Housing First ‘Down Under’:
Revolution, Realignment or Rhetoric?

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Introduction

The emergence of Housing First as an approach to ending chronic homelessness has gained widespread attention around the world. A Housing First approach has much to offer – it has shifted long held assumptions about people who are chronically homeless and who have complex needs, re-affirmed the importance of housing, and helped to consolidate the link between evidence and practice. In the Australian context, Housing First has also broken the long standing and often acrimonious debate about whether support or housing is the most important factor in resolving homelessness. While the shift towards providing direct access to permanent housing has the potential to enhance existing service responses in Australia, there are concerns that many of the complexities and challenges that services face in implementing a Housing First approach have been ignored.

In this context, Nicolas Pleace’s paper *The Ambiguities, Limits and Risks of Housing First from a European Perspective* (Pleace, 2011) provides a timely opportunity to reflect critically on a Housing First approach. Although written from a European perspective, the issues that Pleace raises are relevant to policy-makers and service providers in Australia.

This article considers the ambiguity, limits and risks of a Housing First approach from an Australian perspective. The paper starts with a short description of existing responses to homelessness in Australia. It then examines the issue of programme drift (or what Pleace terms ‘service diversification’), drawing on material from a paper released in Australia in early 2012 (Johnson, Parkinson and Parsell, 2012). Next, it critically examines claims about Housing First in Australia and compares them against the available evidence. In general, many claims overlook key limitations of what a Housing First approach is capable of. The final part examines whether the focus on Housing First has unwittingly narrowed the debate on home-
lessness. Although this is an important consideration, the bigger risk is the way Housing First has been positioned as a ‘better’ alternative with little consideration of the structural constraints that have limited the effectiveness of other responses.

Homelessness Responses in Australia and Recent Policy Development

For almost three decades there has been a national response to homelessness in Australia. Originally called SAAP¹ and subsequently rebadged in 2009 as the Specialist Homelessness Service system (or SHS), there are over 1200 services spread across the country. These services provide case management to people experiencing homelessness, but there is also a strong focus on early intervention, particularly among young people, families and women experiencing domestic violence. Although there is a distinctly linear feel to some parts of the homelessness service system, with many services relying on priority access to short and medium-term accommodation, there is nonetheless a great deal of diversity. Many agencies eschew linear models and seek direct access to permanent housing through both the private rental market and the public housing system.

In recent times the policy agenda has shifted. In 2009, the Australian Government released the first white paper on homelessness – The Road Home (FaHCSIA, 2008) – which identified two overarching policy goals: to halve overall homelessness by 2020; and to offer supported accommodation to all rough sleepers who need it. The Government called for bold, new services and evidence-based approaches in recognition of the fact that “services targeting people sleeping rough are underdeveloped” (FaHCSIA, 2008, p.50).

Ambiguity: Fidelity and Diversification

Although Housing First has gained widespread attention, it is clear that it means different things to different people. Crudely put, Housing First is generally treated in one of two ways. On the one hand, it is presented as a specific service response. Here, the issue of programme fidelity is paramount. The basic idea behind programme fidelity is that services should be based on a common set of clearly articulated operational principles or critical elements. In this context, the Pathways to Housing model from New York is often thought of as the “original program model” (Rosenheck, 2010, p.19).

¹ The Supported Accommodation Assistance Program
On the other hand, there is a view that Housing First should be treated as a broader philosophical approach that embraces a diverse range of service delivery models, which share a common focus on rapid access to permanent housing. European researchers arguing along this line have promoted the idea of ‘Housing Led’ as a way of extending the basic principles behind a Housing First approach into a more enduring and system-wide set of principles (Busch-Geertsema et al., 2010).

The tension between fidelity and diversification is relevant to Australian policymakers, as Australia’s social and economic conditions differ markedly from the US and Europe. Given the different conditions it would operate under, the direct transference of the Pathways to Housing approach would therefore be problematic. Housing First services in Australia need to take into account the specific characteristics of Australia’s welfare and housing system, and this implies that a drift away from the original Pathways approach is inevitable.

