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Children's Social Care and Homelessness in Northern Ireland

Connecting Data, Changing Futures

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A special thank you

This work was carried out in partnership with young people with experience of living in and leaving care who are members of our Data Research Advisory Group. Jointly facilitated by Administrative Data Research Northern Ireland (ADR NI) and Voice of Young People in Care (VOYPIC), the advisory group ensures that ADR NI research is co-produced with experts by experience. Lived experience insight shaped not only how we interpret the data, but what we believe it demands.

Youth contributors

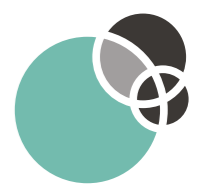
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Explanation of cover image

The cover image is based on original artwork by Kenzie McCracken Long. Kenzie drew the image at a Data Research Advisory Group workshop where participants were invited to represent - through words or images - how they feel about the research presented in this report. The concept of a fractured face reflects a broken society that fails young care leavers. The concept of a disconnected eye reflects feeling invisible.

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Foreword



Kate Nicholl,
MLA (Member of the
Legislative Assembly) and
Chair All Party Group Policy
and Public Data



With both homelessness prevention and reform of children’s social care high on the priorities of our current Programme for Government, this research is timely and vitally important. It presents clear, empirical evidence, based on longitudinal studies of our own population here in Northern Ireland, highlighting the value of using linked administrative data for research for public good. Research that can help better lives. Evidence such as this is so central to informing effective policies and practices. ADR NI are leading the way in this space, and this is something all policymakers can learn from.

The research presented in this report, and the voices of the young experts by experience, shine a light on the fact that homelessness among care experienced young people is not an individual failing, but more reflective of wider systems issues. Instead of acting responsively, this research provides evidence of potential key periods for early prevention, and prevention should be a legitimate and necessary policy goal. We need to do better to ensure our services work for everyone and this report speaks directly to decisions we are responsible for.



Alicia Toal,
Chief Executive,
VOYPIC (Voice of Young
People in Care)



For those of us supporting care experienced young people, this research confirms what has long been understood: too many young people are leaving care without the stability, continuity, and relationships they need to thrive.

This evidence speaks clearly to the need to better support young people in their transition to adulthood. Although the cohort examined left care some time ago, the concerns identified here are not historical. Young people in care today voice the same fears, and many worry about what will happen when they turn eighteen, with housing insecurity and homelessness their most immediate concern.

Homelessness must not be treated as an inevitable outcome of care experience, nor something young people are expected to accept as part of their lives. Prevention is not simply about the availability of housing, but about relationships that endure, support that adapts, and systems that offer stability through periods of transition.

Young people are clear about what is needed. Safe, stable, and supported housing must be a priority, but a home is more than a roof, a front door, or basic facilities. It is about belonging, security, and the knowledge that support will not fall away at a critical moment. Listening to lived experience, and acting on it, is essential if we are to change the story for future generations of care leavers.



Executive Summary

Children’s Social Care and Homelessness: Connecting Data, Changing Futures

Homelessness among young people is often treated as a sudden crisis or an individual failure. The results presented in this report show that, for many, it is neither. Drawing on linked administrative data and lived experience expertise, it demonstrates that **homelessness risk is patterned, predictable and visible within public systems - often years before homelessness occurs.**

This report brings together two pieces of original empirical research using population-level linked administrative data (i.e. data routinely collected in the delivery of public services) to examine the relationship between children’s social care contact and homelessness risk in Northern Ireland (NI). It also showcases the value of administrative data for understanding risk across the life course and supports the case for **better access to public data for research for public good.**

What we did

This report presents findings from two studies:

- **Study One** examines how any contact with children’s social care - children in need and children in care - is associated with subsequent youth homelessness at a population level.
- **Study Two** focuses on young people ageing out of care, examining the scale and timing of homelessness risk during the transition out of care into young adulthood, and identifying factors linked to higher or lower risk.

By securely linking anonymised records across children’s social care and statutory homelessness services, these studies follow young people over time rather than viewing them through single-system snapshots.

The research was co-produced with young people who have lived experience of care and leaving care, who identified homelessness as an issue that matters most to them.



What we found



A large proportion of young people in NI who experience homelessness had prior contact with children's social care.



Care experienced young people, and those known to social services as children in need, face a substantially higher risk of homelessness than those with no social care contact.



Care leavers face high risk of homelessness, particularly in the first two years after leaving care.



Risk varies within care leavers, with factors such as age at leaving care, placement history and post-care living arrangements shaping outcomes.



Youth homelessness risk peaks at predictable transition points, especially during late adolescence.



For many young people with a social care history, homelessness is recurrent rather than a one-off event.

What young people with lived experience say



Leaving care affects your mental health - make the process easier, because not everyone has a mum and dad.



Experts by experience emphasised that:

- Being "known to services" does not always mean receiving effective or timely support.
- Transitions out of care can feel abrupt, unsupported and uncertain.
- They want to leave care safely, with a stable home, a plan, real support, and someone to call.¹

¹ This is the view of the experts by experience that co-produced this work and aligns with the VOYPIC manifesto Show Us You Care, a call to action shaped by more than 150 young people in care and care leavers.

Why it matters

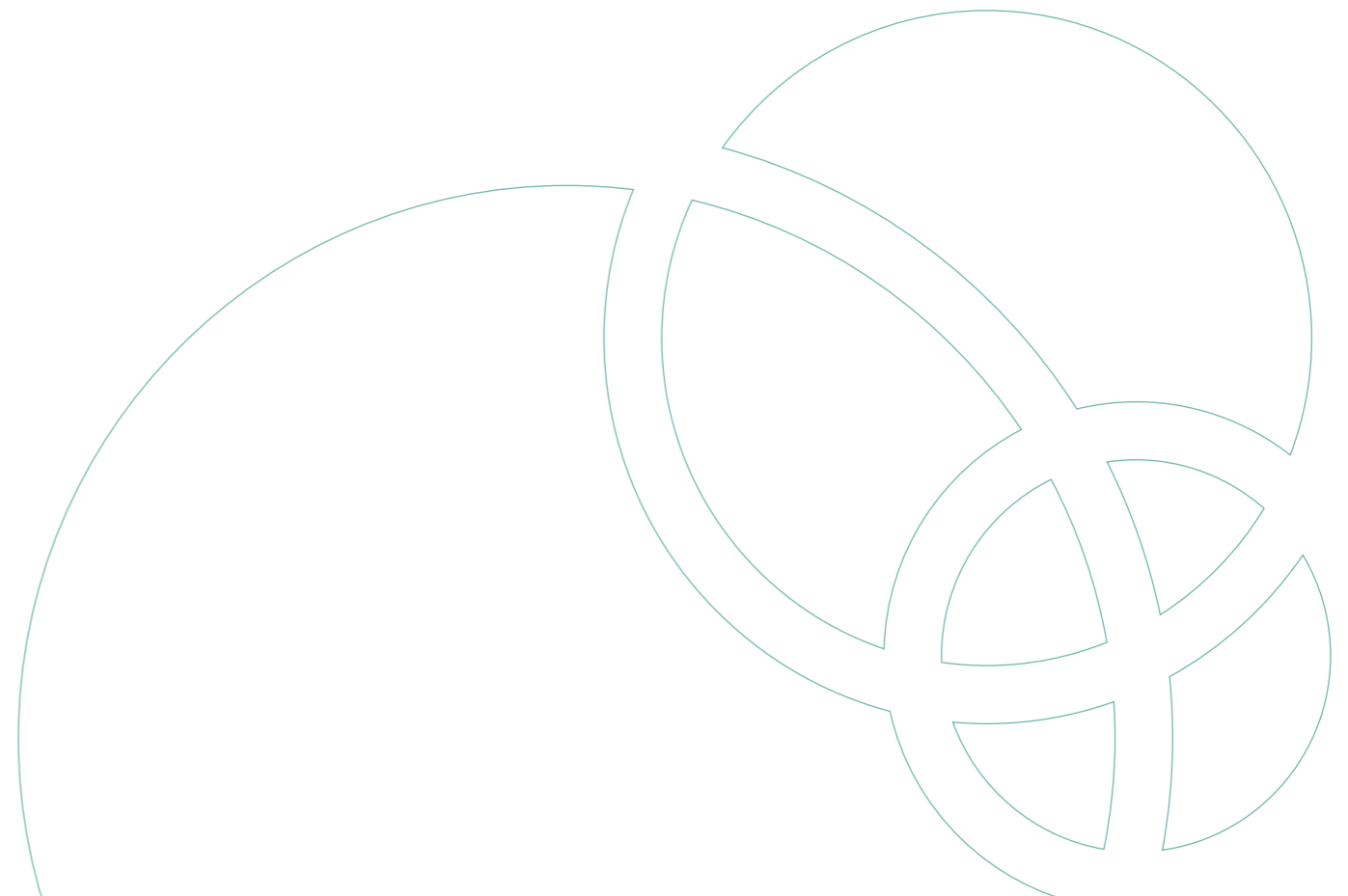
These findings challenge narrow understandings of homelessness as a short-term housing issue. Instead, they show that homelessness among young people is closely linked to early adversity, system interaction and missed opportunities for prevention.

