especially when transitions are severe and involve shifts in many areas of a person's life.

Stability can be provided, enhanced or secured in several ways. In cases where transitions can be anticipated, *preparation* can help maintain stability and avoid chaotic changes that magnify the challenges of managing change. Delving further, in all cases people's situation across the following four areas of their life was fundamentally important to their experience of transition:

- 1 **Relationships and support** Emotional and practical support from friends and family provides a crucial resource for people negotiating transition.
- 2 **House and home** Having a decent, affordable home provides a stable base from which to manage transitions, offering escape and respite from other challenges and difficulties.
- 3 **Income and work** Living on a low income makes negotiating transitions much harder. Being unemployed made transitions harder for this reason, but also because jobs were a crucial source of routine, motivation, identity and self-worth.
- 4 **Attitudes to transition** Some people had a strong sense of identity and understanding of how their experience of transition had been a positive one, even if challenging or difficult. This was harder for those lacking social support, with chaotic lives and multiple needs.

If situations across these four domains (which are explored in greater depth below) are positive, they provide assets to help and enable people to make a transition successfully. In this situation, people are able to experience even traumatic transitions as structured and phased periods of shock or change, followed by response and rebalance. Elongated and difficult transitions are more likely to occur when situations across these areas are challenging. An added layer of complexity is added to this picture because these four domains are themselves vulnerable to the impacts of transitions. Some transitions in particular seem to challenge people's relationships and support networks, their accommodation, income and work and their ability to understand and tell the story of their own experiences.

These four domains seem to provide people with support through transitions in two different ways. As *anchors* they provide stability, rooting people and giving them a point of stability and certainty, from which to (re)consider, (re)evaluate and (re)organise other areas of their life. As *buffers* they provide resources and opportunities that protect and shield people from the worst impacts of transitions.

These four domains can not be thought of as simply material resources or circumstances: they are contexts bound up with important meanings and each has an emotional as well as practical dimension that can help or hinder people through transition. For example, the importance of housing cannot be understood purely in terms of accommodation, shelter or warmth. A person's housing situation is fundamental to their experience of transition not just as a basic survival need. It can provide stability, respite, tranquillity and escape from what can often be chaotic or traumatic experiences. Similarly, work was important to people not only (or even primarily) as a source of income, but as a source of structure, routine, identity and purpose.

In addition to people's situations in these four areas, flexible and understanding *guidance and support from service providers* can provide valuable resources during transition and is especially valuable to more vulnerable transition makers lacking financial resources and social support. This study sheds light on the various cultures of service provision that greet people experiencing transitions and suggests that services offering flexible and supportive advice or assistance are most valued, as opposed to services with conditions and requirements attached that could drive people away.

None of these factors alone are enough to explain why one person's experiences of transition are positive or negative: having a high income or a supportive family isn't enough to guarantee a smooth transition. The stories of those we spoke to illustrate clearly how these factors connect and interact with each other in complex ways. Opportunities or resources in one area can often catalyse or support opportunities elsewhere. For example, friends and family often provided financial support for the people who participated in this study, offered somewhere to stay or encouraged their relative to contact a service or organisation who could help them. Similarly, difficulties in one area can spark vicious cycles in which transitions become more chaotic and progressively harder to manage. Falling out with family or friends can lead to homelessness and isolation that can undermine positivity or engagement with services. People fared best when they could rely on stability and support in several areas or from several sources.

Transitions involve a person actively negotiating and managing change, as well as coping and accepting with situations beyond their control. People found achieving this balance easier in a context of stability, where they could rely on continuity and support in a few key areas of their life. This report now explores each of the six themes identified in this chapter in greater depth:

- preparing for transitions
- relationships and social support
- house and home
- income and work
- attitudes to transition
- the role of services.

Each chapter discusses and explores why these factors are so crucial to people's experiences of transition, drawing on examples from the transition makers involved in the study and reflecting on the implications of these findings for service providers and organisations seeking to enable successful transition.

5 Preparing for transitions

Where a transition can be foreseen, preparing for it can help minimise disruption. If someone has the motivation, opportunity, knowledge and support required to plan and prepare, it is likely their basic needs remain met throughout the course of transition. Where this is lacking, transitions are far more likely to lead to unmet needs and be more difficult experiences. A lack of preparation precipitates many practical difficulties, from financial worries to homelessness.

Some transitions are unforeseen and cannot be prepared for. However, many are foreseeable and we found the extent to which people are prepared for these varied greatly. Preparation can help secure a successful transition to the extent that it avoids the changes involved in that transition translating into instability and chaos in other areas of a person's life. For example, with preparation, someone leaving prison can ensure that their transition does not lead to homelessness and poverty.

It is important to distinguish between individual preparation and institutional preparation. If an individual knows they are about to experience a transition, they may take steps to prepare for this by finding out what options they have or drawing on the support of others for example. Many transitions involve, by definition, moving into, out of or through institutions of some kind (prison, schools, health or social care, etc) and, in this situation, transitions are foreseeable and service providers can become key players and partners in helping the person prepare.

The extent to which professionals and service users in institutional environments prepared for transitions together varied greatly. Comparing the experiences of people leaving prison with those the disabled young people we spoke to who had left education illustrates this variation clearly. Both of these transitions involve moving through institutions. They are foreseeable transitions and involve having contact with professionals and service providers which could be used to prepare people for the changes ahead. The people we spoke to, however, reveal the very different ways in these opportunities are utilised.

Planning pathways through transition

Young disabled people in contact with children's social services benefit from a Transition Plan beginning at age 14/Year 9. This is put in place to carefully manage the transition between children's and adult services. Similarly, care leavers benefit from a Pathways Plan that records their hopes for the future and aims to coordinate support to help them realise these.

The constellation of services and support around these groups meant that invariably these young people had access to adequate and stable accommodation and a stable income (most often from benefits). The level of preparation and transition management experienced by these groups – compared with other groups in the study – was unmatched, and this helped to ensure that their basic needs, for an income and stable housing for example, were met. In these cases, service providers and institutions prepared for the transition in partnership with the service user, offering support and guidance to help minimise the risks of transition.

Lost opportunities to prepare

The experiences of those leaving prison provide a stark contrast to this: they stand out as a group for which there was a profound lack of preparation.

Spending time in prison tended to entrench the existing needs of this group: wrenching them out of their social networks and reinforcing people's isolation from family members and potential support networks, pushing them further away from the labour market and employment, disrupting people's access to a stable flow of income and further destabilising their access to secure and maintain decent accommodation. For these reasons, the stakes are high and ensuring a stable, planned transition out of prison offered the individuals in question the best opportunity to meet their needs adequately after release and move on from patterns of offending.

However, chances to prepare during incarceration were often lost and Chris' story is good example of this. Preparation and planning for those on short sentences or on remand is particularly lacking, which is of particular concern given that over half the total prison population (about 90,000) is made up of those on sentences of six months or less, with a further 8,000 prisoners being held on remand at any one time.²⁰ Research has also shown that those on remand are half as likely to have received advice on resettlement as sentenced prisoners, and will receive no discharge grant.²¹ This is causing increasing concern given the growth of remand populations in prison (up 6% between March 2007 and 2008) in England and Wales.²²

Recent work by the Transitions to Adulthood (T2A) Alliance²³ describes support available to young adults leaving prison as inadequate and patchy. They argue that young adults are being set up to fail, with a lack of planning meaning many leave prison without the basic necessities they need: at least one form of identification, a national insurance number, a bank account, and basic financial security, e.g. benefits or work.²⁴ Whilst T2A's work focuses on the needs of 18 to 24 year olds, the findings of this study suggest their conclusions may be more widely applicable.

Several of the people we spoke to took part in education programmes whilst in prison. They also described becoming healthier and putting on weight during this time. Unfortunately, it was clear that maintaining and building upon this post-release was unlikely because of the lack of smooth transitions into secure, safe and stable environments. For example, with no other options open to her upon release, Jade (28, left prison five months ago) went to stay with a friend of hers with whom she'd first started taking drugs with. She started using again and described how she felt about coming out: "straight away I had it in me mind to use... I was scared of coming out and doing, coming out and using again and going over". Her concerns about overdosing are borne out by research showing that male and female prisoners are 29 and 69 times more likely, respectively,

than the general population to die in their first week out of prison,²⁵ with the risks greatest for people in their late 20s and 30s.

The stories of those who took part in the study are complemented by the testimonies of service providers in this area who explained that ‘through the gate’ services offering just the kind of planning and support required are too rarely available to prisoners. There is no statutory duty for local authorities to provide such services, and where they are provided, eligibility criteria are often restrictive and capacity insufficient to meet demand, often due to short term and insufficient funding streams.

CHRIS’S STORY

Chris is 25 and has been in and out of prison four times in the last few years. They’ve all been short sentences, from a week to four months long. He went to prison the first time because it was the only way he could see to get help: after falling out with his family, Chris had been rough sleeping, begging and robbing shops to fund his drug habits: “I were on self destruct... I smashed a window, waited for the police to come, got arrested... I actually waited cos I wanted that much help”.

Going to prison was daunting for Chris. He felt on his own and wasn’t able to take advantage of the courses and workshops because he was serving short sentences, and was often ill due to drug withdrawal. Chris has left prison four times now. He hasn’t been able to rely on his family because of what he’s done in the past and hasn’t wanted to contact friends because that would mean he’d definitely start drinking and

taking drugs again. Leaving prison felt like “walking out of that gate back into the big bad world again”. He had been told he’d get help finding accommodation but this never materialised. The first few times he just went “back to square one” to the nearest off licence and drug dealer.

The last time Chris left prison was different because he knew how things worked and where he might be able to go for help. Before he left he had organised returning to a drug treatment centre that he’d been to in the past: “this time, I knew I wasn’t just walking out of them gates into the hell, as I call it. I knew I was going to be safe, I’m not gonna be on the streets, I’m not gonna be in the cold”.

Chris has now begun a drug treatment plan and his priorities are staying off drugs and alcohol. Eventually he wants to get back in touch with his mum, have his own flat and a job to keep his mind occupied, but at the moment he thinks he needs help.

In the absence of this kind of support, help from family or services post-release could buffer those leaving prison from the worst impacts of this transition. Unlike Jade and Chris, two of the other people we spoke to had managed to maintain or rebuild good relationships with their family during their time in prison and relied heavily on their support. After a 16-month sentence Jack was able stay with his Mum, a move that has given him a backdrop of stability from which to move forward. This buffered him from the costs of failure to prepare for the transition out of prison that other people we spoke to felt so keenly.

For those lacking positive family support to help bridge the transition out of prison it was a difficult time fraught with risks of returning to behaviour that led them to prison in the first place. Neil (33, left five months ago) served a 15 month sentence. Both his parents died when he was a teenager and his brother now lives in Greece so he doesn't have much family support. He explains that he was anxious before his release: "I didn't know what to expect or where to go or what was going to happen". He was met at the gate by a caseworker from the local Community Chaplaincy which provides support to prisoners leaving the local prison. This made a massive difference to him. The caseworker helped Neil secure accommodation at a hostel and, in addition to the practical support he received, Neil was relieved to have someone there who cared.