This drift or “attenuation of fidelity” (Rosenheck, 2010, p.19) raises the question of whether Housing First models in Australia can deliver the same outcomes. As Pleace notes, the existence of ‘programme drift’ emphasises the importance of establishing an evidence base that identifies which variants work well and which do not. While an Australian evidence base is emerging (albeit slowly), in relying exclusively on evidence from Pathways to Housing to demonstrate the efficacy of Housing First, policy-makers and advocates have ignored the implications of programme drift and have set up a range of potentially unrealistic expectations about what Housing First services can achieve in Australia.

Capabilities and Claims

Some Housing First services in the US have delivered impressive results. Australian advocates enthusiastically claim that a Housing First approach has a “well documented success rate of 85%” (Taylor, 2012). To be sure, some services such as Pathways to Housing do have impressive housing retention rates (Gulcur et al., 2003). However, a more recent randomised control study of 407 chronically homeless adults found that 66% of those who were provided with immediate access to housing remained housed after 18 months (Sadowski et al., 2009).

Although the later findings are still impressive, in focusing on the best outcomes, advocates leave Housing First open to criticism and run the risk that any service that fails to achieve similar success rates will be seen as failures.

There are also repeated claims that a Housing First approach is more effective at reducing “rates of problematic alcohol and drug use, including injecting drug use” (Gilbert, 2012). But the evidence from the US is patchy – some studies report declines in alcohol intake (Larimer et al., 2009), but others do not (Tsemberis et al.,
Similarly, some studies report declines in illicit drug use (Milby et al., 2005), but other studies find that rates of illicit drug use among chronically homeless people remain fairly constant (Tsemberis et al. 2004; Padgett et al. 2006; O’Connell et al., 2009). Furthermore, there is a concern that some Housing First services in the US have excluded chronically homeless people with serious addictions (Kertesz et al., 2009). While this selection bias reflects, in part, social security arrangements in the US, whereby chronically homeless people with a mental illness are eligible for social security payments while those with a serious addiction are not, such exclusionary arrangements do not exist in Australia. As the mandate for Housing First services in Australia is to assist chronically homeless people irrespective of whether they have a mental illness or a serious addiction (or both), it is crucial that more thought is given to what resources and specific practices are required to reduce the risk posed by serious drug dependency.

It has also been claimed that participants in Housing First enjoy “much improved mental health” (The Australian, 2011). However, a number of qualitative studies have found that issues of social isolation and loneliness exist among long-term homeless people who are in permanent accommodation (Padgett, 2007; Yanos et al., 2007). The issue of isolation is particularly evident among those who live in dispersed housing. However the alternative – congregate living arrangements – often have high concentrations of people with drug and/or alcohol problems, which creates its own problems. Despite the inherent problems in both approaches, there has been no critical discussion about the limits (or relative benefits) of either type of accommodation.

Finally, what the literature makes plain is that many of the problems faced by chronically homeless people remain even when the people are housed. As Tsemberis (2010, p.52) notes:

Housing First and other supportive housing interventions may end homelessness but do not cure psychiatric disability, addiction, or poverty. These programs, it might be said, help individuals graduate from the trauma of homelessness into the normal everyday misery of extreme poverty, stigma, and unemployment.

Many US researchers are quite forthright in acknowledging the limitations of a Housing First approach, while European researchers have engaged in greater critical analysis of Housing First (Pleace, 2010; McNaughton Nichols and Atherton, 2011). However, in Australia the tendency has been to ignore the problems identified in the literature. The evidence certainly highlights that a Housing First approach has many strengths, but inasmuch as good policy is based on a clear understanding of what works, good policy is equally cognizant of what does not work, for whom and why.
Risk: Making Assumptions about Homelessness and Existing Service Responses

The third issue raised by Pleace has to do with the possible ‘pathologizing’ effect of a Housing First approach. With its focus on chronically homeless people, Housing First certainly presents a truncated picture of homelessness. This is an important issue in Australia, where Housing First has captured considerable media attention, and where public perceptions of homelessness generally ignore larger issues such as poverty and a lack of affordable housing.