This does not mean that social care contact causes homelessness. But contact with children's social care represents a clear signal of vulnerability - and therefore an opportunity for prevention - before homelessness occurs.

When this vulnerability is not recognised or acted upon across services, risk accumulates rather than diminishes. At the same time, variation in outcomes shows that homelessness is not inevitable. Timing, stability and continuity of support matter - and some pathways are more protective than others.

Why administrative data matters

Using population-level, linked administrative data allows patterns to be seen across systems like social care and housing for the whole population that can sometimes be invisible within single systems. It allows everyone to be seen and everyone's journey to be recognised. It shows how people move over time and between services, where risk intensifies, and where earlier intervention could prevent later crisis. Used ethically and transparently, linking existing administrative data sets supports better informed decision making.



What we recommend

These recommendations set out core actions needed to shift from managing youth homelessness at the point of crisis to preventing it earlier. They are developed in more detail in the final chapter of this report.

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1. Strengthen early prevention
Treat any contact with children’s social care as an early signal of housing-related risk, not only for care leavers but for those with other journeys through social care.

- 

2. Prioritise transition points
Focus coordinated support around adolescence and the move out of care, when risk is highest and support is most likely to fall away.

- 

3. Improve cross-system working
Strengthen coordination between children’s social care, housing and other services.

- 

4. Support stability, not just housing access
Promote pathways that prioritise continuity, relationships and supported transitions.

- 

5. Expand access to linked administrative data
Improve access to up-to-date children’s social care data for research and extend safe data linkage across sectors to inform prevention strategies and evaluate impact.

Looking ahead

This report demonstrates what can be achieved with the population-level, administrative data currently available in NI. It also highlights how much more could be done with improved access to timely, linkable data. Early risk is visible in the data. The challenge now is how we choose to act on it - **using data-driven evidence, lived experience and collaboration to prevent homelessness rather than respond to it after the fact.**

Introduction

Why children’s social care matters for homelessness

Homelessness is often presented as a crisis that begins at the point where housing is lost. In reality, for many people, the conditions that make homelessness more likely have roots much earlier in life. Experiences of poverty, trauma, and family breakdown in childhood can shape pathways that extend far into adulthood. A growing body of evidence shows that homelessness is closely linked to earlier adversity and system involvement rather than being a random or isolated event (1, 2).

Children’s social care is one such system. It exists to protect children, support families and reduce harm - and with the right support many children and young people thrive.

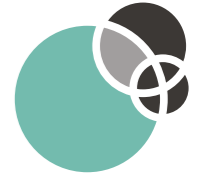
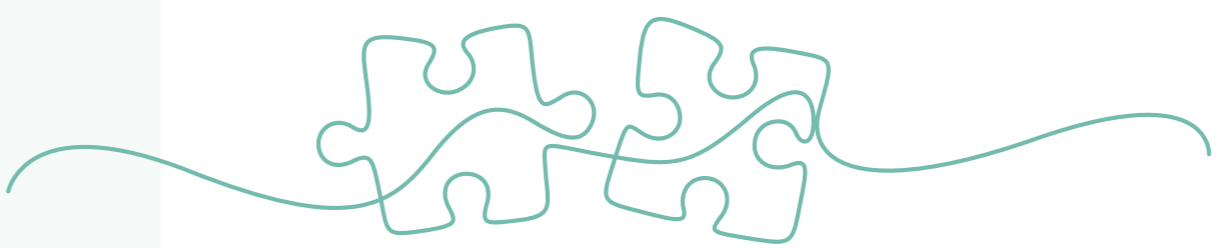
Yet early-life disadvantage can have a lasting impact. Care experienced young people experience worse outcomes across many dimensions compared to young people in general, including poorer mental and physical health, and a lower likelihood of being in employment, education and training as a young adult (3-6). Homelessness sits within this wider pattern of cumulative risk. People who have spent time in care are consistently over-represented among those experiencing homelessness (1, 7). However, despite long-standing concern about care experience and later homelessness, there is no population-level evidence in NI that traces how children’s social care involvement connects to homelessness in adolescence and early adulthood.

This report seeks to address that gap.

It brings together two pieces of original empirical research using linked, population-level administrative data to explore the relationship between children’s social care contact and subsequent homelessness in NI. The first shows how different levels of childhood contact with social care - being a child in need or being in care - are associated with the risk of youth homelessness. The second focuses on young people ageing out of the care system (care leavers) and subsequent homelessness. Together, these studies use longitudinal, population-level data to examine patterns that are not always visible in small-scale studies or cross-sectional surveys.

Linked administrative data allows us to move beyond snapshots of homelessness and instead follow people’s interactions with different systems over time. It makes it possible to ask questions that matter for prevention like: who is most at risk, when is risk highest, and where have opportunities for earlier intervention been missed?

Crucially, this report is not based on data alone. The research has been co-produced with young people who have lived experience of care and leaving care. Throughout the research process - from shaping the questions, to interpreting findings, to identifying priorities for change - lived experience has played a central role. Administrative data can show patterns, probabilities and system interactions, but it cannot on its own explain how those systems are experienced, where they fall short, or why support that looks adequate on paper may fail in practice. Lived experience insight helps bridge that gap, grounding the analysis in the realities of navigating services and survival.



Homelessness is not inevitable or random. People do not arrive at homelessness evenly across the population. Risk is patterned, cumulative and often predictable. Childhood is a key period in which those patterns take shape and pave the way for the future. Contact with children’s social care represents an opportunity - a point at which additional support could reduce future risk. When systems fail to recognise or act on those opportunities, risk can compound rather than diminish.

Administrative data is uniquely powerful in revealing these dynamics. It allows policymakers to see where earlier action might prevent later crisis. At the same time, access to and use of administrative data in NI for research remains fragmented ⁽⁸⁾. Important questions about prevention and long-term outcomes often go unanswered - not because the data does not exist, but because it cannot easily be brought together.

This report therefore has two connected aims.



The first is to share findings from two data-linkage studies examining children’s social care and homelessness.



The second is to demonstrate the value of administrative data, and to make the case for better access to data and data linkage for research for public good. Better data is not about surveillance or benchmarking: it is about enabling better decisions to be made for the people of NI by the people of NI, about more effectively using these existing resources and about providing evidence for earlier intervention.

This report is structured around what the problem is, what the data shows, what it means, and what needs to change. Throughout, the perspectives of experts by experience are included - not as illustration, but as a vital source of knowledge about how systems work in practice.

The findings presented here challenge narrow assumptions of homelessness as a short-term housing issue or an individual failure. Instead, they point to homelessness as a process shaped by early adversity, system responses and missed opportunities for prevention. They also highlight that children’s social care, housing and wider public services cannot operate in isolation if homelessness is to be prevented rather than managed.

Background to the Research

Children’s social care and homelessness risk: the wider picture

This section summarises what is currently known about the relationship between contact with children’s social care and later homelessness, outlines the policy context in NI, and explains why further evidence is needed.

A Note on Terminology

The statutory definition of homelessness in NI is found in Article 3 of the Housing (Northern Ireland) Order 1988: ‘a person is homeless if he has no accommodation available for his occupation in the United Kingdom or elsewhere.’ Homelessness is commonly misconceived as being limited to rough sleeping; however, it also encompasses those living in inappropriate or unsuitable accommodation or relying on informal housing situations. The Northern Ireland Housing Executive (hereafter the Housing Executive) is the single national body tasked with responding to homelessness. When an individual or household presents as homeless, the Housing Executive assesses their eligibility and status using four legislative tests (eligibility, homelessness, priority need, and intentionality). Applicants who meet the four legislative tests are deemed Full Duty Applicants (FDA) therefore are owed a housing duty and considered statutorily homeless (i.e. the Housing Executive have a statutory obligation to find them suitable accommodation).

Homelessness in this study is defined as a presentation to the Housing Executive for homelessness support and therefore includes people who were deemed homeless in a statutory sense (FDA) and non-statutory sense (rejected as FDA). The term **presented as homeless** is used throughout this report to refer to **individuals** who were named on a homelessness application, either as main applicant or additional member of a household.

This report uses the term **children’s social care** to cover all tiers of children’s social care activity, including children who were referred and/or assessed by social services but did not meet the threshold for statutory services.

A **child in need** is defined under legislation as a child who is unlikely to achieve or maintain a reasonable standard of health or development, has significantly impaired health or development, or is disabled. This includes children receiving family support services, children subject to child protection processes, and children in care who represent a subgroup with additional statutory protections. This study examines children in care as a separate group. Although the legal definition of a child in care is a ‘looked after child’, experts by experience prefer the term **child in care**, which is therefore used in this report.

The term **care experienced** is used to describe individuals with any experience of placement in care, regardless of placement type, length, or their current age.

The term **care leaver** is used to describe a young person that aged out of the care system (at age 16, 17 or 18 years).



What is already known

Research from the UK and internationally shows a strong association between care experience and later homelessness^(1, 7, 9-14). People who experience homelessness are more likely to have histories that include family instability, poverty, abuse or neglect, and past involvement with social services. These experiences can accumulate, increasing vulnerability over time rather than operating as isolated risk factors^(15, 16).

