Researching homelessness and support needs: progress in approaches and methods to tackle complexity

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OUTLINE OF PRESENTATION

Progress in researching ‘joined up’ working to meet complex needs?

- Changing governance of housing and welfare
- Meeting increasingly complex needs (homelessness, risk of homelessness)
- Effectiveness of responses?
- Conclusions and future challenges
GETTING INTO THE DEBATE – YOUTH HOMELESSNESS IN THE LATE 1980s/EARLY 1990s

- Youth homelessness crisis – ‘no job, no home’ cycle
- Shelter promoted French model ‘foyers pour jeunes travailleurs’
  - Integrated approach to housing, education, training, employment, & independent living
- Acknowledged lack of working across government departments (employment, social security, housing)
- Mechanism needed to engage ‘hard to reach groups’
- Initial developments in evaluating integrated intervention
GOVERNMENT TO GOVERNANCE
STOKER (1998) – FIVE PROPOSITIONS

1. Complex set of institutions – drawn from, but beyond government
2. Blurring of boundaries for tackling social issues – rise of third sector agencies
3. Power dependencies - no single organisation commands governance process
4. Autonomous self-governing networks of actors
5. Government ‘steering, not rowing’ (guidance, tools)
EARLY 2000s – ‘COLLABORATIVE DISCOURSE’

- Partnership, inter-agency working, integrated delivery, joined up government
- Working across organisations
- Working across professions
- Complex networks; vertical and horizontal linkages

State power – not shrinking but directing?

Paralleled by progressive homelessness and housing policies

Powell and Glendinning (2002); Powell and Exworthy (2002); Clarke and Glendinning (2002); Lowe (2004)
BOUNDARY SPANNERS (WILLIAMS, 2012)

- Actors use agency to negotiate organisational structures to collaborate with others
  - Interpersonal skills (trust and reciprocity)
  - Networking skills, communication
  - Entrepreneurial, innovation, creative skills
  - Co-ordination skills (manage collaboration)
- Senior to frontline staff
- Managing in and across multiple modes of governance
- Blurring of personal and professional relationships
HOMELESSNESS AND INTER-PROFESSIONAL WORKING

- Joint working - ‘expertise of different professions’ to resolve complex problems
- Working across professions
  - Same/different organisations
  - Vertically/horizontally
  - Formal/informal
  - Professional networks
- Housing, health/mental health, social work, support/independent living skills
- Delivery by case management

Anderson, Dyb and Ytrehus, 2012
(NOT) MEETING INCREASINGLY COMPLEX NEEDS

Evidence Reviews (Rosengard et al, 2007; Pleace, 2008)

Service User needs:
- Personalised, comprehensive service
- Ordinary independent living

Experience/evidence
- Disadvantage, exclusion from service provision, falling through the cracks
- Multiple agencies, not sufficiently co-ordinated

Recommendation: Strategic and operational partnership working
MULTIPLE EXCLUSION HOMELESSNESS (2011)

- Substance dependency, mental health, domestic violence, experience of care/prison, prostitution, begging, street homelessness

- Practice: multi-professional, rather than inter-professional, lack of sharing/co-ordination, professional ‘protectionism’ (Cornes et al)

- Challenges in understanding each others’ roles, developing services (workers); negotiating services (clients) (Joly et al).
SEVERE AND MULTIPLE DISADVANTAGE
(ENGLAND, BRAMLEY ET AL 2015)

- 58,000 adults involved in homelessness, substance misuse and criminal justice systems
- Poverty universal, mental health issues common
- Distinguished by degree of stigma, particularly poor quality of life
- Structural roots of SMD evident
- Outcome of early family/educational experience
- Significant social cost

‘encouraging short-term improvements reported by services, but progress weaker amongst those with most complex problems’
SANCTIONS AND DESTITUTION

Welfare conditionality and benefit sanctions impacting on most vulnerable (Batty et al 2015; Dwyer and Bright 2016)