Overall, sensible, holistic, needs-focused preparation for release from prison was unusual. The day of leaving prison often involved a stressful struggle to meet their basic need for shelter, with several people we spoke to not met by anyone at the prison gate, immediately returning to rough sleeping, drug use and often offending. The weeks after release were often an extended struggle to secure an income, stable accommodation and ways of managing and overcoming addiction. Later sections of this report discuss in more detail the importance of social support and interactions with services for people's experiences of transition, both of which buffered those leaving prison from the fall out of lack of preparation and an absence of transition management. There was a clear and stark difference in the experiences of disabled young people leaving education, for example. This group of transition makers benefited from advanced, personalised preparation and long term transition management. Such preparations were important in ensuring that certain needs were met, particularly basic material needs such as housing and adequate income.

Preparation does not ensure success

The comparison of these different groups of transition makers shows that preparation can improve a person's chances of making a successful transition. However, the testimonies of some of the people we interviewed show that whilst preparation can avoid having unmet needs in the short term, it may not guarantee successful transitions in the longer term. The experiences of many of the young

disabled people leaving education who were involved in this study provide good examples of this: on the one hand they tended to experience structured and planned transitions out of education and into adulthood; however, on the other hand, in the longer term they frequently lacked options and progression routes to match their preferences and aspirations.

Up to the age of 25, the disabled young people involved in this study were able to engage with activities and programmes designed with their needs specifically in mind – these included training and volunteering opportunities, as well as sports and creative activities. Youth services for this group however tend to end at 25 (often reflecting funding streams). One service provider explained: “There’s very little provision beyond 25 ... After that it’s often completely unsupported. People volunteer here [a community centre] for years and years. There’s nothing beyond that. No more opportunities.”

This issue was also highlighted by Jamie, who is 24 and has severe dyslexia (see Jamie’s story). He explained that since he started coming to the community centre he’s “learnt so much, done so many things”, but he worries: “I just don’t know what’s going to happen after I turn 25.” His anxiety reflects the experiences of other young disabled people who took part in this study, who had ambitious career aspirations but sometimes (and particularly for those with behavioural and learning difficulties) faced limited options in the labour market. There is a clear mismatch between aspirations and opportunities for this group: the activities and interests they develop at community centres or in the course of other programmes often fuel career ambitions which the labour market offers few opportunities to fulfil.

Highly structured preparation and management of transitions for this group helped ensure that chaos, instability and unmet need during the transition and in the short term were invariably avoided. However, for the young people the success of their transition out of education related to their ability to find fulfilling activities and/or employment, for which there were sometimes limited opportunities in the longer term.

When planning isn’t possible

Many of those who took part in this study faced a much less predictable transition. Those who experienced bereavement and who left an abusive relationship all faced a significant amount of uncertainty, combined with difficult emotional environments which precluded preparation and planning.

Those who experienced bereavement following the long-term illness of a spouse or partner are a good example of how foresight and knowledge that something will happen does not necessarily correspond with opportunity or ability to prepare.

The experience of caring for and seeing the progressive illness of a partner often undermined and eroded people's ability to cope after their death.

Bob's story is a good example of this. His wife was diagnosed with cancer and died a year later. Bob experienced one of the most extended and difficult transitions in the sample, in spite of the fact that he had a year to come to terms with what was about to happen. During that year Bob's only focus had been caring for his wife, so whilst he was aware that he would be bereaved, he had little real opportunity to prepare for it. When his wife died, Bob actively withdrew from the friends and family around him and sought escape from his previous life. In his own words: "I crumbled, and I crumbled like anything, before I knew it I was actually sleeping on streets and waking up pissed out of my head and not knowing where I am, just a complete wreck... It destroyed me."

Those who shared their stories of leaving abusive relationships also described how the circumstances that eventually precipitated the end of the relationship were invariably unpredictable, unplanned for and traumatic. Whilst a desire to leave the relationship may have been there, exiting relationships was most often opportunistic, and sudden, often the result of a decision in response to an unpredictable event, for example a particularly violent argument. This was the case for Paul, for example..

It was common for those who had left abusive relationships, like Paul, to leave and then return to their partner several times. For one person we spoke to, this pattern continued for 13 years. Often this reflected the trade offs and conflicting priorities that people faced when thinking about leaving or staying in such a relationship. Erika explained how she "was so desperate to be a two-parent family" that she endured a violent relationship for longer than she otherwise might have. Others explained how the uncertainty of what would happen if they left the relationship was a strong motivation to stay. In spite of the harm the relationship was doing to them, they "knew what was coming", whereas leaving the relationship carried risk and uncertainty.

These stories show that moving out of harmful situations often requires balancing several needs and priorities, not only of the person in question but of their children and others they care for as well. When different needs conflict, they can become entrenched, especially where there is fear of change and uncertainty about the outcome of taking a new approach. If clearer and less risky routes out of such situations were open to people, it may be that the transition could have been easier to contemplate. Knowledge of and access to refuges was very important in this regard for those leaving abusive relationships.

PAUL'S STORY

Paul is 51. He was married for nearly 19 years, but left his family home ten months ago. He had experienced serious physical and mental abuse for five years and eventually left after a bad argument one night. He walked away without any of his belongings, and still doesn't have his birth certificate, passport, driving license or any personal property.

Paul's wife has mental health problems and severely self harmed as well as being violent towards him. He had started to drink heavily to cope with how hard things were and this began to be a problem at work. Eventually Paul lost his job, which he found difficult as he'd enjoyed his career and didn't feel like he had a purpose anymore. This made his dependence on alcohol worse.

Paul tried to leave his wife many times, but every time he did he ended up sleeping rough and was then convinced to return home. He was also concerned about

his wife and step-children and wanted to make sure they were ok. Nobody knew what he was going through as he was ashamed and embarrassed to talk about it.

After leaving ten months ago, Paul slept rough for seven months before finding a hostel, where he's been living since. He's found the support there extremely helpful and has been able to cut down on alcohol. He recognises now that he needs support and help and wants to always make sure he has that in the future.

Paul had lost touch with his children from a previous relationship as they disapproved of his second wife, but now he has left they are rebuilding a relationship and Paul is seeing his grandchildren, which keeps him motivated to work things out. He's learnt a lot from his experiences and is happier now. He knows he won't be well off, or be able to afford a nice house, but is happy to be starting again and looking forward to getting his own flat.

6 Relationships and support

It is hard to understate how much having supportive family and friends can smooth someone's experiences of transition. The shape of people's social networks varied significantly, including immediate and extended family, foster and step family, and friends who had been through similar experiences. Transitions are times of vulnerability and risk and these networks can offer crucial sources of advice, motivation, emotional support or practical assistance that can buffer people from the dislocations of change in their life.

Transitions and relationships

Confirming the findings of other research,²⁶ this study clearly shows that people's experiences of transition are overwhelmingly shaped by their interactions with other people, in particular their parents, siblings, children and friends. It also reveals that family and friends are often the very first port of call when people experience transition and seek support as well as being the place people turn to when other options fail.

Social contact with friends and family plays a number of roles in people's lives and was crucial for those of all ages who took part. Social contact is valued both instrumentally, as a source of emotional and practical support, but people also have a need for it independent of its instrumental value. The care leavers who took part in this research reported for example that one of the hardest parts of leaving care was the isolation and loneliness they experienced when they moved into their own flat. Those making transitions without social contact and support suffered on two levels, lacking the emotional and practical support that family and friends can provide and also missing out on the intrinsic value of relationships with others.

Crucially, when people spoke of their relationships with family and the support they drew from them, they were using the word family in a broad sense: they were not referring to who they lived with, or to only their immediate family (their parents, siblings and children). Included in the family that people described as so central to their experiences of transition was extended family, including grandparents. 'Family' also included surrogate family members including family-in-law, very close friends and guardians who had become family, by providing foster care for example or guidance during particularly hard times in people's lives.

Importantly, many of the people who took part in this study came from single parent families or families fractured in other ways (care leavers are a particularly good example). However, this did not mean that their families, in the broader sense described above, were not central players in their lives and key sources of support. Jack, for example, had spent some time in foster care as a child and now has close relationships with his biological mother and father, his foster parents and his five foster and biological siblings.

Emotional support

Emotional support offered by families and friends took several forms: family were often a source of encouragement during hard times. On a more fundamental level, people's relationships with family often provided them with friendship and a reliable source of basic social contact. Tom (52), for example, spent six

months in hospital for depression. He now relies strongly on his mother, who is 72, for company and support. She visits him once or twice a week and has put him in contact with the two organisations Tom is involved with for activities. She is his main source of social contact, raising fears about the sustainability of his support networks. Emma (who is 53 and has bipolar disorder), unlike Tom, has a big family, drawing on the support of her parents and five brothers and sisters. They help her manage her mental health problems by letting her know when her behaviour changes and it seems that she might be relapsing and getting ill again.

For some, family were also role models, providing wisdom and advice during change and trauma. Eva is 33 and her boyfriend died suddenly 8 months ago. After he died, she relied heavily on her mother who has “always been a very strong role model” for her. She explained how the beliefs and eastern philosophies she inherited from her have helped her cope with bereavement: “I think I was able to realise how, and eastern philosophy teaches you, that you are part of a very big thing and you are a very small part of it, and everything is as you wish it to be and if you want to get better you will get better”. Eva’s story illustrates the way that culture, spirituality and/or faith can provide a resource for some people during transition. People we spoke to found their faith helpful as an outlook, but also a source of social contact and support from other people at church for example.

People’s relationships with their children also impacted on their experiences of transition. Those in the sample who had children were concerned to protect them from any traumatic aspects of the transition where possible, but this wish to protect them often sat next to a reliance on their children for emotional support. This was the case for both young and grown up children. Susan, for example, explained how important the support of her 14-year-old son was after her husband’s death: “[he] was my rock and when it happened he took on the role of protector, he was the man of the house, and I was his mum and he had to protect me”

For those who were parents in the sample, their children also provided them the motivation to cope and get through. Jade’s two children were taken into foster care four years ago and after leaving prison three months ago she explained: “All I’m thinking about now is my kids, I hope it works out between me and them, because that’s the only thing I want now.”

Practical support

Family were important sources of emotional support and motivation, but they also provided practical and logistical support to those people making transitions. It was notable that many of the people involved in this research didn’t feel comfortable relying on their family emotionally, but relied on them heavily for other things. This

kind of support ranged from helping a bereaved relative organise a funeral or do a supermarket shop, to providing rent free accommodation following redundancy or cooking a meal for someone who recently left prison. Jack (who's been out of prison for a year now) explains how tightly he has to budget his income and how important family help can be at the end of a week:

“ I’m struggling with money at the moment, yeah, a big part of it goes on gas and electric, when I’ve got me gas and electric sometimes I’ll struggle for food and stuff like that, but if me mum lends me something I can get food with that or if she can’t afford to lend me owt then I’ll just go to me mam’s and have me meal at her house.

These examples show how even small networks of family can provide meaningful sources of support during transition, providing both practical and emotional support and often shielding people from the worst effects of transition, providing somewhere to stay, some money to tide people over or advice to help them through. For those who lacked such contact the experience of transition was undoubtedly more challenging, and crucially it left them much more reliant on support from services and organisations, a point which will be explored more fully later.

Beyond family and friends

The stories collected during this study show that social support doesn't just come from family and friends. As noted above, some people we spoke to either didn't have these networks to draw on or for some reason didn't want to or feel they could. Several other sources of social support were identified by people in the study, however.

Firstly, some relied upon organisational or professional contacts for the kind of emotional support that families and friends more often provided. This is not to say that these contacts became friends. Rather, in their role as professionals or service providers they fulfilled transition maker's needs for emotional support, guidance and encouragement. In many ways, the testimonies collected in this

study suggest that the distinction between services offered by organisations and by more informal support networks can become blurred. This is discussed in greater depth later.