Within the current evidence base, **young people who age out of care (care leavers) have been consistently identified as a group at elevated risk of homelessness⁽¹⁷⁻²⁷⁾**. This evidence has played an important role in shaping policy attention towards care leavers and transition planning.

However, **care leavers represent only a small proportion of those who come into contact with children’s social care**. A much larger group of children have care experience or are in receipt of family support services or subject to child protection measures. Emerging evidence suggests that this wider group may also face a substantially increased risk of homelessness later in life⁽²⁸⁻³¹⁾.

Systems under pressure

Statutory responsibilities towards young people experiencing homelessness are set out across both children’s social care and housing legislation and policy⁽³²⁾. The Housing Executive has a legal duty to assess homelessness applications and, where appropriate, provide accommodation. The accommodation needs of young people aged 16-17 years, if defined as a child in need, are the responsibility of social care services via NI Health and Social Care Trusts (HSCTs). The accommodation needs of young people leaving care are also the responsibility of the HSCTs. Regional Good Practice Guidance detail how the HSCTs and the Housing Executive work together in a coordinated way to meet the housing and support needs of young people aged 16-21 years⁽³³⁾.

Both the housing and children’s social care systems in NI are operating under sustained and increasing pressure. The demand for homelessness services, in particular temporary accommodation, coupled with an insufficient supply of social housing is creating significant financial and operational pressures for the Housing Executive⁽³⁴⁾. At the same time, children’s social care services are facing increased demand, higher levels of need, workforce challenges and constrained resources⁽³⁵⁾. These pressures limit the capacity of services to focus on early intervention and prevention.

Policy context

Improving outcomes for children and young people, including tackling homelessness, is a policy priority in NI. As part of the NI Executive’s Programme for Government (2024-2027) priority to “Provide More Social, Affordable and Sustainable Housing”, our ministers have stated that **“we will focus on preventing homelessness, making it brief, rare and non-recurrent by working collaboratively”** and have highlighted young people leaving care as a priority group. A range of positive activity is underway aligned to this goal including:

- Collaborative working between the Department for Communities, Department of Health, Department of Justice and Housing Executive to deliver the New Foundations Programme.
- Housing Executive Homelessness Strategy (2022-2027)⁽⁴⁰⁾
- Housing Executive Youth Homelessness Action Plan (2024-2027)⁽⁴¹⁾
- Department of Health and Department of Education strategy A Life Deserved: Caring for Children and Young People in Northern Ireland (2021)⁽⁴²⁾
- Recommendations from the Review of Jointly Commissioned Supported Accommodation Report (2023)⁽⁴³⁾
- Recommendations from The Independent Review of Children’s Social Care Services in Northern Ireland (2023)⁽³⁵⁾
- The Adoption and Children Act (Northern Ireland) 2022⁽⁴⁴⁾

Current strategies and initiatives emphasise early intervention, partnership working across government departments and services, and the need to address the underlying drivers of homelessness rather than responding only at the point of crisis. Care leavers are explicitly recognised within this policy landscape as a group requiring targeted support.

4,188 As of March 2025, 4,188 children and young people were in care⁽³⁶⁾

393 In 2023/24 393 young people (aged 16–18 years) left care⁽³⁷⁾

15,905 In 2024/25, 15,905 households in NI presented as homeless⁽³⁸⁾

123 In 2024/25, 123 young people had leaving care as their homeless presenting reason⁽³⁹⁾



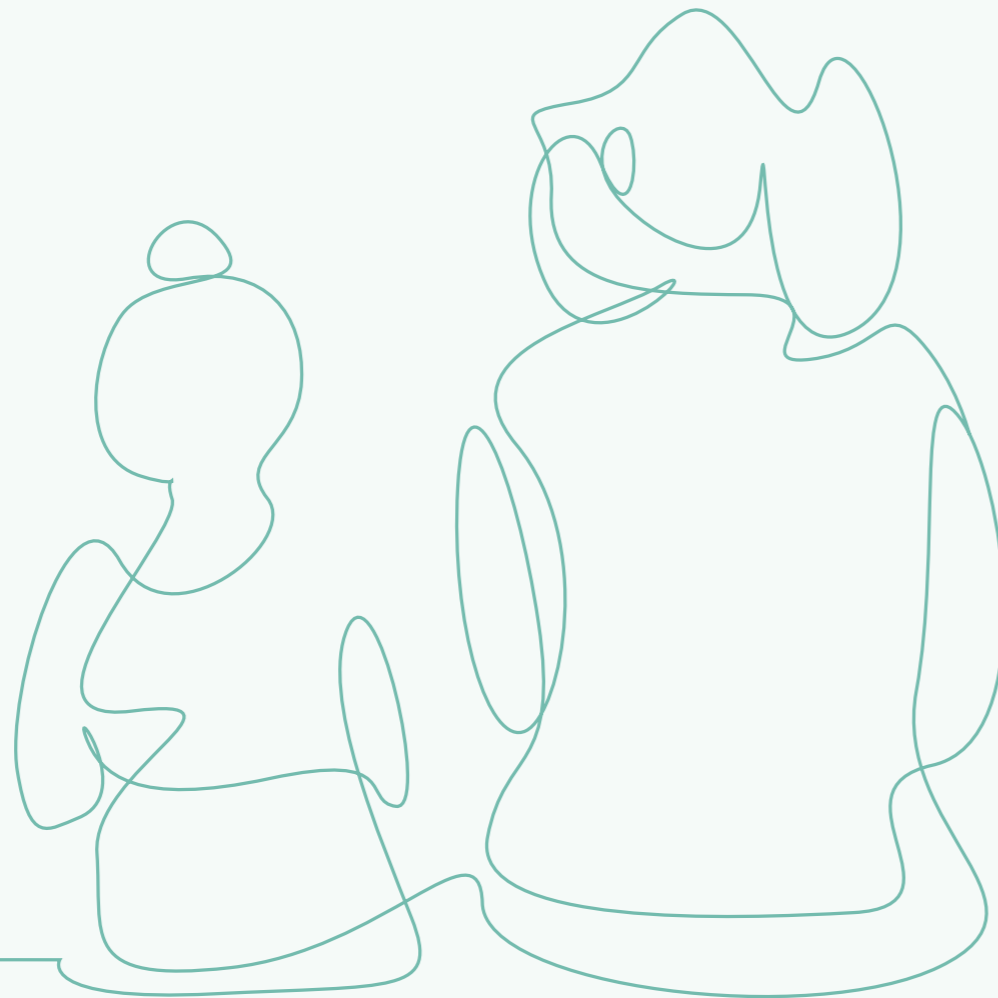
Why further evidence is needed

Despite long-standing recognition of the links between care experience and homelessness, there are significant gaps in the available evidence.

First, much of the **existing research focuses on care leavers**, with limited attention given to the wider population of children and young people who have contact with social services but do not enter care or have care experience but do not age-out of the system. As a result, the scale and nature of homelessness risk for these groups remains poorly understood.

Second, many **studies rely on cross-sectional data or retrospective self-report** of care history. These approaches make it difficult to examine how homelessness risk develops over time, to identify recurrent homelessness, or to pinpoint critical periods when intervention may be most effective.

Third, there is a **lack of population-level, longitudinal evidence in NI** that connects children’s social care histories with homelessness outcomes. Without this evidence, policymakers and service planners have limited local insight into how risk accumulates across systems or how existing prevention efforts align with the scale and patterns of need.



Using Administrative Data to Understand Homelessness

What this report shows - and where more could be done

This report was produced by researchers from Queen’s University Belfast working within Administrative Data Research Northern Ireland (ADR NI), part of the Administrative Data Research UK (ADR UK) partnership. ADR UK works with governments, data owners and the public to enable safe, secure and ethical use of administrative data for research for public good.

The research in this report demonstrates what can be achieved when population-level, administrative data is made available for linkage and analysis - and, equally importantly, what remains out of reach when data is missing, outdated or inaccessible.

What is administrative data?

Administrative data is **information that is routinely collected as part of the day-to-day delivery of public services**. Every interaction with a public service produces records or “data”, from which we can extract information and meaning. This includes data from systems such as children’s social care, housing, health, education and justice.

Unlike surveys, administrative data is not collected for research purposes. It exists because people interact with public services - for example, when a child is assessed by social services, when someone presents as homeless, or when a person receives healthcare.

Because administrative data covers whole populations rather than small samples, it allows researchers and policymakers to see patterns that could otherwise remain hidden.