1.2m destitute in UK in 2015 – cannot afford to buy the essentials to eat, stay warm and dry and keep clean (Fitzpatrick et al, 2016)
COMPLEX NEEDS: EXPERIENCE & EFFECTIVENESS

‘There is no desire for permanent accommodation for the most vulnerable service users interviewed. For them the basics of dealing with their addiction, finding food and a roof (even for one night) is a priority’

Anna Evans Housing Consultancy (2014)

Little evidence of homelessness prevention activity in response to health and well-being needs
Lack of evaluation of practice & limitations to research methods/rigour
(Homeless Link, 2015)
HEALTH AND HOMELESSNESS

Extensive ‘clinical research’ on health problems of homeless people

- Conducted through ‘specialist’ services
- Individualised

Access to/exclusion from health care reflects welfare regime and health care system

- Netherlands - wide range of care for socially excluded (e.g. needle exchanges, addiction services, multi-agency implementation)
- Slovenia – relatively accessible services, some barriers/exclusion
- Scotland – health and homelessness standards aim to overcome acknowledged exclusion

Anderson and Ytrehus, 2012; Wolf et al, forthcoming
PUBLIC HEALTH AND HOMELESSNESS

Grounded in structural analysis of health inequalities
Social determinants of health – links to housing, home and well-being

- NHS role in improving health of homeless people?
- Health and social care integration – opportunities to connect with housing?
- Rigorous data linkage
- Early intervention – early years education, mental health, substance misuse, community safety, employability
- Joint training

Hetherington and Hamlet (2015)
COMMUNITY ISSUES

- Housing – fundamental human right
  - Related rights? (income, health care and other support)
- Distinct literatures on homelessness and communities
- Key connection – point settling into a community home
  - Social housing allocations, Tenancy sustainment
- Housing First – new orthodoxy?
- Tenure restructuring – private renting, social enterprise
- Post-2008 austerity measures
COMMUNITY AND GOVERNANCE ISSUES: SCOTLAND (2015-16)

- Roots of homelessness are in the community (breakdown of relationships, shared living arrangements)
  - Support needs identified amongst 38% of applicants

- Post-2009 emphasis on homelessness prevention

- Housing (Scotland) Act 2014
  - Abolition of Right to Buy; Increased lettings discretion to social landlords

- 2015 legislation to reform private sector tenancies
NEW RESEARCH: HOUSING THROUGH SOCIAL ENTERPRISE

- EXPLORE HEALTH IMPACTS OF HOUSING PROVIDED THROUGH A SOCIAL ENTERPRISE PRIVATE LANDLORD
- COMPARE WITH SOCIAL LANDLORD
- AND RENT DEPOSIT SCHEME (PRIVATE RENTING)
- FOLLOW TENANT SAMPLES OVER TWO YEARS
- EXAMINE WIDER PRACTICE

ESRC/MRC COMMONHEALTH
**INTERNATIONAL COMPARISONS: HABITACT Peer Review of Local Homelessness Services**

- Annual peer reviews of city homelessness policies (2010-2016)
  - Discussion paper; peer review workshop; post-workshop report
- Substantive role for local policy making – fits with changing governance
- Benefits of structured peer review for lesson learning, including meeting complex needs and community issues in period of crisis
- Divergence in practice and capacity
- Dominance of northern and western Europe?
- Measuring progress?
- Positive example of international networking

Gosme and Anderson (2015)
CONCLUSIONS AND CHALLENGES

- Complex needs – strong evidence of underlying structural explanations and inequalities
- Housing, health, social work – frontline services
- Increasingly sophisticated joint working – governance structures
- Challenges remain in delivering inter-professional working
  - Power dynamics with health and social care (longstanding)
  - ‘Professionalism’ and inter-professional working
  - Joint education and training
- Further research – governance and professional practice?
  Is the whole greater than the sum of the parts?
  Are our responses up to the challenges?
REFERENCES


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*Williams, P. (2012), Collaboration in public policy and practice, perspectives on boundary spanners, Bristol: Policy Press*