Another striking finding of this research is that people also rely on the kindness of strangers for social support during transitions. These strangers were contacted in several different ways, but often provided extremely valuable support. Eva and Susan for example, after the death of their partners, relied heavily on one person who they hadn't known very well before this period of their lives. Eva explained:

“ For some reason I didn't want to contact any of my friends I knew very well, but this friend who helped me move, I didn't know him very well, he was kind of a recent friend, so it was easy for me. He didn't know everything about my life, so it was kind of easier, you feel less judged.

Others found contact with strangers or new acquaintances that had been through similar transitions particularly helpful, because they were able to empathise and understand their situation far more than other friends or family. The internet was highlighted as a particularly useful resource for connecting with such people, through support groups or discussion forums. Susan explained that in the four weeks after her husband's death she didn't leave the house, but found great comfort reading other people's stories online. It made her realise that she wasn't alone. Several of those in the sample who had been made redundant, or left an abusive relationship also described how talking to people who had been through similar things had really helped them.

The findings of this study in this way are hopeful, showing the numerous places that social support is found. It also shows, perhaps surprisingly, that sources of social support that help people negotiate transition successfully don't necessarily have to be in place before that transition. When a crisis or change of circumstance occurs, quickly finding new sources of support can make a significant difference to people's experiences. It is important to note, however, that access to such networks appeared to be dependent on having resources such as access to the internet, which those with more chaotic lifestyles often lacked.

The limits of social support

The testimonies of those who took part in this study warn against making the simple conclusion that contact with and support from family and friends can help people through transitions. This was certainly true for many of those who took part, but for others, their interactions with family and friends affected their transition differently. Indeed, for some, families could be part of the problem.

One key consideration is that transitions themselves can undermine people's relationships with family and friends. Among the transitions explored here, leaving prison and leaving an abusive relationship in particular seemed to undermine and be connected to losing touch with friends and family. This weakening and distancing can occur for several reasons.

Transition makers may already have weakened support networks and have to negotiate transitions in this context. This was the case for example, among several of those leaving prison with histories of criminal behaviour and drug abuse. Chris (see his story) explained that he couldn't see his family because of what he'd done in the past. He had also avoided going home to his mum as she has problems with alcohol and he felt that this might exacerbate his own problems with drugs and alcohol.

It was also common for those who had been in abusive relationships to have gradually become isolated or estranged from their family and friends. This was often connected to people resisting advice to leave their abusive partner and then feeling that they could no longer confide in or rely on friends when the abuse continued and having to then negotiate transitions alone. Chris for example was keen to get himself sorted before he tried to get in contact with his Mum. In some cases then, support from friends and family is conditional and people feel bound by rules of reciprocity and respect, feeling a legacy from past interactions that can weaken or compromise sources of support.

Sometimes people actively distanced themselves from their social networks. They did this for several reasons. Chris for example didn't want to see his friends because he feared he'd start drinking and taking drugs again if he saw them. This echoed the testimony of other people we spoke to with drug and alcohol problems who often distinguished between 'genuine friends' and 'drinking buddies' or mates they could shoot up with. So whilst for some, family and friends become crucial sources of support during transitions, for others relationships come under strain, weaken and sometimes breakdown as that person negotiates transition and often changes themselves as a person, giving up drugs or becoming a single person.

JULIE'S STORY

Julie is 45. She owns her own house (with a mortgage) and lives with her two children who are 14 and 16. Eighteen months ago her husband Luis of 16 years died suddenly in a road accident.

Luis' death has been hard for Julie to adjust to. They had lots of plans about what they'd do when the children left home and now everything's changed.

It's also been hard financially since Luis died. At the moment, Julie receives Widowed Parent's Allowance, but that will stop in two years. To make sure she can take care of her kids and keep paying the mortgage, Julie is retraining and taking a university degree. She's also working 20 hours a week at a local pre-school and taking care of both her children, the youngest of whom has Asperger's Syndrome and needs a lot of support.

Julie hasn't relied much on her family and friends. Her own

parents are both dead and she described her siblings as quite needy, so she doesn't want to rely on them. Luis' family live nearby, but they haven't been supportive either.

Julie thinks she tends to look inwards when things are difficult anyway: she doesn't think it's sensible to rely too much on other people, because you might "get your fingers burnt". Julie's not wanted to see her friends much since Luis died. She explained: "I've cut out most of my old friends – sounds awful really – because they don't understand what I'm going through. They can't have the empathy that I need."

At the moment, Julie's focusing on looking after her children and giving them a good start in life. After that, she can start to think about what she wants to do with her life. Having the kids to look after gives her a reason to get up in the morning and a purpose. Without them, she doesn't know how she would have coped.

There were also differences among the people we spoke to in terms of how averse or open to drawing on the support of others they were. Reluctance to do so could be for several reasons: for example, they felt more comfortable being self-reliant because if they relied too much on others they might 'get their fingers burnt'. For others, friends and family reminded them of the trauma or stress of the changes they were trying to cope with.

For several of these transition makers however, the experience of transition changed their attitudes towards relying on or drawing support from others. Eva for example explains how her experience of bereavement has shown that it's ok to

“rely on others and it’s ok not to be so strong all the time”. Chris has always tried to deal with his problems on his own but he explains that having cycled in and out of prison several times he realises that he needs help. This pattern provides one explanation of evidence from other research that experiencing adversity in the past can foster resilience when dealing with future shocks,²⁷ and hence why some of the younger people we spoke to seemed to struggle more with transitions. This conclusion however must be seen in the broader context of this study, which shows that having stability in one or several aspects of a person’s life is a crucial resource to anchor and buffer them from the worse experiences of transition, so whilst previous experience of adversity can be an asset, if these experiences occur too often or are too severe they are likely to make transitions harder.

Transitions can also actively weaken social support networks due to people moving around physically during them. This was particularly the case for care leavers, those leaving prison and those leaving an abusive relationship. For the latter group, leaving an area behind could be a crucial way of helping to ensure their safety, but it also served to isolate them from the friends and family they might otherwise have relied on for emotional and practical support. People leaving care and prison often didn’t move great distances (although clearly this is sometimes the case), but for these groups, even moving a few miles into an unfamiliar neighbourhood could serve to isolate them from friends and family, especially if people had restricted transport opportunities.

Transitions and the needs of others

As much as those we spoke to relied on friends, family and other sources of social support to help them through transition, it is important to acknowledge that people were also *relied upon* and had obligations to others. For this reason, viewing transitions and needs through the lens of the individual has limitations; transition makers were embedded in a web of relationships with others that both gave them support but also put demands upon them. Whilst social policy has increasingly acknowledged that when people have multiple and complex needs, these needs can become entrenched and harder to overcome, it has been less quick to recognise that multiple and complex needs *across* a group of people, a household or a family can have similar effects.

This was most clearly the case for those with caring responsibilities or children, who as well as meeting and renegotiating their own needs, prioritised the needs and happiness of their children or those they cared for. These things sometimes caused a tension, with people needing time to relax, process and cope with change, but unable to find this time and space in the context of stressful and busy family life. This was the case for Julie for example.

It is in this respect that a gender difference is most clear in this study: women more often than men shouldered these childcare responsibilities that added an important dimension to their experiences of transitions and their priorities. So, whereas the women in the sample who were struggling to deal with bereavement, redundancy, leaving prison or leaving an abusive relationship prioritised protecting their children and maintaining a safe home environment, some of the men in the sample without this imperative did not manage their situation in the same way. Unable to deal with the emotional trauma of their experiences of bereavement and relationship breakdown, Bob and Paul (whose stories are discussed more in the next chapter) spent months sleeping rough and drinking heavily, trying to escape from their previous lives.

Supportive family and friends can make a significant impact on an individual's experience of transitions. The inequality between those who have access to durable and supportive social networks and those who don't is a fundamental and under-acknowledged divide in UK society. Responding to this divide is a fundamental challenge for meeting needs in Britain in the future.

7 House and home

Having a home which is comfortable, affordable and secure provides a stable foundation for negotiating a transition, offering escape and respite from other stresses. Lacking such a home destabilises people's experiences of transition. Until such accommodation is secured, searching for it detracts attention and energy from managing other aspects of change.

Having a decent and stable housing situation was an important factor enabling people to negotiate transitions successfully. People's housing situation has several dimensions of relevance here, including tenure, size and quality, location and neighbourhood, and affordability. The people we spoke to were in very different situations and these played an important role in their experiences of transition. Furthermore, transitions themselves often destabilised people's accommodation. This was particularly true for those leaving prison or an abusive relationship. Indeed, according to the most recent statistics, 17% of households accepted as homeless by their local authority in England became homeless due to domestic violence or leaving an institution (including prison, local authority care or the forces).²⁸

People's housing situation was an important resource during transitions on two different levels: it provided transition makers with basic shelter, a necessary condition for being able to manage a transition well. Furthermore, a person's home was invariably the site from which they accessed other basic resources that are practical requirements during transitions, such as a phone line.

One service provider working with people leaving prison explained how simple things like making phone calls to letting agents, social landlords or other organisations can become stressful and difficult when people are homeless. One of her service users was forced to use a pay phone to make crucial phone calls, but struggled to find the money to do so and to be able to stay on hold whilst others were waiting to use the public phone box. This is an example of the way the so called 'poverty premium' affects the most vulnerable members of society, meaning that those with the least resources end up paying more for basic necessities.²⁹

Several of the people who took part in this study had experienced episodes of rough sleeping. All were men and had spent extended amounts of time sleeping rough: they had either left prison, suffered bereavement or left an abusive relationship. For those that had come out of prison, sleeping rough was closely linked to their drug addictions and was interspersed with going in and out of prison and committing crimes to fund their addictions. They couldn't rely on or stay with friends and family due to their drug habits and criminal behaviour.

Paul slept rough for several months after leaving an abusive relationship. He saw no other option open to him besides staying in the violent relationship or sleeping on the streets. This led to several years of alternating between rough sleeping and returning to his home. Eventually Paul found a place, through word of mouth, at a direct access hostel offering him a supported pathway to permanent housing. He's been at the hostel three months now and in a year or so hopes to have his own flat. When asked what would have made his transition out of that relationship easier, echoing the thoughts of others in the study he replied:

"I would've said a single room in a safe house, that would make so much difference, cos then you've got an address to carry on looking for work, you've got somewhere safe to come. If I'd had a safe flat to move from my house, I'd still be working, I'd still be seeing my family, so that was the biggest thing."

BOB'S STORY

Bob is 44. His wife of 15 years died a year ago from cancer. He cared for her for the seven months before she died and found watching her health deteriorate really difficult. After she died, Bob "lost the plot completely". With hindsight he's surprised he didn't cope better, as he'd been in the army for 17 years and coped with friends dying, but this time was different and Bob found it impossible to cope.

After the funeral Bob felt that he had to get away, to escape the house his wife had died in, to escape from people talking about her and to have some time to think. He left his home, family and friends and got on a train. Bob initially stayed in a bed and breakfast by the coast, to give himself time to think. He was drinking heavily and started to sleep rough as money began to run out.

Bob spent seven months like this, travelling around Britain, drinking and trying to decide what to do next. Bob tried to get in touch with a few organisations who he thought might be able to help. Every time he did they focused on his alcoholism, but Bob wanted to talk about his wife and get help to grieve.