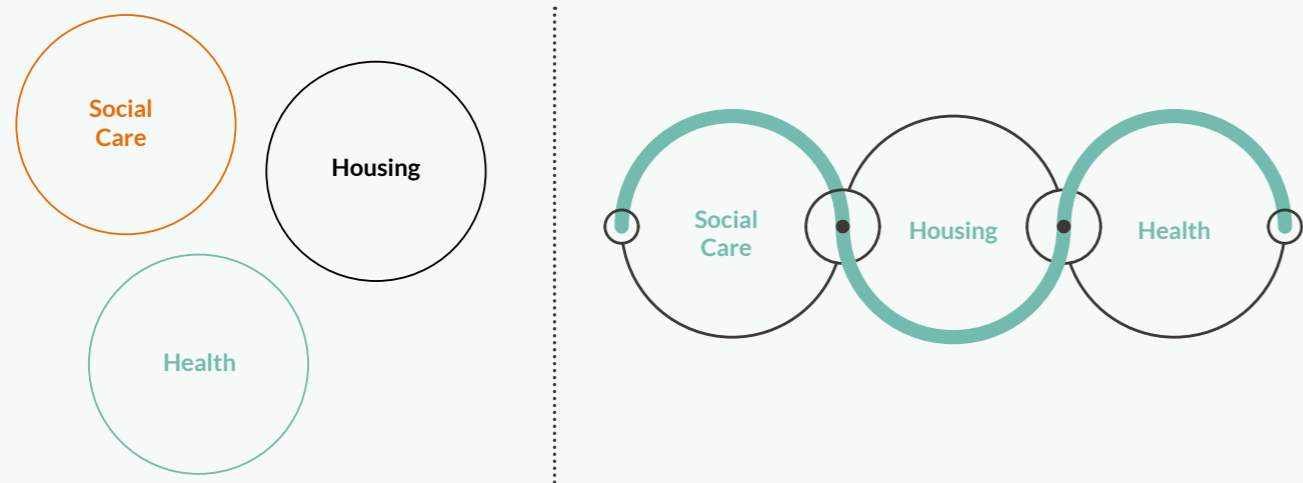
Surveys remain an important source of evidence, but they have limitations when it comes to understanding long-term risk. They often rely on small samples, miss people who are highly marginalised, capture experiences at a single point in time, or depend on retrospective self-report of past social care contact. Administrative data, by contrast, allows researchers to follow people over time, examine repeated interactions with services, study rare but serious outcomes, and identify patterns across entire populations. **This does not make administrative data “better” than other forms of evidence, but it makes it uniquely suited to understanding how risk develops and where prevention efforts could have the greatest impact.**



What does “linkage” mean?

Data linkage means securely bringing together information from different public services about individuals, using anonymised identifiers and strict safeguards to protect privacy.

In this report, linkage allows us to see how experiences in children’s social care connect to later experiences of homelessness, and how risk unfolds over time rather than appearing suddenly.



Without linkage, each dataset tells only a partial story.

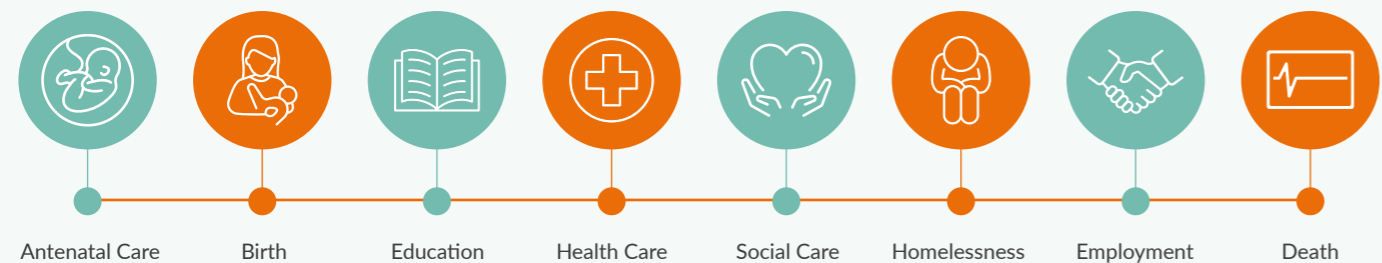
With linkage, it becomes possible to understand how systems interact - and how people move between them.

Why access to data matters

This report also highlights why access to administrative data - and the ability to link it - matters for policy.

People do not experience their lives in silos. The same individuals often appear across multiple public systems: children’s social care, housing, health, mental health services, and sometimes the justice system. When these systems are analysed separately, the wider picture is lost.

If each system looks only at its own data, this trajectory is fragmented. Risk appears unexpected rather than cumulative. Opportunities for prevention are missed. This is what is meant by policy blindness - not a lack of concern or effort, but a lack of joined-up evidence.



The limits of data: what lived experience fills in

Administrative data can show patterns, probabilities and system interactions. But it cannot show everything.

What the data can’t show - but people do:

- Hidden homelessness: Sofa-surfing, staying temporarily with friends or family, and other forms of hidden homelessness are often missed in administrative records.
- The quality of support: A recorded “contact with services” does not mean that help was timely, adequate or sustained.
- How systems are experienced: Data can show that a service was accessed, but not whether it felt supportive, stigmatising or inadequate.
- Why disengagement happens: Administrative records often capture when people drop out of services, but not why.

Lived experience expertise is therefore essential for interpreting administrative data research responsibly. It ensures that findings are not misinterpreted or detached from reality.

Where the data research outlines the picture, lived experience colours it in.

The experts by experience working with the ADR NI research team are unique individuals, and each has their own (some good and some not so good) experience of children’s social care and aftercare.

Within this diversity, a common experience was feeling let down, or unsupported at times while living in or leaving care.



The data used in this report

To examine the association between childhood social care contact and risk of homelessness the following datasets were linked:

- 1 Children’s social care data from the Social Services Client Administration and Retrieval Environment database (1995-2015)
- 2 Homeless presentations data from the Housing Executive’s Housing Management System (2011-2022)
- 3 Primary care registration data from the National Health Application and Infrastructure Services database
- 4 Dispensed medication data from the Enhanced Prescribing Database
- 5 Diagnoses of mental health disorders recorded in hospital admission data from the Patient Administration System
- 6 Death records from the General Register’s Office

Limits of available children’s social care data

Population-level children’s social care data in NI has historically been held on the Social Services Client Administration and Retrieval Environment (SOSCARE) system and can be accessed securely by accredited researchers only through the Health and Social Care Business Services Organisation’s Honest Broker Service (a Trusted Research Environment - a highly secure “digital safe room” or “data safe haven” - where approved researchers can safely access and work with anonymised, sensitive information in line with UK regulations).

However, from around 2015 onwards, the phased migration of some HSCTs to a new information management system (PARIS) has resulted in a growing gap in population-level data available for research ⁽⁴⁵⁾. Because PARIS social care data is not currently accessible within the Honest Broker Service’s Trusted Research Environment, researchers are only able to work with comprehensive children’s social care data up to 2015. For this report, this is not a major limitation, as the research focuses on longitudinal outcomes in adolescence and young adulthood for earlier cohorts of children and young people in contact with children’s social care. However, it does mean that equivalent population-level analyses cannot yet be carried out for more recent cohorts. **This data gap constrains the ability to evaluate current policy and practice, and places NI at a disadvantage compared with other parts of the UK, where more recent children’s social care data is available for research.**

Doing more with the data we have - and shining a light on the data we don’t

This report demonstrates what can be achieved with the data that is currently available. At the same time, it highlights significant limitations - including the lack of access to up-to-date children’s social care data covering the whole of NI.

With more timely, comprehensive and linkable data, it would be possible to:

- Better understand more recent and current patterns of risk
- Evaluate the ongoing impact of policy changes
- Design more effective prevention strategies

Improving access to administrative data for research is about learning from existing systems, using evidence to reduce preventable poor outcomes, and ensuring that public services are equipped to make better decisions.



Study One: Contact with Children’s Social Care and Youth Homelessness

This section presents findings from the first study, which examined how different levels of contact with children’s social care are associated with the risk of youth homelessness. Rather than focusing only on care leavers that aged out of care, this study considers the wider population of young people who were in contact with social care during childhood (children in need or care experienced).

What we did

This study followed a whole population group of all 90,260 young people born between 1995 and 1997 in NI with full data. Using securely linked administrative records, we connected homelessness data from the Housing Executive to information from children’s social care and health services. This allowed us to see who had any contact with social services in childhood and who experienced homelessness between July 2011 and October 2022 (at ages 16 to 28 years). We compared young people who had contact with social services during childhood - children in need or in care - with those who had no recorded social care contact, while taking account of differences such as sex, area deprivation, where people lived, and mental health status (using prescribed medications for a mental health condition and / or diagnoses of mental health disorder recorded in hospital admissions as proxy indicators of mental ill health).

Contact with social care is classified into three mutually exclusive groups, based on highest level of involvement: 1) no contact; 2) contact and identified as a ‘child in need’; and 3) contact and experience of being a ‘child in care’. Child in need here refers to a child in contact with social care but never placed in care (i.e., subject to a referral, a child in need plan, or child protection measures). Children in care also have child in need status under legislation but are analysed here as a separate group.

What we found

Prevalence

Homelessness was more common among young people with a history of social care than among other young people in NI.

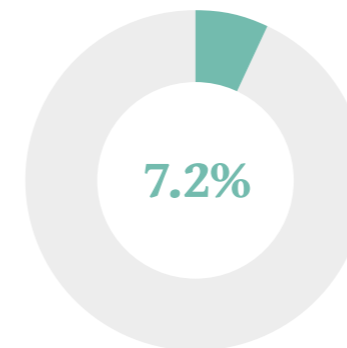
In total, around **one in eight** young people (12.5%; n = 11,286 of 90,260) presented as homeless at least once during follow-up.