However, a potentially bigger risk is if the policy focus on chronic homelessness comes at the expense of early intervention and prevention programmes – two areas where there has been considerable investment and success in Australia over the last two decades. There is clear evidence that certain groups, for example young people who have experienced trauma and/or been in the child protection system, are not only at risk of homelessness but at acute risk of long-term homelessness. If resources are shifted from blocking these pathways into homelessness, the prospects of ending long-term homelessness are significantly reduced.

There is another risk. In Australia, as in the US, a key element in the argument for a Housing First approach is the perceived failure of existing services to provide long-term solutions to chronic homelessness – a fair enough point. However, Australian supporters of the Housing First approach have appropriated arguments used in the US, claiming the existing system is based on the assumption that “people need to show themselves capable of sustaining a tenancy before they get housing” (Australian Common Ground Alliance, 2012).

While services funded through the various state health systems (e.g., mental health or drug and alcohol services) typically adopt a housing ready/treatment first approach, to claim that the SHS in Australia is a housing ready/treatment first approach is disingenuous. The claim ignores the fact that some Housing First features – notably choice, harm minimisation, and long-term intensive support – are present in the current system. In fact, in some important ways, there are similarities between Housing First and the SHS, so much so that some Australian academics have labelled the SHS a Housing First programme (Brueckner et al., 2011), and some agencies claim to have been ‘doing’ Housing First for years. Certainly the SHS has limitations, but characterising the SHS as a ‘housing ready’ approach is unwarranted.

Furthermore, what has been overlooked in the critique of the existing system is the way that the housing market has re-shaped the SHS over time. When the SHS started in 1985 it was designed to assist people into and/or maintain their housing, as well as to support people in addressing individual issues. In the 1980s, housing was relatively affordable and finding housing comparatively easy. This has changed. Over
In the last 10-15 years, house prices have risen dramatically across the country and, despite the global financial crisis, remain relatively high. Figure 1 shows that in 1985 the median cost of buying a house in Australia was 3.3 times average annual earnings. By 2009 this had risen to 8.2. As a result of the sustained appreciation in house prices, many people can no longer afford to buy a home. This has put increased pressure on the private rental market, literally squeezing out the most vulnerable households. With few options in the private rental market and a small, highly residualized social housing system (about 5% of Australia’s housing stock), services have increasingly struggled to find affordable housing. As the white paper noted:

Existing specialist homelessness services are at capacity and unable to improve outcomes without greater access to exit points such as permanent housing (FaHCSIA, 2008, p.11).

Inasmuch as problems accessing affordable housing have resulted in bottlenecks in the existing system and undermined the capacity of the SHS to achieve its goals, they also have the potential to threaten the capacity of new Housing First services to deliver the outcomes they are intended to. In fact, there are already signs that housing supply issues are distorting Housing First models – a number of Housing First services have publically stated that they have had significant difficulties accessing housing and have been forced to rely on interim arrangements such as boarding houses and transitional accommodation (Regan, 2012). In short, by ignoring the structural constraints which have undermined the SHS, Housing First supporters have failed to develop counter-measures to ensure that Housing First services do not also drift from the core operational principle of direct access to permanent housing.
Conclusion

The challenge facing Australian policy-makers and advocates of a Housing First approach is to embrace a more critical and reflective approach, one that acknowledges the risks, limits and ambiguities of the model, and seeks creative ways to resolve them. As it currently stands, expectations about Housing First are high and quite possibly unrealistic. If Housing First services fail to achieve their objectives, there is a danger Housing First will be seen as a failure. Further, the potential benefits of a Housing First approach could well be lost if Housing First continues to pitch itself as a narrow alternative rather than a broader national approach to addressing homelessness across all relevant services.
References