Eventually, Bob got in contact with his old army regiment and they were able to help him. They organised for him to see a psychiatrist, who he still sees now and which he's found extremely helpful. Being able to deal with his wife's death has helped Bob stop drinking.

Bob found a hostel for rough sleepers which he stayed at for three months. He's now living in a shared house and hoping to start renting his own flat within the next year. This is really important for him: once he's got his own place he can start moving forward and hopefully get back to work.

For those who experience rough sleeping as part of their transition, their immediate physical needs for survival, warmth and food overshadowed any attempt to negotiate the transition they were experiencing. Often these experiences were compounded by use of drugs and alcohol which were used as ways to cope with and numb the experiences people were going through. Finding decent shelter and housing was a fundamental first step for Chris, Jack, Paul and

Bob, and something that in the end enabled them to move past their negative experiences of transition and find new ways to meet their needs more broadly.

Several women in the sample also faced difficult housing circumstances. During the 13 years Ruth spent in an abusive relationship, she intermittently slept in her car with her children to escape her partner. She, like all but one of the women who shared their stories of leaving an abusive relationship, had spent time in refuges. Whilst these offered an opportunity for escape, the women who spoke of their time in hostels also found it a “scary experience” during which they were isolated from their support networks and their own space and belongings.

Rough sleeping and staying in refuges represent the harsh end of housing need encountered in this study, but other less severe kinds of housing situation also made transitions more difficult. For some, the quality of their accommodation proved a difficult environment within which to manage transition. Neil for example left prison and found a place at a hostel for homeless people. He found living there difficult however, and was eventually asked to leave, accused of intimidating other residents. He has now moved into a shared private rented flat, which he also finds stressful. He explains: “all I want is me own flat, somewhere I can call home, somewhere to go home at the night time ... All I want is to get out of this place ... I just need to be on my own.”

Other people in the study faced housing difficulties in different ways: Becky is 35 and has a history of mental health problems and going in and out of psychiatric care. She was most recently hospitalised three years ago and has been a victim of harassment from young people who live near her for the past 2 years. She has a council tenancy and is going to move, but the experience of harassment has been unsettling, undermining her mental health and reducing her opportunities to relax and manage her condition at home. Her experiences make clear that a home is crucially important not just for providing physical accommodation, but for providing security, stability and escape.

The stories considered so far in this section illustrate the diverse housing needs that people involved in this study experienced. A very common housing situation that hasn't yet been considered is staying with family and (less often) friends. Crisis, a national homelessness charity, estimates that there are 295,000 people living in ‘concealed households’, who are staying with friends or family because they have no other option and where the friends or family are dissatisfied with the arrangement and/or the accommodation is overcrowded.³⁰

On the one hand, staying with family often provided transition makers with welcome respite from the stress of meeting their housing needs in the private market or through the state (i.e. by accessing social housing), both of which invariably involve considerable effort, time and/or financial investment. Parents in particular, and for one care leaver a grandparent, often offered people the chance

to live rent free until they got back on their feet and were often flexible about contributions to bills where the person involved was short of money.

It is important to acknowledge, however, that staying with relatives and friends is not a panacea for people's housing needs during transitions. Indeed, the most common reasons given by households accepted by local authorities as homeless in England is that parents, relatives or friends were unable or unwilling to accommodate them.³¹ The testimonies of those involved in this study clearly convey why these situations are so common. One transition maker explained how he couldn't keep staying with friends because "they were married with kids and you can't impose too much" (Bob) and this reflected a broader sense among those who took part in this study that friends and family rarely offer unlimited or unconditional support. Rather, reciprocity was important and people were keen to move on as quickly as possible.

It is not only this concern not to burden others that compromises the efficacy of relying on friends and family for accommodation. Whilst family relationships and friendships undoubtedly provide valuable support during transitions, these relationships are always complex and often fragile or problematic. Alex, for example, moved in with his 80-year-old mother after leaving prison and whilst this provided him with free accommodation and stability, it has also led him to take on caring responsibilities which he has found stressful and increasingly burdensome.

For several of those who took part in this study, being able to move out of their parental or family home marked an important step in making a transition. Cara for example is 22 and has learning difficulties and behavioural problems. She relies on her mum's support a lot, but was relieved when she could move out into supported accommodation. She explains: "I just had to move 'cos we wasn't getting on, just kept arguing all the time. It's better now, 'cos when we argue I can just walk out and go home." For these reasons, it's important to have a nuanced understanding of the role of social support in facilitating successful transitions. This is discussed in further depth later in the report.

More than housing

Just as much as housing difficulties and housing need made people's journeys through transition more challenging, so too did having affordable, good quality and secure accommodation make people's experience of transition easier. Having such accommodation throughout transition gave people a stable, peaceful environment from which to both manage the often-unsettling experience of transition and escape from chaos, change and instability in other aspects of their life. In other words, accommodation was important as a *house* (and source of shelter, warmth and safety) and as a *home* (and source of peace and escape) anchoring people's experience of transition.

Having access to this kind of accommodation tended to be associated with either owning or socially renting a home. Furthermore, the longer someone had lived in their home the more valuable it appeared to be as a resource during transition. For Julie, Susan and Callum for example, their family-owned home remained secure after the death of their spouses and provided respite, protection and privacy for them to manage the other issues associated with bereavement and the transition to single life.

Other people who took part in this study secured stable accommodation through social housing. Whilst such a tenancy often acted as a buffer (from serious housing need) and anchor (providing stability) through transition, it represented a very different housing experience than owner occupation. In particular, the testimonies of those who owned their homes reflected their feeling of comfort, ownership and stability. Those in social housing appeared less certain of their housing futures and several people described how the size, location or quality of their accommodation was not appropriate.

Perhaps an even more fundamental divide between homeowners and people renting (either in private or social housing) was the basic socio-economic divide between those who had (or would have) equity in their homes and those who did not. Housing aspirations and choices were not the focus of this study, but it was clear from the interviews that those in rental tenures rented because they had to rather than they wanted to, and that, moreover, who owned their home faced greater stability in their home environment and financial future.

The stories shared in this study however also reveal that some people's housing situation does not fit traditional tenure categories. Two examples of this are particularly illuminating and reflect how housing is often secured through the market, but with the support and backing of people's social support networks. Maddy (30) moved into a new house with her two children about a year ago, mainly to have a fresh start and leave behind bad memories of an abusive relationship. A friend of hers bought a house and Maddy was able to rent it from him. She explains: "[the landlord's] brilliant, 'cos obviously he's a friend and he decorated and carpeted everything for me before I moved in so he was really helpful, definitely."³⁰

Rob, who is 36 and was recently made redundant, has been in a similar situation. He and his wife had wanted to buy their own home but were unable to get a mortgage. His father-in-law however was able to and Rob and his wife then paid it for him. They planned eventually to transfer the mortgage into their names, but Rob explained: "I knew the situation at [work] was looking dodgy anyway, so luckily we didn't transfer the mortgage." Rob's relationship with his father-in-law allowed him to keep his house after losing his job.

Maddy and Rob's stories show the important ways that people's social support networks can buffer people from the risks of the housing market, ensuring good quality of housing for Maddy and flexibility for Rob in the face of redundancy and a reduced income, options that both people struggled to secure in the private housing market. However, as discussed above, relationships with friends and family are invariably complex and sometimes problematic, so the security of these situations must not be assumed.

Having a home which is comfortable, affordable and secure provides a stable foundation for negotiating a transition, offering escape and respite from other stresses. Those with a decent income, financial security and supportive social networks were least likely to experience housing need, but those with multiple needs, including drug or alcohol use and mental health problems were most likely to have unstable housing, to experience homelessness and to struggle through transitions because of this. Some transitions tend to be associated with housing problems and homelessness, in particular, leaving prison and leaving abusive relationships. Ensuring that people in these groups have access to accommodation would enable them to deal with transitions far more successfully and help minimise the challenges they face.

8 Income and work

Having an adequate income, like having a decent home, is a foundational need for people negotiating transition. Money perhaps doesn't buy happiness, but it does provide a means of meeting many of people's needs and lacking enough of it causes stress and unhappiness. As well as an income, people's jobs provided them with routine, identity and a sense of purpose and achievement. For those seeking work, unemployment was a source of anxiety and stress, and the process of job searching and relying on benefits difficult, in part because of financial strain, in part because the situation undermined their self-worth.

Employment and needs

The people who took part in this study saw paid employment as a key part of ‘normal life’. Neil, who left prison 5 months ago, explained what he wants to achieve: “I want to be drug-free, I want to be alcohol free, I want my own place, I want a job, I want to just live a normal life”. Jack agreed: “I still get depressed and stuff, I just want to hurry up, get off of methadone, then start working and that, get a decent job and start getting some decent money for once.” These sentiments from unemployed transition makers reflect the broader findings of the study that employment is a key satisfier of people’s needs, and that maintaining or (re)gaining employment is often seen as central to a successful transition.

“ I want to be drug-free, I want to be alcohol free, I want my own place, I want a job, I want to just live a normal life

In general, employment played two roles in people’s lives. Firstly, and most obviously, by providing an income, employment provided a mechanism for people to meet their needs by purchasing goods or services in the market place. Those who took part in this study and did not have a job however, secured an income through welfare benefits. This group often (though not always) struggled to make ends meet, but not having a job also took a different kind of toll, which relates to the second role that employment played in people’s lives.

Employment also emerged as crucial to meeting people’s psychological needs. In this way, working was often experienced by people as a coping mechanism and escape from the challenges and worries in other areas of their life. Susan explained why she kept on working after her husband was diagnosed with cancer: “even though I didn’t do my job 100%, it was my sanity, it was my escape as well, and it was my way of trying to keep some normality”.

People’s jobs also provided structure and routine to their life, both in terms of their daily and weekly routines, providing them with something to do and a way of using their energy, but also in the longer term it gave people a sense of how their lives would progress through employment to retirement.

Employment often provided people with a sense of identity and purpose, and also provided a group of people to interact with, talk to and often befriend. Maddy, who has two children and left an abusive relationship two years ago, explains that her part-time bar job allows her to socialise and “be Maddy, to get away from being Mum all week”. Also crucial, employment provided people with a sense

of belonging and a feeling that they were making a contribution to the wider community and not being a ‘deadweight’.

This study suggests that having and maintaining employment through transitions helped ensure that a wide range of people’s needs was met. Employment often provided a foundation from which people could meet a whole host of different needs. This was most clearly articulated by those who lacked but wanted employment, who felt the impacts of unemployment keenly.

People’s experiences of transition and their employment interacted in many important ways. The transition makers who took part in this study can loosely be divided into four groups (although several people’s situation was less simple than this suggests): those who had and maintained employment; those who had and lost employment; those who were and remained unemployed or out of work and those who gained employment over the course of their transition. Some of the key issues emerging from each of these groups will be discussed.

Working through transition and the role of employers

Transitions have profound effects on people’s employment and only a handful of the people we spoke to maintained employment through transition. This reflects both the profound impact that transitions can have on people’s lives and also the vulnerable populations, at some distance from the labour market, included in the study sample. Indeed, several groups we sought to include in this study by definition will begin or end their transition not in employment (including those made redundant and young disabled people leaving education).

The people we spoke to who maintained employment throughout their transition had much in common. They had all suffered bereavement and all worked in professional jobs, including IT and social care. All took substantial time off work following the death of their partner or spouse and reported that their employers were supportive and understanding. Callum for example described how his boss was “absolutely amazing”, offering him flexibility when the inquest into his wife’s death took place and on her birthday.