Across the population, a clear pattern emerged. **Young people who had contact with social services - either as children in need or as children in care - made up a disproportionate share of those who experienced homelessness (54.6%).**

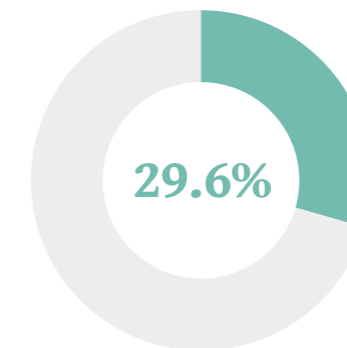
Which young people experience homelessness?

54.6% of all young homeless presenters had history of childhood social care contact

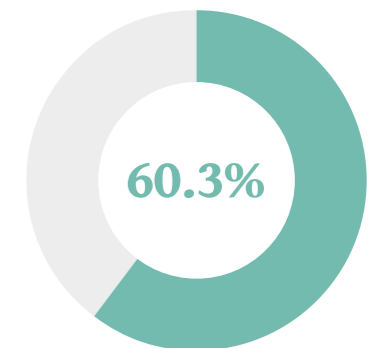
Young people with experience of social care account for a large share of those presenting as homeless, highlighting them as a key group for homelessness prevention.



of young people with no contact presented as homeless (n= 5,125 out of total 71,126)



of young people with a child in need history presented as homeless (n= 5,188 out of total 17,521)



of care experienced young people presented as homeless (n= 973 out of total 1,613)

There are also important differences by level of social care involvement. Young people who had been in care had the highest overall prevalence of homelessness (60.3%), followed by those with a child in need history (29.6%). This compares to 7.2% of young people with no contact who presented as homeless.

Some experts by experience were surprised by the large numbers of care experienced young people facing homelessness.

Responses like “scary” and “mental” highlight how confronting the findings felt.

Others felt it was unsurprising, seeing homelessness as inevitable.



It doesn’t surprise me. It will always be the same.



Age when risk is highest

Even after accounting for factors such as sex, area deprivation, area of residence and childhood mental ill health, both groups who had social care contact in childhood remained at a substantially higher risk of homelessness than their peers with no social care contact.

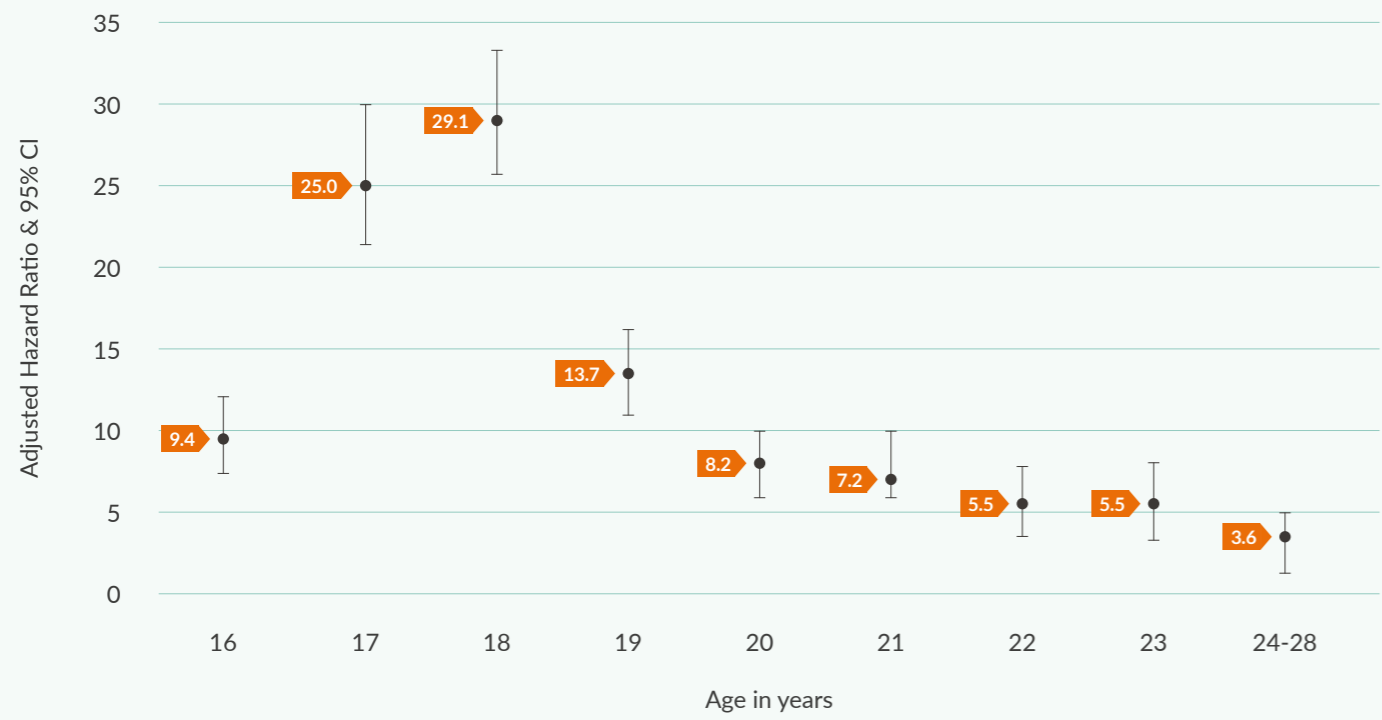
Crucially, homelessness risk was not constant over time.² For young people who had been in care, risk peaked around age 18 years.

Young people aged 18 years with care experience are 29 times more likely to present as homeless compared to young people aged 18 years with no history of contact with social services.

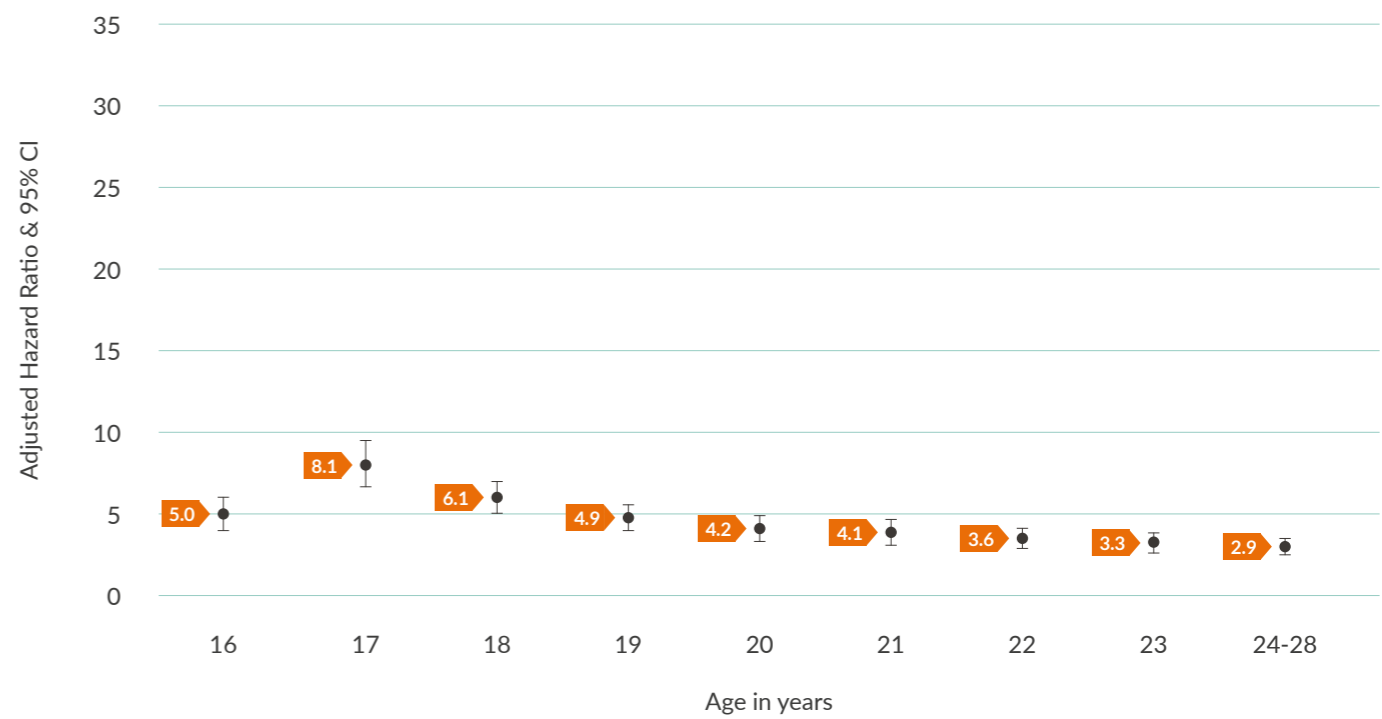
For those with a child in need history, risk peaked slightly earlier, around age 17 years. After these points, risk declined but remained persistently higher than for young people with no social care history over time.

Homelessness risk spikes at predictable transition points.

Age specific risk of homelessness (in care history)



Age specific risk of homelessness (child in need history)



Recurring homelessness

The data also shows that social care experienced young people were more likely to experience recurring homelessness, with the proportion of individuals known to social services increasing as the number of homelessness presentations rose. For example, 92.9% of young people who presented as homeless five or more times had social care contact in childhood.

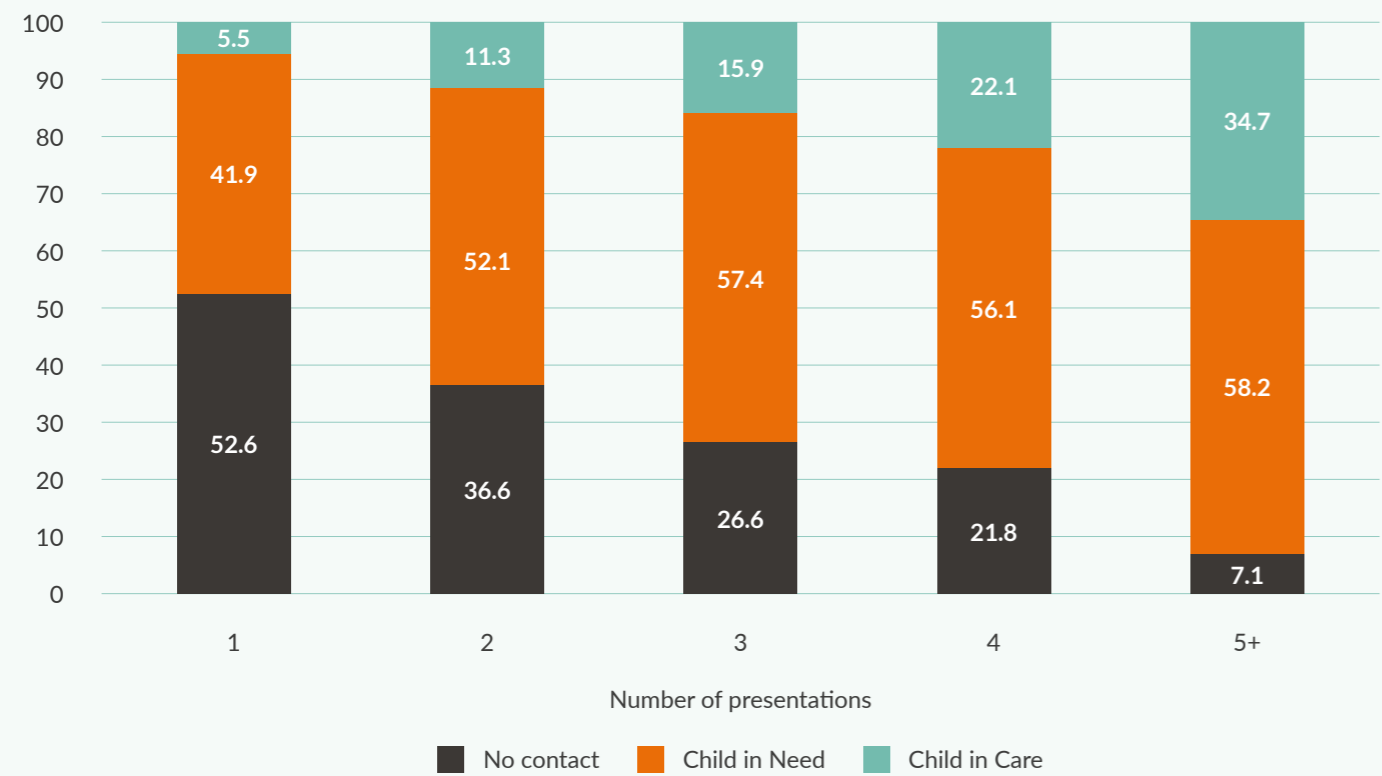
Social care experienced young people are more likely to experience recurring homelessness.



² Data on age-specific risk are from Cox proportional hazards models (adjusted for sex, area deprivation, area of residence and childhood mental ill health) estimating risk of index homeless presentation to the Housing Executive for care experienced individuals and those with a child in need history compared to individuals with no social care history.



Homelessness presentation patterns (%) by childhood social care history



What this tells us

Taken together, these findings show that contact with children’s social care is strongly linked to later homelessness.

They also show that homelessness risk concentrates at predictable points in the life course. **The period around the transition to adulthood - when young people may be leaving care, losing eligibility for services, or facing new responsibilities with limited support - emerges as a critical window of vulnerability.**

Importantly, the elevated risk observed among children in need suggests that homelessness prevention cannot be confined to care leavers alone. **Young people whose needs were recognised by social services, but who did not enter care, remain at heightened risk of homelessness - and may be falling through gaps between services.**

Study Two: Care Leavers and Homelessness

This section builds on the findings from Study One by focusing specifically on young people leaving care. While homelessness risk is elevated for a wide group of young people in contact with children’s social care, this study examines what happens at one of the most critical transition points: the move out of formal care and into adulthood.

Using linked administrative data, this study follows care leavers for up to ten years after they exit care and compares their outcomes with those of similar young people who had no history of social care involvement.

What we did

We conducted a retrospective matched cohort study of 970 young people in NI who left care between 2012 and 2015 (at age 16, 17 or 18 years). Each care leaver was matched 1:1 with a young person with no social care history of the same age and sex, and who had the same area of residence, deprivation level and mental health status (using prescribed medications for a mental health condition and / or diagnoses of mental health disorder recorded in hospital admissions as proxy indicators of mental ill health).

By securely linking anonymised social care and health data to homeless presentation data from the Housing Executive up to 2022, we were able to follow individuals for up to 10.8 years after leaving care and estimate both the risk of homelessness over time and factors associated with homelessness within the care leaver group.

This approach allowed the study to compare care leavers with peers who shared many of the same background characteristics, isolating the additional risk associated with care and leaving care.

By following both groups over time, **the study was able to examine not only whether homelessness occurred, but when it occurred, and how risk changed in the years after leaving care.**



What we found

Prevalence

Homelessness was much more common among care leavers than among other young people in NI.

Overall, 718 young people in the study were homeless at least once during follow-up. But, the data show a stark difference in homelessness between care leavers and other young people.

Over **six out of every ten care leavers** (63.9%) went on to experience homelessness at least once, compared with around **one in ten of similar young people** with no social care history (10.1%).

Leaving care is associated with dramatically higher homelessness risk compared to similar young people.

63.9 % (6 out of 10) of care leavers experienced homelessness



10.1% (1 out of 10) of matched young people with no social care history experienced homelessness

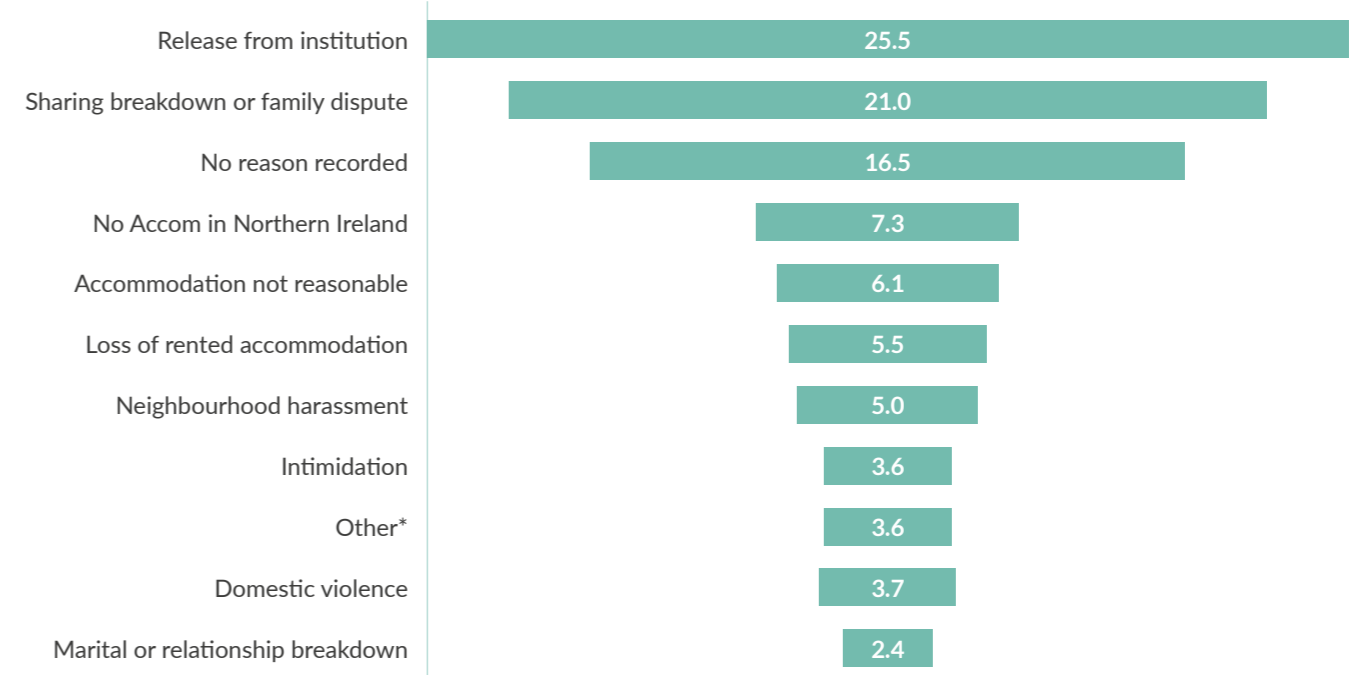


Reason for homelessness

This study explored the reasons why care leavers experienced homelessness.