This kind of support from employers was valued greatly. Not only did having secure employment ensure a steady and reliable income, but returning to work also represented an important step in getting back to normal. Knowing they had a job to return to offered people a clear route of progression beyond the immediate aftermath of their loss. Having and maintaining employment for these four people therefore played an important role in anchoring their journey through transition psychologically and helping to buffer the financial impacts of losing a loved one.

Losing employment during transition

People's experiences of employment through transition were not always so positive. Indeed, for several the experience of transition involved losing employment and sometimes involved spending periods of time in a series of different jobs and out of work. This mainly reflects the difficulty these transition makers experienced negotiating the challenges of transition and maintaining paid employment.

The experiences of Becky and Pete illustrate this well. Becky has had serious mental health problems for the last 10 years (she was diagnosed with bipolar disorder when she was 24) and was last hospitalised (for six months) three years ago. Here she explains how her symptoms affect her employment:

“ **Every time I've gone for a full time job I've ended up getting very ill within a couple of months and then it just gets too stressful. I usually manage to go straight into a full time job after being off work for ages [and] I can't cope with it, I get ill and end up in the hospital again.**

Becky felt that no support was available to help her maintain her job, from either the mental health professionals working with her or her employers, even though they were aware of her condition. In the end, Becky resigned because of the stress and is now out of work and on benefits. For her and for the other people we spoke to who had spent time in mental health care, a successful transition will involve learning how to manage and cope with the symptoms of their condition. Research clearly shows that when sustainable employment is possible, it can have positive impacts on mental health, including reducing symptoms and hospital admissions.³² For Becky, the interaction between her employment and her mental health problems remains problematic.

For different reasons, Pete's experiences of coping with transition and employment have also been difficult. Pete is one of only a few³³ in this study to have been through two of the transitions explored: four years ago, his wife died of cancer and since then he has been in and out of work. Eighteen months ago he was made redundant and he hasn't worked since.

Pete worked in the distribution and transport industry and took time off work after his wife died. He explained however that he felt pressure to return from his doctor, family and employers, but after going back for a few weeks he resigned: "I just couldn't handle it – all the emotions, emotional stress and everything and the fact that I was putting on this front because everyone knew and I didn't want anyone to make a fuss." People at work were very sympathetic, but this only reminded Pete of why he was upset. His resignation marked the beginning of four years in and out of employment, during which he's also struggled with depression, drinking too much and adjusting to a significant drop in income. At the moment, Pete remains unemployed and looking for work.

Pete's story was unique among those in this study who were made redundant. For most of the people we spoke to who had lost their job, this was a 'bolt out of the blue' rather than part of a wider story of transition and trauma. Being made redundant often had profound impacts on people's wellbeing, but this was especially true for younger people (including single young people who had recently started working and those in their 30s hoping to start a family) who seemed to find it harder to come to terms with redundancy. This appeared to be related to the fact that their job had been their main source of activity and a key source of structure and self-worth for them (see Rob's story for example).

The impacts among older people, especially those nearer retirement age, were less severe following redundancy, as they were more prepared to focus on their retirement and other activities. This was particularly the case for those who owned their own homes, had minimal housing costs and some access to savings or a pension and therefore less at stake in losing their job. As much as the greater financial security of the older people we spoke to was relevant, their ability to cope better with redundancy also seemed related to their outlook, attitudes and life experience. They seemed more able to frame their experience of redundancy positively, as an opportunity to rethink their lives and take new opportunities, as opposed to younger people for whom losing their job took a big financial and psychological toll and represented a huge barrier to living the life they wanted to.

Financially, people tended to cope with being made redundant adequately, invariably immediately signing on to Jobseeker's Allowance. In the immediate aftermath of redundancy, people often had other sources of financial support to draw on, including redundancy payments from their employer, relying on the income of spouses or support in kind (from food parcels to rent free accommodation) from family. For these reasons, recently redundant transition makers often didn't feel as financially strained as other people we spoke to who had been out of work for longer. Furthermore, it is likely that the impact of redundancy on those without family support and who are not eligible for redundancy pay would be more severe.

Those who were made redundant went through broadly similar phases: they didn't tend to prepare whilst still in their old job. When that job ended people

often described how it initially “felt like a holiday” and the reality of redundancy only sunk in a week or so later. People generally then began intensive job search activities, “chucking CVs out left right and centre”, but after a time this energy and enthusiasm tended to ebb and people began to feel like they weren’t going to find a job as the opportunities and vacancies weren’t out there. It was at this stage that those we spoke to began to feel hopeless and despondent about their chances of finding a job. This feeling often impacted on people’s job search strategies, undermining their enthusiasm for handing out CVs and searching everywhere for opportunities. For the people involved in this study this feeling was being strongly reinforced by news of an economic downturn, rising unemployment and competition for limited positions.

ROB’S STORY

Rob is 36. He is married, but doesn’t have any children. He and his wife would like to have a baby, but since being made redundant from his job in retail several months ago, Rob’s relieved not to have the responsibility of taking care of children.

Rob’s an active person and has found it frustrating not having work to do. He wants to get back to work as soon as possible so he can make himself useful, rather than being “a deadweight, waste of space” which is how he feels at the moment.

The process of applying for jobs has been hard for Rob. Receiving letters saying he hasn’t got jobs is getting depressing. Rob is dyslexic and finds it hard to fill in lots of application forms. He’s also found going to the Job Centre a difficult experience. He hasn’t received as much help as he’d have liked and doesn’t feel

that the advisers there really care about his situation. He doesn’t see the point of having to go, if you just sign on and then leave.

Rob’s also found it difficult because most jobs are looking for people with good qualifications, but Rob doesn’t have this, even though he has 15 years experience. He’s got to go back to college to get his Maths and English GCSE’s but is putting it off because he finds the idea of going back to the classroom a bit frightening.

Rob has a really supportive family. His Mum, Dad and Nan have tried to keep him motivated to apply for more jobs and also helped them out by giving them food parcels and cooking them meals. He’s relied most on his ex-colleagues who were also made redundant when the store they worked in shut down. He’s found it really helpful just talking to them about how things are going.

One of the people we spoke to who had been made redundant had managed to find work again. Linda is 42 and worked in her retail job for 10 years before being made redundant. She found a new job in a grocery store around the corner from her house four weeks after she left her previous job. What is striking about Linda's story is that her approach to looking for jobs and coping with redundancy was no different to other people's and she herself felt that she'd been "one of the lucky ones".

Gaining employment through transition

Very few of those who took part in this study moved from being out of work to in work over the course of their transition. This partly reflects how severe the impacts of transition can be, and also reflects the vulnerability of several of the groups involved, for example ex-offenders who face significant barriers to finding employment due to a criminal record, low educational attainment, health problems and a lack of stable accommodation.³⁴

Emma is 53 and was diagnosed with bipolar disorder 30 years ago. She has been working for eight years as a part time house-keeper at a private hospital. She thinks working is good for her mental health because it keeps her busy and occupied. She has kept her hours low and decided not to go into office work as it would be too pressurised and might exacerbate her symptoms, but Emma now has mixed feelings about this choice and explains:

“ Looking back on it now I've lowered my sights down too low, and its very difficult once you get yourself in a rut, you lose confidence... I'm certainly not doing a job that I should be doing, I'm wasting a lot of my talents [and] that grates against my nerves.

Emma's story illustrates a broader theme that for those transition makers dealing with ongoing difficulties, especially those with mental health problems and disability. There seem to be a trade-off between finding work, which they enjoyed and which is good for their mental health, but not being able to realise their greater ambitions. Jamie (who has severe dyslexia) for example has always wanted to work in computing or music. He now works as a cleaner for the council and previously worked for a supermarket. He has enjoyed these jobs, especially because he earns money and has something to do, but he relies on experiences out of work to gain new skills and really enjoy himself.

Remaining out of work

Many of the people who took part in this study remained out of work for the duration of their transition. The reasons for this varied: some were full-time parents; some had long histories involving low educational attainment, drug use and crime; others faced barriers to the labour market connected to their mental health problems or disability.

Transition makers who have been out of work in the long term can be divided into two broad groups: those who were seeking work, but couldn't find it and those who were not seeking work. Jen is 28 and desperately wants to find a job. She used to be in an abusive relationship and is now focusing on looking after her two children (age 8 and 2), the oldest of whom has serious health problems. She wants a job for many reasons: to be a good role model for her children, but also to do something for herself, whether a job or volunteering, to give her a break from the stresses of being a mum and running a home. She also wants an adequate stable income so she can stop worrying about how to pay for nappies and winter fuel bills.

Jen's case reflects a broader theme that having an adequate and steady income offers a context of stability and comfort from which transitions can be managed more easily. Managing on a low income over the long term has had a big impact on Jen: she's learnt how to "*juggle*" her finances but this has come at a cost, she can't afford to keep the house in the condition she would like and is constantly stressed. Like many of the other people we spoke to who wanted to work, Jen feels she can't get a job for two reasons. First, she feels there are no jobs out there, and second, she feels she has little experience and that her skills as a parent aren't valued by employers.

BECKY'S STORY

Becky is 35. She was diagnosed with bipolar disorder when she was 24 and since then has been in and out of hospital. The last time she was in hospital was three years ago. Becky lives in a flat she has rented from the council for 13 years, but she's currently trying to move because she has been harassed by people in the neighbourhood for two years.

Becky has been unemployed for the last three years. Before that she worked for 30 hours a week as a community mental health worker, but she found the job very stressful and got signed off sick. Becky eventually resigned

as she felt the job had played a part in her getting ill again and she didn't feel able to return.

Becky has left jobs in the past for similar reasons and is sad not to be in work. Reflecting on her experiences of moving in and out of work, Becky is upset she hasn't had more support in maintaining employment.

She wants to be in work so she can feel that her money is her own, rather than being on Income Support, which she feels is someone else's money. At the moment, money can be tight, and it's especially difficult during the winter because Becky has to keep the house warm most of the day as she's usually at home.

Other people in this study had different reasons for being out of work. Chris (see his story) for example, is so focused on meeting his other needs and overcoming difficult circumstances that finding employment is simply not a priority. For Chris, and other people with similar, complex and multiple needs, instrumental needs like employment are an ambition, but not an immediate priority. Ensuring an adequate income, stable accommodation and a positive environment (involving drug treatment, for example) is most likely to help make these transitions successful.

9 Attitudes to transition

Being able to see a transition as an opportunity for learning and self-discovery was an asset for transition makers. This positivity mobilised them to seek help and explore new ways of meeting their needs and coping with challenges. Those we spoke to had various reasons for having such positive attitudes: some attributed it to their parents, spirituality or faith, others explained that despite the challenges of the transition they had drawn strength from it and life was better now.

People's circumstances, resources and support networks are crucially important in determining how they manage transitions. Having a stable home, income and supportive relationships offered people the best chance of dealing with transitions in a way that doesn't have negative, long term impacts. It wasn't only people's circumstances that influenced their different experiences of transition however: people approached and thought about transitions in very different ways.

Transitions appeared to both affect and be effected by people's attitudes and outlook. People came to their experiences of transition with different approaches and perspectives. Some were more optimistic about their experiences than others, but their testimonies suggest that this optimism related to having a strong sense of their own agency and a belief in their control over their situation.³⁵ Having this sense of control was related however to having a stable home, income and good support networks. Optimism and positivity (and the resilience that springs from these attributes) seemed not to be an intrinsic part of people's personalities, but to relate to people's experiences in the past.³⁶ In this sense, positive attitudes to transition can be learnt from previous positive experiences of transition (see Eva's story for an example of this).

Eva, like other people we spoke to, had developed a strong, clear narrative describing what she'd been through and how she'd dealt with her changing circumstances. For these people, the transition often constituted part of their own identity, their understanding of who they were and where they were heading. Many people, like Susan, explicitly represented their experience of transition as part of the story of their life:

“ I've just had to shut the chapter
... and start down a road on
a new and different life.

Others, like Paul, had come to terms with the changes they'd been through because they could see how their transition had taught them something. In this way, people often felt ownership over the ways in which leaving an abusive relationships, or coping with a loved one's death had made them stronger and changed the way they think about life. A few years after losing his wife to cancer, his job and his home, Pete explained: "I feel quite proud of myself... At least I am starting again with that experience and the knowledge that I can do it in that situation". Similarly, Kat (a 28 year old woman we spoke to about leaving an abusive relationship) doesn't regret being with her partner, because she had her daughter with him and thinks that now she is stronger than ever.

Other people we spoke to explained to us how over the course of their transition they had adjusted their attitudes and aspirations and started again, but for some, the changes they were experiencing were so profound that they were unable to

see how the future would unfold. Julie explained the impact of the death of her husband: “it’s a total change of everything that you’ve thought and wished for and dreamed of, you know. We had so many plans and things made and none of that – it’s all gone.”

EVA’S STORY

Eva is 33. She lives alone and works as a manager in a graphic design company. Eight months ago, her boyfriend (who she was having a long distance relationship with) was murdered. Eva was hugely affected by his death and took a month of work to try and come to terms with it. Her employers were very understanding about her being away and coming back when she was ready.

Eva also went to bereavement counselling which she found extremely helpful. She also thinks that she’s coped well because of her attitude and outlook: “I’m just naturally positive. I think it’s because I’ve been through a lot in my life. I think the more you’ve been through the more you know that you’re going to be ok”.

Eva also thinks that this has a lot to do with her background, spirituality and her relationship with her mother. Both her parents are Chinese but live in Spain. Her mother has been through a lot and Eva sees her as a role model. She came to visit Eva after her boyfriend died and really helped her. She also inherited her spirituality from her parents and explains how this has helped:

I have some eastern philosophies that are very positive. Sometimes people when they suffer bereavement, they can’t see the light ahead, whereas with me, I think I was able to realise how, and eastern philosophy teaches you, that you are part of a very big thing and you are a very small part of it, and everything is as you wish it to be and if you want to get better you will get better.

More pessimistic attitudes to transition were common among those who had felt little control over their experiences and struggled to manage change. As shown in previous chapters, lacking control over transitions was related to an absence of anchors and buffers to help people through, be it a stable home or job, or relationships with others. The more challenging and chaotic people’s experiences had been, the more challenging they found it to interpret things positively or see how they had learnt or grown because of them. For some, this was because the experience of transition profoundly challenged their sense of who they were. This was certainly the case for Rob who was struggling to find work following redundancy: “I want to get back into work so I can make myself useful more than anything, instead of being a deadweight, waste of space, which is how I feel at the moment”. It was common for those who were made redundant to struggle to

come to terms with the label and experience of unemployment. For example Lisa said:

You've been a part of the work force for all those years, I mean I have never signed on until now for the whole of my life, you are now no longer part of the working people, you're a part of this other lot, that are sitting there all deflated every week.

For these people, it was clear that finding employment would make the biggest difference to their wellbeing, but many of them felt little control over this in the context of a competitive labour market and economic downturn.

For other transition makers, their lives were so chaotic and their immediate needs so fundamental, that thinking about the longer term, and trying to build their experiences into a broader understanding of where they'd come from and where they were heading was not possible. For this group, their experiences in the past often reinforced this tendency, because they hadn't shown that life was predictable or manageable. In this situation, people often focused on their current, short-term needs and priorities. Life was about 'getting through' not 'moving on'. Ruth for example felt that in the future "what will be, will be". It was clear that she felt little control over what would happen over the next few years, because of how unstable her life had been following her abusive relationship and mental health problems.

Where people had struggled to realise their ambitions and plans in the past, often for several years, lowering or at least redefining their aspirations was a reasonable and rational response. In these circumstances, the opportunities for transitions to be transformative experiences were minimised, as people were concerned to maintain stability and routine, over seeking out new options and alternatives. Erika's struggle to invest time and effort into making her home comfortable after years of upheaval and instability are a good example of this. For others, transition and change provided a much more positive opportunity to re-evaluate what was important about their lives, often focusing more on their relationships with family than on material aspirations.

Those with strong relationships and social support networks, who were able to talk about and share their experiences with others, found seeing their experiences in a constructive and positive way much easier. Being able to talk to others provided opportunities to reflect, compare and put experiences into a broader perspective. Some people gained this through support groups, online discussion groups or friends and family. Once again then, the stories of those who took part show how fundamentally important relationships are to negotiating transition.

Thinking about the different attitudes people had towards their transitions clarifies how closely connected the issues discussed in this report are. Those with positive attitudes to transition were able to draw strength from their experiences of adversity and often this positivity and sense of being in control were self-fulfilling, giving people the confidence and energy to seek out help and support. However, this positivity and optimism was related to their circumstances and past experiences: those who had managed challenges well, enabled by stable and secure employment, accommodation and/or social support were likely to both be more positive and fare better in their current experience of transition. For these people, a transition was restricted to a phase in their life and happened in distinct, linear stages, ending with 'moving on' or 'starting again'.

Where those we spoke to didn't have such experiences, resources or sources of support to draw on, and where their circumstances were chaotic, pessimism was more likely, which could undermine people's ability to develop strategies and seek help and support. These kind of dynamics clearly led to either virtuous or vicious cycles, meaning that those who had had disadvantaged pasts, or who were homeless, or living in poverty would find transitions harder to negotiate. Breaking this kind of cycle required securing stability in some part of their lives or finding someone to support them or rely on, either a friend or family member, or often, for those lacking these networks, support from a service provider or organisation.

10 Guidance and support from services

Every point of contact with transition makers ought to be seen as an opportunity to make positive connections, give information and build a relationship that will best help that person negotiate change. All too often, these opportunities are lost. Maximising these opportunities offers a chance to set people on a positive path through transition and is especially important for those who lack the support of family and friends.

This study is not an evaluation of services for those negotiating transitions in Britain today. This is beyond the scope and aims of the project, and people's interactions with and evaluations of services were not the main focus of the fieldwork. Nevertheless, the accounts of those we spoke to offer useful perspectives on what kinds of services and organisations offer the most helpful support for people making transitions.

The people we spoke to had engaged with a wide variety of services and organisations across the statutory and third sector. These included: Job Centre Plus, services offering IT training and support applying for jobs, the Probation Service, Alcoholics Anonymous, drug rehabilitation programmes, bereavement counsellors, social services, the National Health Service, schools, support groups, homeless shelters, Churches, the Citizens Advice Bureau and other third sector advice or advocacy organisations. The way people spoke about these interactions reflect the very different cultures of service provision and support that exist across these organisations and suggest that these cultures fit with people's experiences of transition and support needs during transition to varying degrees.

Cultures of service provision

People are in contact with services for a variety of reasons: sometimes they have to engage with a service to secure benefits (Job Centre Plus) or to meet the terms of their release from prison (the Probation Service). Other times, people are in contact with services by choice, to secure support or advice in response to a problem or task they must cope with. The objectives of these different kinds of service interaction vary, but all include or are underpinned by an aim to help meet the needs of service users. This is most straightforwardly the case for third sector organisations providing advice, advocacy or support. Statutory services often combine this objective with public interest objectives: for example, as well as helping people into work and providing help and support for those who cannot work Job Centre Plus enforces the conditions of receiving Jobseeker's Allowance, ensuring that recipients are actively seeking work. Similarly, in addition to helping rehabilitate offenders, the Probation service, also aims to protect the public and ensure that offenders are properly punished and meet the conditions of their release.

In contrast to third sector services which are invariably focused exclusively on supporting and assisting service users, these different objectives lead to a particular culture of service provision, focused on monitoring the behaviour of service users to ensure their compliance with conditions, *as well as* supporting and advising them. This combination of roles seemed, for some of the people we spoke to, to undermine the supportive role of the organisation. Jack, for example, who is 28 and left prison a year ago, explained the difference between his contact

with the Probation Service and with a voluntary organisation that offered him support when he came out of prison:

All they (the Probation Service) were bothered about is me just turning up for my appointment and seeing 'em and if I didn't turn up they'd breach me or back to jail. I'd just go in have a chat with probation officer for about 5 minutes, and then make another appointment to come back another day... they try to control you a bit I think, you know telling you you've got to come on this day at this time... but this place, you just get in touch with them whenever you need them.

Similar themes emerged from other people's accounts of the Probation Service and Job Centre plus. Rob (36, made redundant two months ago) compared his experiences at a local community drop-in session for unemployed people: *"they talk to you constantly, ask how you're getting on each week with the job search, how've you got on with this, how've you got on there, and you feel like someone actually cares, whereas you go to the Job Centre and you think, do they care?"*

Those we spoke to were most positive about organisations and services that had offered them practical support and advice, in combination with emotional and pastoral support and recognition. This type of interaction with service providers was a partnership, involving mutual support and recognition, which made the service user feel listened to, understood and respected, rather than judged, chastised or controlled. Many of the transition makers who took part in this study, like Maddy for example (see her story), had engaged with services that offered just this kind of support.

Like Maddy, Miles (who is 24 and a care leaver) has also drawn on support from several key relationships which have provided a foundation of stability, as well as practical and emotional support. Some of these relationships were with family (in particular his grandmother). Others were with foster parents and guardians who had clearly become a 'family of choice' for Miles. Several of the relationships that were important to Miles were with professionals or service providers. He particularly highlighted the importance of the relationship with his social worker, and his secondary school teachers. Miles' social worker provided him with stable support over the last 8 years or so. Clearly this relationship had been a source of both practical and emotional support for Miles. Echoing the sentiments of other care leavers talking about their support workers, he said: *"she's been dead good, she'd give me a bit of a row for screwing up so badly but she'll uh, help me out. Someone needs to give you a bit of a kick sometimes"*.

MADDY'S STORY

Maddy is 30 and has two children, aged 4 and 12. She has been in two abusive relationships, the last ending two years ago.

She moved house to get away from the bad memories attached to her relationships and feels much better in her new home. Maddy receives her income mostly through benefits, but she also works at a pub on Saturday nights which lets her socialise and “get away from being Mum all week”.

When Maddy was finding things hard, her health visitor referred her to a national charity offering families support in their own homes. For a year, a woman called

Petra would come to the house once a week for a couple of hours.

Maddy explained that she would just sit and talk, occupy the kids whilst she did the housework, or go to the park with them or sometimes she'd “sit and cry for a couple of hours and she'd just be fine about it”. What Maddy particularly valued about this contact was that she didn't feel judged. The interaction built up her confidence and made her realise that “life does go on after relationship breakdown”. Inspired by her experience, Maddy herself is about to become a volunteer for the organisation and is excited about being able to help a family like hers.

Despite moving between foster placements and guardians, Miles has managed to stay at the same secondary school and found in his teachers strong advocates and supporters. They liaised with social services and Miles' credits them with ensuring he wasn't placed in a care home. Miles also went to live with his English teacher for several years after she went through the procedures to be a ‘supported carer’. The emotional and practical support, advocacy and stability of these relationships for Miles were key to his ability to move through the transition out of care with relative success.