Of care leavers that experienced homelessness (n=620), a quarter (25.5%) had release from an institution as the established reason for first homelessness with sharing breakdown or family dispute the next most prevalent reason (21.0%).

Most common reasons for homelessness among care leavers



*Other includes Bomb, Fire Damage (Civil Disturbance), Fire, Flood, Other Emergency, Mortgage default.

Data are % of care leavers who experienced homelessness by established reason recorded at first homeless presentation after leaving care.

Risk over time

Risk was highest in the period immediately following exit from care.³ More than four in ten care leavers who experienced homelessness did so within the first two years after leaving care.

42.1% of care leavers homeless in first 2 years after exit

In the first two years after exit, care leavers had over 17 times the risk of homelessness compared to young people with no social care history.

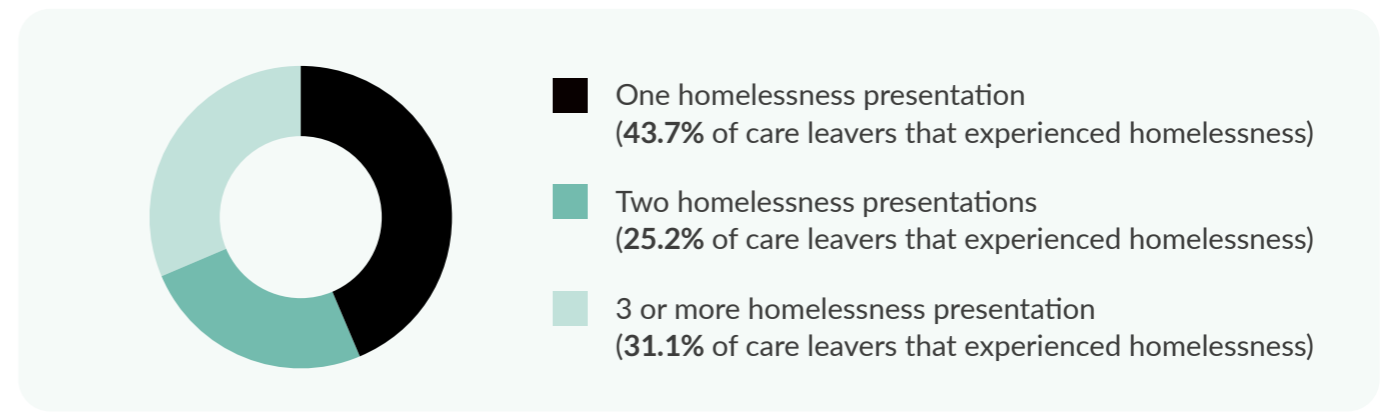
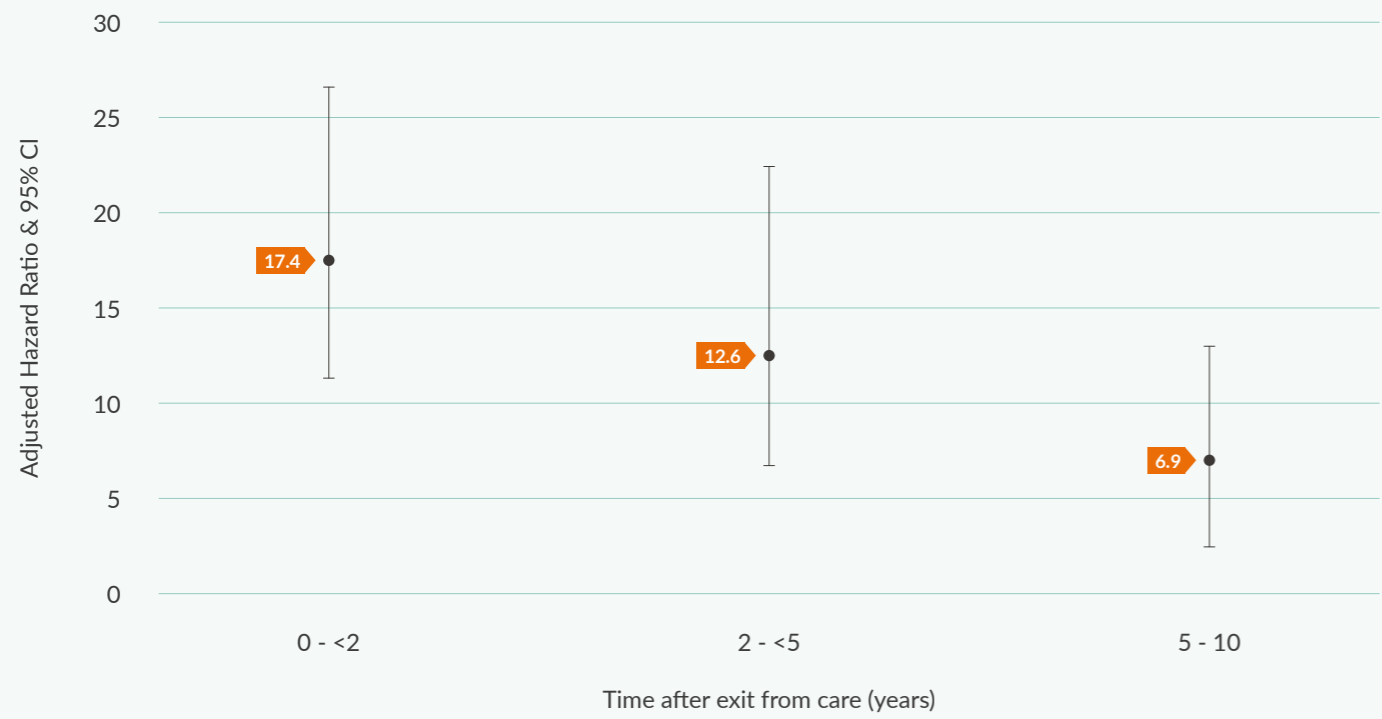
Although the risk of homelessness for care leavers compared to similar young people reduced over time, it remained nearly **seven times higher** even five to ten years after leaving care.

The first two years after leaving care are when risk of homelessness is highest.

³ Data on time-specific risk are from a Cox proportional hazards model estimating risk of index homeless presentation to the Housing Executive for care leavers compared to matched young people.



Time-specific risk of homelessness for care leavers



Risk and protective factors

Importantly, risk varied within the care leaver group.

Experts by experience explained findings in terms of:

- abrupt transitions from care
- a lack of safe, suitable, supported housing options and a lack of financial, practical and emotional support
- mental health challenges and trauma that exacerbate risk.

Those in care homes are booted out at 18, foster places are the same.

Recurring homelessness

Homelessness among care leavers was also often recurrent rather than a one-off event.

More than half of care leavers who experienced homelessness presented as homeless more than once, pointing to ongoing instability rather than short-term crisis.

- Young people who had been in care three or more times were around 50% more likely to become homeless than those with only one care episode.
- Those who left care early (aged 16-17 years) were more than twice as likely to experience homelessness compared with those who left at 18 years.
- Leaving from foster care placements was also linked to a higher risk - around 70% more likely than for those last placed in kinship care. Care leavers whose final placement was in a children's home or other setting also showed elevated risk, although these results were inconclusive (possibly due to smaller numbers and lower statistical power).
- Care leavers living in urban areas were almost three times more likely to experience homelessness than those living in rural areas. Care leavers living in the most deprived areas were also more likely to experience homelessness.

At the same time, the data highlights pathways that appeared to reduce risk.

- Care leavers who returned to live with parents were around 60% less likely to become homeless, while those who stayed with former foster carers were around 65% less likely, compared with care leavers who lived independently after discharge.
- Young people discharged to jointly commissioned supported accommodation or to relatives or friends showed lower odds of homelessness, but the differences were inconclusive.

Experts by experience described the emotional toll of uncertainty about where they will be living as they approach exit from care. Jointly commissioned supported accommodation is not guaranteed, with young people often not knowing until the last minute if they will be offered a place.

Experts by experience also felt that hostels were not appropriate accommodation for young people leaving care.

“
No young person should ever be in a hostel – there’s too much bad stuff going on around you.”

What this tells us

These findings show that **the transition out of care is a period of extreme vulnerability, during which homelessness risk rises sharply and predictably.**

The concentration of risk in the first two years after leaving care highlights the importance of transition planning and aftercare. Homelessness in this period is unlikely to be accidental or unavoidable; instead, it reflects the interaction between early adversity, system constraints and the sudden reduction of support.

The persistence of elevated risk up to 10 years after exit from care challenges assumptions that homelessness risk fades once young people are “settled”. For some care leavers, instability continues for years, suggesting that short-term or time-limited interventions are unlikely to be sufficient.

Crucially, the variation in outcomes within the care leaver group shows that homelessness risk is not fixed. Modifiable factors such as age at exit and post-care living arrangements shape outcomes in meaningful ways. The protective effect associated with continued relationships – with parents, former foster carers or supportive adults – underlines the importance of stability, continuity and connection, not just housing access.

Viewed alongside Study One, these findings show that homelessness risk is both predictable and patterned. Care leavers face the highest levels of risk, but they sit within a wider group of young people whose vulnerability can be visible long before homelessness occurs. This points to clear opportunities for earlier, targeted and sustained intervention - if systems are able to act on the signals that the data reveals.