Two different kinds of service provision can therefore be distinguished from the stories of transition collected in this study: on the one hand, some transition makers had experienced flexible and supportive services that provided instrumental, practical support, but also made them feel as if someone cared. Other people we spoke to described service providers who didn't seem to care about their situation and instead of playing a flexible and supportive role, focused on ensuring the service users' compliance with rules and conditions which often caused anxiety for people already struggling to negotiate important changes in their life. Those claiming Jobseeker's Allowance or in contact with the Probation Service were particularly concerned that if they failed to meet the conditions of the service, including simply being late for an appointment, they would face

benefit sanctions or being recalled to prison. This chimes with existing evidence that recalled prisoners make up nearly 11% of the population of local prisons.³⁷

Up and down, but not out

Services that offered firm guidance (and sometimes criticism), but that also allow people to make mistakes were most valued by those we spoke to. Paul, who is currently living in a hostel, planning his route to independent housing and tackling his alcoholism, gives an example of this kind of approach. When he first went into the hostel he struggled to stay off drink and the people working with him noticed and spoke to him about it:

It weren't a bollocking, I think had it been a bollocking, you might've kicked back at it, you ain't telling me what to do... mine weren't a bollocking, it was advice, bit of guidance, 'maybe it would be better', and that day I didn't have any [drink], and the next day, I didn't yesterday, don't need to today, so it's still early days, but I'm 45 [days] down the line without one, I'm enjoying it.

For Paul, being engaged with a service that let him progress and regress, achieve and make mistakes has given him the flexibility and opportunity to slowly move forward, without fear that if he took a step wrong he'd be back on the street. Sam, who went into care when he was three, valued a similar opportunity whilst negotiating his transition out of care and into independent housing. He moved into his own flat, and stayed there for about seven months, but started to find things hard after he split up with his girlfriend of two years. He was able however to return to live with a supported carer, so he could maintain his independence but have someone there for support and a stable home. A year later he's looking forward to moving into his own flat again.

Prioritising needs

People often engaged with services because they identified a need they wanted help to address. When people approached services, there was a process of identifying and prioritising those needs. For some of the transition makers who took part in this study, this process was open and explicit, with care leavers and young disabled people for example actively engaged in planning their transitions in partnership with service providers. This model was helpful and valued because people felt involved in the process.

Other people we spoke to related different experiences however, and instead of being involved in the definition and prioritisation of their own needs seemed to have the perspectives of others forced upon them. Bob's experience is the most

striking in this regard. After his wife died of cancer, he felt he had to escape. He left his home and spent months sleeping rough, drinking, travelling around and trying to come to terms with his loss. At several points, he tried to engage with various services, realising that he needed to ‘get his act together’, but at every point he failed to get help with his bereavement as organisations only wished to tackle his alcohol problems. He described one interaction he had with an organisation: “I said it’s got nothing to do with the drinking mate, all your worried about is me drinking, it’s far deeper than that mate, but they couldn’t see that, every place I went to were like ‘oh you’re an alcoholic’”. This chimes with the experiences of Paul, who having left an abusive relationship found it much easier to access support as an alcoholic than as someone who was leaving such a relationship. This issue substantially delayed Bob accessing the help he needed. After seven months rough sleeping, he tried a different strategy and contacted his regiment (he had been in the army for 17 years) and at that point managed to access the help he felt he needed, on his own terms:

They had the right approach, I don't think they mentioned alcohol once. He said right, what are you thinking now, and it just started from there, and they just let me rabbit on, and I just rabbited for days, it was good, it was nice to get it all out. I'd bottled it up for so long.

Chris’ story provides an interesting comparison to Bob’s. Chris has been in and out of prison over the last few years and is now undergoing treatment for his drug problems. Asked what would have made things easier during this time, he answered “maybe if me girlfriend was still alive”. Chris had been with his partner for two years. She was an alcoholic and died in their flat from an alcohol-related fit. Chris hasn’t spoken to anyone (friend, family or professional) about his girlfriend’s death, instead he’s “tried to deal with it best as I knew you know, via drink and drugs”. In stark contrast to these men’s experiences, Jillian found that her problems with alcohol were in fact ignored, with practitioners and professionals focusing solely on her mental health issues: “drink was the huge problem, the thread which ran all the way through my ten years which wasn’t ever acknowledged. I don’t know why”.

This study has only provided a few examples of conflicts between people’s own priorities of needs and those of professionals and service providers. More research is required to understand this, and to further explore the gender dynamic hinted at by the stories above. Are men more quickly signposted to services for alcoholics, and women to bereavement or mental health services, even if this doesn’t reflect their own perceptions of their needs? If these kind of experiences are common and a barrier to people successfully engaging with services, it is important for services, organisations and funders to recognise the importance of engaging with service users on their own terms, or at least in dialogue with their own priorities and concerns.

11 Conclusions

Transitions are a crucial lens for organisations across the statutory and third sector seeking to understand, prevent and address unmet needs. Some of the most serious and persistent clusters of need are connected to transitions and the ways in which people are helped or enabled to cope with them are often inadequate, missing the simple things that matter most.

The stories in this report have shown that transitions can push people into homelessness, poverty or isolation and cause stress and anxiety. They can also prompt people to access treatment for drug addiction, provide opportunities to rebuild damaged relationships or enable people to rethink their goals and priorities. Transitions can be turning points and levers encouraging reflection, progress and reorganisation of people's lives, habits, attitudes and relationships with others, but they are only likely to offer these opportunities in certain contexts, where people's basic material needs are met and when they have the right emotional and psychological resources and support.

Having a stable home, an adequate income, supportive relationships and a positive and optimistic attitude can provide the stability and energy people need to deal with big changes. Furthermore, when transitions can be foreseen, preparation can ease the process of change and minimise destabilising effects. Support and advice from a whole host of organisations (from counsellors, to advice and advocacy, to refuges or hostels) can also buffer people from the worst impacts of transition, especially where their approach is non-judgemental, flexible and responsive to people's needs, situation and priorities.

Not everyone benefits from these foundations however, and in these circumstances transitions can be chaotic, stressful and become extended periods of struggle and adversity. This was particularly the case for those we spoke to who had left prison, left abusive relationships and had mental health problems. This instability meant people could only cope day to day with their situation, rather than being able to focus on longer-term plans and strategies to meet their needs, achieve their goals and be happy.

It is clear from the arguments presented here that negotiating transitions is more challenging for people living on low incomes, with limited access to resources and assets, and with few qualifications. These social inequalities effect how people make transitions and furthermore, transitions can reinforce these barriers and inequalities, driving people further away from job opportunities for example. This was certainly the case for those who had spent time in prison and also for some of those who were made redundant: having built up a good reputation and often decades of experience in a particular job, losing this job often left them floundering in a competitive labour market where that experience counted for little against more qualified applicants.

Socio-economic inequalities, as traditionally understood, are therefore crucial in determining who makes transitions successfully and who doesn't. Transitions seem to provide leverage for these inequalities to reproduce and reinforce themselves. However, socio-economic inequalities don't tell the whole story. This report has highlighted the fundamental importance of social support in making transitions and also revealed how social networks change and evolve and can be brittle and delicate in the face of transitions. Differences in the quality of people's social support networks is an under-acknowledged divide in UK society that has

profound and far reaching implications for people's lives. Being able to support those who don't have access to this kind of support, and fostering and nurturing these networks where they *do* exist is both challenging, morally and politically, and essential. How can the state and civil society support these networks without exploiting the unpaid work of carers and parents, reinforcing gender inequalities and infringing on things that have generally been considered private matters?

The stories also suggest that some younger people, especially those from disadvantaged backgrounds and with multiple needs, might struggle to deal with transitions more than others: they are more likely to be homeless, staying with friends or family or living in private rented housing. They are likely to be just starting out in the world of work and may not have been through experiences in the past that have shown them ways of dealing with challenging situations. In other words, the foundations required (both in terms of resilience and material assets) to make a successful transition may not have developed enough for some young people. Helping ensure that these first and seminal transitions are negotiated successfully may help develop resilience and provide them with the resources to cope with other challenges and transitions in later life.

Services and organisations play important roles in transitions. Transitional experiences often prompt contact with various statutory or third sector organisations and all of these points of contact ought to be seen as an opportunity to make positive connections, build relationships with transition makers that encourage and reinforce their efforts to seek help and offer signposting to other services and organisations that may also be able to advise or assist. Services which held people to strict behavioural conditions seemed to undermine these other objectives. Often services offering the right kind of support struggled to secure long term funding streams sufficient to meet levels of need in the area

At a time of acute pressure on money, supporting those facing difficult transitions could be an area for long-term savings as well as one where much greater human wellbeing could be achieved. Failed transitions are invariably very costly, not just for the individual involved but also for the state. Persistent unemployment, levels of recidivism and the costs to the health service of mental illness are all unnecessarily high, and could be substantially cut if services were shaped more along the lines we suggest, with fewer cut-offs and handovers.

Many of these conclusions are intuitive. They emphasise the importance of things that many people in Britain are lucky enough to take for granted: stability, a home, enough money to live of, and the positivity that often comes from having these basic things. The stories told in this report however, show that not everyone has access to these buffers and safeguards. When there's instability in several of these areas and people are faced with the challenges of transition, it becomes clear why even in a society as affluent as Britain people can still fall far. This study has shed some light on the people who may be the first to fall and the last to recover when

storms hit and has identified the opportunities we have to help them avoid the fall and recover more quickly.

Appendix:

Details of sample

Key:

AR	Left an abusive relationship
B	Bereavement
CL	Left public care
MH	Left mental health care
P	Left prison
R	Redundancy
YD	Young disabled person left education

Pseudonym	Sub-sample	Description
'Ann and Mike'	WAC	Ann and Mike have been married for 33 years. Ann worked in a shop and Mike used to be a fitter. He has had back problems and hasn't worked for eight years. They have two grown-up children who have left home. One daughter lives nearby. They often have their grandchildren to stay and help out with childcare.
'Jim and Colleen' 'Billy'	MEF	Jim and Colleen have been together for 34 years. They have three children, all of adult age. One son has recently moved back to live with his parents. Colleen has manic depression (bipolar disorder). Jim, who took early retirement, looks after her and money is extremely problematic. Billy has been in prison twice and occasionally earns money from helping to paint and decorate with a friend. Other than that he receives benefits.
'James and Irene'	WACC	James and Irene have been living together for eight years. They live with Irene's two teenage children from her first marriage. James doesn't work and Irene augments their benefit income by helping out at a hairdressing salon.

'Alex'	P	Alex is 42; he lives with and cares for his 80 year old mother; he was released from prison 5 months ago after more than a decade of repeated convictions and sentences related to his drug addiction; he is currently unemployed but trying to start a small business; he has seven supportive siblings and two children (21 and 15) who he is estranged from.
'Becky'	MH	Becky is 35; she was diagnosed with manic depression at age 24; she has been hospitalised 10 times, most recently 3 years ago; she lives in a council rented flat and while her daughter lives with Becky's parents; she is currently unemployed and wary of working too many hours as it can cause stress and relapse.
'Bob'	B	Bob is 44; his wife died of cancer about a year ago; after she died Bob spent seven months or so sleeping rough, drinking and travelling around Britain; eventually he contacted his old army regiment and got help; Bob is now seeing a psychiatrist; he's been in a hostel for three months and is hoping to move into independent accommodation over the next year or so; he has no close family or children; Bob's been unemployed for a year for the first time in his life and is hoping to return to painting and decorating soon.
'Callum'	B	Callum is 30, he lives in a house renting from a housing association in a small village; his wife died suddenly in a car accident a year ago; they had no children; Callum is very close to his family and his wife's family, and has many friends; he works full-time in IT and is comfortable financially.

'Cara'	YD	Cara is 22; she has learning disabilities and some behavioural problems; Cara has lived in supported housing for past three years and receives income support and disability living allowance; she attended college for a year; she spends a lot of her time on the internet and is looking for work as a sports coach, but there aren't many opportunities out there; Cara relies on her mother for support and also goes to a local community centre once or twice a week.
'Chris'	P	Chris is 25; he's been in and out of prison over the last four years and most recently left prison a week ago; before that he'd spent several years rough sleeping and committing crimes to fund his drug habit; Chris is now living in a residential drug treatment centre.
'Daniel'	CL	Daniel is 20; he went into care at age 14 and spent time in two residential care homes; when he was 18 he moved into his own flat, rented from a housing association; Daniel has tried several courses at college over the last few years, but not found something he enjoys; in August he's starting an Art and Design course; Daniel found the most difficult parts of leaving care was being alone after spending years with other children and staff around; he's also found managing his money difficult and got into rent arrears, but his housing support worker helped him get on top of things again.
'Emma'	MH	Emma is 53; she was diagnosed with bipolar disorder 30 years ago; after being hospitalised numerous times she copes with her condition better now, with the help of her family; she has worked part-time as a cleaner for 8 years and likes keeping busy, but wants something that is more of a challenge.

'Erika'	AR	Erika is 42; she has 5 children aged 12 to 20 who all live at home; she has been in more than one abusive relationship, the most recent ending 4 years ago; she's single and is not close to any family; she is struggling financially, with income only from benefits; she has taken courses in holistic medicine and is trying to start a business.
'Eva'	B	Eva is 33; she lives alone and her parents and family live abroad; her long-distance boyfriend of a year was murdered 8 months ago; counselling has really helped Eva; she works as a graphic design manager and is comfortably off; she took a month of work after he died and relied a lot on her mother and a friend; she is quite spiritual and has found Eastern philosophies shared by her mother helpful in coping with bereavement.
'Helen'	R	Helen is 55; she was made redundant two months ago; collects benefits and is ok financially; she lives with parents and has 3 siblings she is close to; as she is near retirement she isn't too worried about finding work again but would quite like a job to keep her occupied.
'Jack'	P	Jack is 28; he lives in private rented flat and has been out of prison for a year; Jack is prescribed methadone as he's had drug problems for a long time; Jack is close to his parents and foster parents, and has 5 foster and biological siblings; he managed to rebuild these relationships during his last sentence and since being out; Jack dropped out of school at 16 and is unemployed, but would like a job to keep him occupied; he broke up his with girlfriend 7 months ago and lost contact with their daughter but is trying to get back in touch.
'Jade'	P	Jade is 28; she left prison 5 months ago having served 6 months: she is a recovering drug addict currently living in rehabilitation centre; she has two children (6 and 8) currently in foster care; she's focusing on getting clean and getting her kids back at the moment.

'Jamie'	YD	Jamie is 24; he suffers from severe dyslexia, and has trouble reading and writing; he has lived in a residential support home for the past year; Jamie works 25 hours a week as a cleaner and also collects disability living allowance; he found college boring and dropped out, but got work experience through a community employment projects; he enjoys his job but has big aspirations to do more exciting things.
'Jen'	AR	Jen is 28; she has 2 children (2 and 8); she left home at 15 and got into an abusive relationship, which she left 9 years ago; she left and went to a refuge and then moved to a different town to escape her partner; Jen has few friends and does not rely on her family; she's on benefits, and struggles financially, especially with nappies and heating bills in winter; she's taken two college courses in the past year and desperately wants to find work.
'Jillian'	MH	Jillian is 45; she lives on her own in a rented flat; she was diagnosed as bipolar 12 years ago, and has spent a lot of time in psychiatric care; last year her diagnosis was changed and she was told she had a personality disorder; Jillian relies on her family to an extent but is very concerned to find the right mental health care and support; she has been very active volunteering and being involved in mental health service user groups.
'Josie'	YD	Josie is 21; she has learning difficulties, behavioural problems and is visual impaired; works part-time as a steward at football matches; Josie has a difficult relationship with her family, and recently moved from home into supported housing; receives income support and disability living allowance; she attended and finished college; but doesn't know what to do now.

'Julie'	B	Julie is 45; lost her husband of 16 years in a road accident 18 months ago; she lives with her two children (14 and 16); one of whom has Asperger's; Julie owns her own home, with a small mortgage; she found little support from friends and in-laws, but caring for her children gave her goals and strength; she works 20 hours a week at a pre-school and is studying for a university degree.
'Kat'	AR	Kat is 28; she was in an abusive relationship for two and a half years; she lives in a house rented from the council with her 3 children (1, 8 and 10); she has studied for a law diploma and has worked at an advice centre; she's now a full time mum and hoping to return to work soon.
'Linda'	R	Alison is 42; she was made redundant two months ago, but found a new job in four weeks by walking into a local grocery store; she found being unemployed a shock, and considers herself lucky to have found work again so soon.
'Lisa'	R	Lisa is 57; she was made redundant two months ago; she owns her own flat; her income comes from benefits at the moment and she's almost giving up looking for work; she is divorced, but her two sons live nearby and she cares for a daughter with cerebral palsy; she struggles financially, but will not work part time because she wouldn't earn more money than she does on benefits.
'Lucy'	R	Lucy is 23; she was made redundant two months ago; she is taking a computer course, but is frustrated trying to find work; she's been sending CVs out for months with no luck; she's currently living with parents and brother and isn't paying rent.

'Maddy'	AR	Maddy is 30; she has 2 children (12 and 4); she has been in two abusive relationships, the most recent ending two years ago; she receives benefits but wants to find work when daughter reaches school age; she relies on her brother for emotional support, but embarrassed to discuss problems with friends; she's just started volunteering with an organisation that helped her cope with leaving her abusive partner.
'Martin'	YD	Martin is 21; he suffers from autism and pathological demand syndrome; he was in care as a child, but has lived with parents last three years; he feels lonely without a girlfriend, and also wishes his dad, who suffers from back problems, was able to do more with him; he would like to work, but unsure at what, although he is taking an aromatherapy and massage course.
'Miles'	CL	Miles is 24; he lives with his Gran at the moment and doesn't pay rent; he's working part time in a pub in the small town he lives in; Miles went into care at 13, spending a few years in foster care and then staying with one of his teachers and more recently a friend's family; he went to University to study social work and is now taking a break after his second year; things are difficult financially at the moment, and he's keen to get back on his feet and find a job related to his degree; in the longer run he wants to finish his degree and become a social worker; Miles thinks that staying at the same school really helped him deal with being in care; his teachers were strong advocates and managed to stop him being put into a children's home, as they felt he might get bullied at school.

'Neil'	P	Neil is 33; he left prison five months ago; Neil struggles with alcoholism; he's living in a shared house at the moment, but doesn't like the hostile environment; both Neil's parents died when he was young, his brother lives abroad and he isn't close to his half-sister; he doesn't have many friends, but one friend did encourage him to go to a support group for alcoholics which has helped; he isn't working at the moment; his priority is to get a flat and in the longer run find a job and a partner.
'Paul'	AR	Paul is 51; he was in an abusive marriage for five years; his wife had serious mental health problems; as things got more stressful Paul drank more and problems became worse; he lost several jobs and left the relationship 18 months ago; he spent several months homeless before moving into a hostel; he's currently unemployed and on incapacity benefit due to his alcoholism; since leaving his wife he's rebuilt his relationship with his two sons (24 and 26) and is trying to stay sober; he's now been clean for 45 days.
'Pete'	R	Pete is 42; he lives in a rented flat; his wife died of cancer three years ago; he left his job and didn't work for months; he got into debt; intermittently worked but after being made redundant 18 months ago hasn't worked since; Paul has little family support but is proud that he's finally getting on top of things and beginning to cope; he's looking for job.
'Rob'	R	Rob is 36; he and his wife were made redundant two months ago; she now has a new job but Rob hasn't found anything yet; Rob studied computer science in university, but no one will hire him without better GCSEs, which he needs to retake; he's finding this daunting; Rob has dyslexia and struggles to read and write and with his short-term memory; he is close to family, who provide some meals; he's on Jobseeker's Allowance at the moment but is getting depressed about not finding work; he finds talking to his ex-colleagues about losing a job helpful.

'Ruth'	AR	Ruth is 38; she was in an abusive marriage for 13 years which ended 7 years ago and is just getting out of another abusive relationship; Ruth has 8 children, ranging from age 3 to 23; four of them live with her; she is currently unemployed and suffering from depression; she relies on one of her eldest daughters for support and doesn't have family or friends beyond that; she was close to her mum who died five years ago.
'Ryan'	YD	Ryan is 21; he is visually impaired; he lives with his mum and sister and doesn't pay rent but tries to help with this bills; after finishing his A levels he worked for a financial investment company, but was made redundant as the recession hit; he's been unemployed for around five months now and is applying to go to university; Ryan feels that his disability made him unique at his mainstream school.
'Sam'	CL	Sam is 19; he went into care when he was 3, spending 7 years with one foster family and then moved in and out of several children's units and foster placements; he also moved around different schools and left school completely at 15 without any qualifications; at 17 he moved in with a supported carer and spent a year there before moving onto his own flat; Sam didn't like the area and the flat was very small; after splitting up with his girlfriend he started to find things difficult and moved back in with his supported carer; he's been back almost a year and is hoping to move out again in the next few months; Sam really wants to stop drinking and smoking and wants to get a job, to earn his own money and start a course at college, but he doesn't know what kind of jobs or courses he'd enjoy and worries that he doesn't have the patience to stick at it.

'Susan'	B	Susan is 35; her husband of 11 years died of cancer a year ago; her son recently moved out because they were arguing; Susan thinks it's because he hasn't dealt with his grief yet; Susan works in social care and regrets not taking time of work sooner to spend more time with her husband; she took three months off work after his death; she relies on a close friend and online support groups.
'Tom'	MH	Tom is 52; he was in hospital with depression and psychosis for six months about three years ago; Tom is also blind; the drugs he's on now have really helped with his mental health problems; he relies on his 72 year old mum for support and has few other contacts; he does activities with local organisations (theatre, playing the drums and walking people's dogs) which he enjoys.

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This report looks at how people manage difficult and traumatic transitions. For some transitions such as leaving prison or care, unemployment or the end of a relationship can trigger a positive change. For others a difficult transition can undermine and destabilise lives, leaving people struggling to adjust to a new situation. By analysing the experiences of people going through transitions, this report explores what helps make a successful transition and what role the service providers can play in supporting those who are most vulnerable.

This work is part of the Young Foundation's Mapping Unmet and Emerging Needs programme. The programme brought together a coalition of more than a dozen independent foundations and funding bodies to develop new insights into how social needs in Britain can be prioritised and met. Through an innovative research methodology, combining qualitative, quantitative and secondary research, the two-year project provided an independent overview of changing needs, as a complement to existing research and to guide the policies and actions of foundations, government and civil society. The findings of the overall programme are presented in *Sinking and swimming: understanding Britain's unmet needs* published in December 2009.

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