Experts by experience want:

- 1 Leaving care to feel like a planned and safe transition.
- 2 To leave care safely, with a home, a plan, and someone to call.

Related publication

McKenna, S., Ross, E., Kent, L., Maguire, A., Reilly, D., Donnelly, M.
Data Insight: Homelessness among young people leaving care in Northern Ireland. (December 2025). ADR UK.

What Needs to Happen

This section sets out what these findings could mean for policy and practice. It develops the recommendations outlined in the Executive Summary, showing how they translate into action across children’s social care, housing, and data infrastructure.

Key takeaways

- Homelessness among young people is strongly linked to earlier contact with children’s social care.
- Risk is concentrated at predictable transition points, particularly during late adolescence and the move out of care.
- Care leavers face the highest levels of homelessness risk, but they are not the only group affected; care experienced young people and those known to social services as children in need face elevated risk.
- Linked administrative data is a powerful tool for identifying patterns of risk, where prevention efforts could be targeted to have the greatest impact, and where earlier action could prevent later crisis.

From evidence to action

This report brings together two data-linkage studies to show how childhood contact with social care and homelessness intersect over time in NI. Together, they show that homelessness among young people is not **random, sudden or unavoidable**. Rather, it can be patterned, predictable and visible within public systems long before a homelessness crisis occurs.

Lived experience expertise is central to this interpretation of the evidence, ensuring that statistical patterns are understood in terms of real lives, real transitions, and the practical and emotional consequences of system decisions.

Across both studies, a consistent picture emerges. Young people with a history of social care contact face a substantially higher risk of homelessness. That risk is not confined to care leavers alone but extends to a wider group of young people in contact with the social care system during childhood. It intensifies at predictable transition points - particularly during adolescence and the move out of care - and often persists into early adulthood.



These patterns matter because they show that homelessness is not simply a housing issue to be addressed at the point of crisis. It is the outcome of cumulative disadvantage shaped by early adversity, system thresholds and the way support is withdrawn or sustained over time.

Importantly, this does **not imply that social care contact causes homelessness**. The analysis is observational, and social care involvement often reflects **underlying family adversity**, such as poverty, parental ill-health, abuse or neglect, which are themselves strongly linked to later homelessness risk. Social services become involved in response to need. As such, childhood contact with social care should be understood as a **marker of elevated vulnerability**, rather than a causal factor.

At the same time, insights from experts by experience highlight that **many young people with care experience feel insufficiently supported**, particularly at key transition points. Young people consistently described challenges around leaving care, moving between services, and navigating early adulthood without stable housing or trusted adult support. These experiences point to **structural gaps between services**, and to transition periods where risk can accumulate.

Taken together, these findings point to an opportunity for prevention. The high proportion of homeless young people with prior social care contact indicates that **risk is often visible well before homelessness occurs**. This creates scope for earlier, better-coordinated intervention - particularly across children's services, housing, and adult support systems - to reduce the likelihood that existing vulnerabilities escalate into homelessness.

For policymakers and service providers, the implication is not that social care involvement is harmful, but that young people known to services may benefit from sustained, joined-up support beyond childhood, particularly during transitions out of care or family homes. Strengthening continuity, improving information-sharing, and embedding housing stability as a core outcome of transition planning may help ensure that social care contact becomes a protective factor, rather than simply a record of risk.

Administrative data makes this visibility possible. By linking information across children's social care, housing and health, this research shows how risk accumulates across systems and over the life course. It also demonstrates the limits of single-system perspectives, which can obscure trajectories that only become clear when data is brought together.

At the same time, this report highlights both the potential and the constraints of the current data landscape in NI. The findings presented here were produced using the data that is available. Yet gaps in access to up-to-date children's social care data for research, and barriers to linking other relevant datasets, mean that important questions about prevention remain unanswered. The danger is not only that risk of homelessness continues, but that it remains partially unseen.

Throughout this work, lived experience expertise has been central to interpreting what the data can and cannot show. Lived experience partners have helped ensure that statistical patterns are understood in the context of real lives - including hidden homelessness, unmet need and the emotional labour of navigating systems. Their insight reinforces that data is most powerful when it is used alongside, not instead of, human experience.

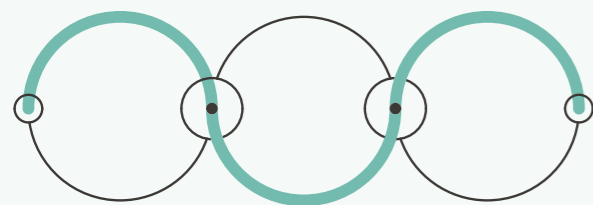
Early risk is visible in the data - the question is how we choose to act on it.
Choosing to act means recognising homelessness as a shared responsibility across public services, rather than a sudden crisis, an individual failure, or the responsibility of a single system. It means using administrative data ethically, transparently and in the public interest to inform earlier intervention, better coordination and more effective prevention. And it means ensuring that the data needed to do this work is accessible, up to date and capable of being linked safely.



Balancing visibility and absence in administrative data

While over half of young people presenting as homeless had a recorded history of contact with children's social care, the rest did not. These young people matter equally, and their absence from social care records does not imply an absence of need, risk, or adversity earlier in life. Rather, it highlights the limits of relying on any single administrative system to identify vulnerability or predict homelessness.

For some young people, homelessness may arise from pathways that do not result in a referral to social care, or where difficulties emerge later, escalate quickly, or remain hidden from formal services. Others may have experienced adversity in systems that have not yet been linked to homelessness data in NI for research or prevention purposes, such as the education system, mental health services, or youth justice.



This finding reinforces the value of expanding data linkage to other indicators that could help identify earlier warning signs for young people who do not come to the attention of social care services.

Taken together, the strong association with social care contact, alongside the absence of such contact for many homeless young people, underscores a central message of this report: **homelessness prevention requires a multi-system, life-course approach**. Social care data offers a critical but partial view. More comprehensive, ethically governed data linkage has the potential to improve early identification, reduce blind spots, and ensure that prevention strategies reach all young people at risk of homelessness.

What this could mean for policy and public services

Children's social care

The findings suggest that children's social care has a critical role to play in homelessness prevention, not only for care leavers but for a wider group of young people known to social services. Contact with social care represents an opportunity for early identification of housing-related risk - often years before homelessness occurs - yet this potential is not always realised.

These findings point to the importance of:

- Recognising housing stability as a long-term outcome of interest for children's social care, not just an adult housing issue.
- Paying particular attention to transition points, including the move towards independence in mid-to-late adolescence.
- Ensuring that young people with a child in need history are not overlooked in homelessness prevention efforts, even when they do not enter care.

Housing

For housing and homelessness services, the findings highlight the importance of prevention and early intervention. Many young people who present as homeless have a history of contact with other public services.

This evidence suggests a need to:

- Strengthen early identification of young people at risk, particularly those with a history of social care involvement.
- Recognise that homelessness among young people is often recurrent, requiring sustained support rather than short-term responses.
- Ensure safe, suitable housing options for care leavers and other vulnerable young people that prioritise stability, support and continuity.

The findings from this research supports the need for the Northern Ireland Executive's recently launched "New Foundations Programme", a new cross-departmental approach to supporting young people leaving care, with the ambition of embedding lasting systemic change to prevent homelessness.

Cross-departmental working

The patterns identified in this report reflect how risk accumulates across systems rather than within a single service. Children's social care, housing, health and other services all hold pieces of the picture, but responsibility for prevention can become blurred at the boundaries between them.

The findings reinforce the need for:

- Shared responsibility for homelessness prevention across government departments.
- Better coordination at key transition points, particularly when young people move between eligibility thresholds.
- Policy frameworks that support continuity rather than abrupt withdrawal of support at fixed ages.



Data infrastructure

This research demonstrates what is possible when administrative data is linked across services and analysed over time. It also highlights the limitations of current data infrastructure, where important information is often siloed, outdated or unavailable for research and policy evaluation.

The findings suggest a need to:

- Improve access to linked administrative data for research for public good.
- Ensure that up-to-date and NI-wide children's social care data is available for research and can be linked securely with housing, health and other data.
- Use data not only for monitoring and reporting, but **to support earlier intervention, prevention, evaluation and service improvement.**

When used well, administrative data helps public services understand need earlier, target support more effectively, and reduce preventable harm.

Looking ahead

The evidence in this report shows that homelessness among young people is not inevitable. Risk is visible, patterned and often concentrated at points where systems already have contact with young people and families. Acting on these signals requires not only political will, but the ability to see across services and over time.

Final word: from data to action

“ This research shines a long overdue light on the factors associated with homelessness risk in young people known to social services in Northern Ireland. And it used data and information that we already had. There is no excuse for not making the best use of these data to inform policy and practice for the people of Northern Ireland, by the people of Northern Ireland. The data show where the greatest risk lies for this vulnerable group. The challenge now is how do we use this information to prevent homelessness. Targeted intervention and prevention is possible when systems work together for public good. ”

Dr Aideen Maguire

Co-Director Administrative Data Research NI, Queen's University Belfast

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Ethics

Ethical approval for the research was granted by the Research Ethics Committee (REC) reference 22/SC/0065.



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