Mechanisms of intervention and the contexts they are used in interact in complex ways (Westhorpe 2009). This helps explain why we can’t over generalise about what works in respect of models of service designed to prevent or respond to homelessness. This said, there are some key messages from the totality of evidence that has been accumulated to date. First homelessness would be a lot easier to prevent for first or subsequent episodes if adequate and appropriate (developmentally/culturally) housing was available. Second (and often dependent on the first) timely support of a particular character ‘works’ both in a preventive sense and in periods when people experience ongoing challenges which may render them vulnerable to further homelessness.

There is not the space here to review the research about ‘what works’ in respect of preventing homelessness. Rather I will briefly reflect on some of the critical features of how we can generate and use evidence, and how these complement each other in important ways.

How we conceptualise a social phenomena or issue provides an architecture for responding within. The way this architecture is understood does not remain static but shifts over time, partly informed by research, but also by an ongoing process of thinking deeply about the analytic concepts and models we are using. The result is that there is not a steady progression of greater understanding but more of a series of journeys through interconnected rooms.

Distinguishing early intervention to prevent particular individuals or families becoming homeless from broader understandings of prevention was an important underpinning for developing a coherent logic for programs such as Reconnect and Home Advice. Over the past ten years or so the application of the concept of ‘pathways’ into homelessness has allowed a more nuanced exploration of what types of responses are needed for particular groups of people.

The point is that how we conceptualise a field can be critical to what we are able to do. I have recently been undertaking a research project to consider the prevention of homelessness for young people leaving care - one of the identified pathways into homelessness.

It became obvious during this research that the way we conceptualise and structure the architecture of child protection and out of home care has a profound influence on the journey of the young people involved through young adulthood in respect not only of their relationship to housing and where they live, but to
how we view what support should be given when and by whom. A deep system centeredness is reflected in notions such as ‘leaving care’, ‘transition from …’ (not ‘transition to …’), cemented by institutional and statutory demarcations of 18 years as a point of ‘leaving care’, social constructions that shift from child as victim needing protection to problematic young person deserving of limited and conditional support, and an apparent difficulty in applying a future rather than past lens to their lives. Prevention and early intervention are future focused notions and require us to conceptualise and pursue what is preferred. This is more than the absence of homelessness, just as health is more than the absence of disease.

The recent turn of attention to intergenerational homelessness provides new opportunity to revisit the conceptual architecture of homelessness. The Intergenerational Homelessness Survey (Flatau et al. 2009) found that most homeless adults first have experiences of homelessness as children and teenagers, and that there are high rates of intergenerational homelessness with higher rates amongst Indigenous families.

Implications for ‘what works’ include the need for an intergenerational frame in how to prevent homelessness, a focus on ‘keeping housed’ (sustaining housing) as well as getting housed, and the importance of proactive support to children and young people at risk of experiencing homelessness, their parents, young people in out of home care, and as they become young adults (acutely obvious when as young adults so vulnerable to homelessness they have children of their own), and all those in difficult home environments, where drug and alcohol use, mental health, and violence can erode ‘home’ and housing stability.

Systematic reviews of research evidence provide synthesis across a range of studies, usually selected according to hierarchy of research ‘quality’ and relevance. They provide a ‘helicopter view’ of what themes emerge across the published (and usually refereed) research and evaluation literature, and have assisted in eliciting the characteristics of effective programs and interventions in various fields (Mitchell 2011). Yet systematic reviews themselves emphasize that the ‘evidence’ they draw on is partial, that studies cannot necessarily be generalized across settings, and that what is selected often reflects what has been researched in larger scale studies rather than examining the conceptual architecture of a field or particular contexts for practice.

This can have the effect of our evidence simply reflecting what trends, conventions and conveniences there have been in the past selection of what to research. There is also a tendency for this form of review of the evidence to largely include studies which evaluate single rather than multiple strategies, over generalise applicability, or label an intervention according to one feature, for example the site of engagement.

The complex nature of youth homelessness, together with the variety of outcome measures and research methodologies employed, makes it difficult to assert confidently that an intervention that has been demonstrated to be effective with one population group in one setting will be effective with another group of people in another setting.

(Barker et al. undated, p.7)

With this caveat in mind, systematic reviews of research literature have made important contributions to our pool of evidence. Gronda’s 2009 analysis of 53 selected studies found that the key feature of effective case management in respect of homelessness is it being ‘relational’- typified by persistence, reliability, intimacy and respect, and the delivery of comprehensive, practical support, with key components being access to housing, access to specialist supports (particularly mental health and AOD), individually determined support durations, and staff who have advanced assessment, communication and relationship skills and who are supported with regular practice supervision. The FaHCSIA commissioned review of literature (Barker et al. undated) found that early inter-

vention with young people works when it:

- builds family connections
- is relational (develops trust, people don’t feel judged, not punitive)
- is responsive to multiple and interlinked factors
- starts ‘where young people are at’, that is, is client centered and promotes clients choices
- is strengths based
- responds to the young person’s life context in ways that are flexible.

This review concluded that the connection to family is still very important to young people even where family conflict or disruption have led to homelessness. Citing Lindsey, Kurtz, Jarvis, Williams, and Nackerud (2000), Mallett, Rosenthal, Keys, and Averill (2009), and Milburn et al. (2009) it found that having contact with family members as well as a competent formal support service are two factors that facilitate progress out of homelessness (Barker et al. undated).

Another important consideration in answering the question ‘what works?’ is the scope of attention. The scope can be narrow, for example, examining a specific direct practice intervention, or broad, for example, examining the interaction of various formal and informal supports and/or systems in preventing homelessness.

The current interest in the various roles of specialist homelessness and mainstream services and supports provides opportunities to explore how communities and service systems collectively might interact to better effect. Whilst contract management of specialist services tends to drive them to tightly target services to those they are funded to gain outcomes for, there is evidence to suggest that homelessness early intervention services play an active role in community capacity building around prevention. Ryan (2003, p.5) concluded in a longitudinal study that the twelve Reconnect services investigated have had a significant impact, relative to their own capacity, on building community capacity for early intervention for youth homelessness in three key ways:
by building community infrastructure for early intervention
• by strengthening service networks and collaboration between agencies
• through assisting other organisations to have a greater focus on effective early intervention.

Answering the question ‘what works’ also raises the issue of different forms of knowledge that constitute evidence we might take into account. Various forms of knowledge have been suggested as necessary to inform community based practice. Using Park’s (1999) typology representational knowledge, which can take functional and interpretive forms, seeks to explain reality in empirical terms, and is generally what is produced from formal research studies. Relational knowledge concerns what different parties in a relationship know of each other and forms the basis of community life. Communicative and participatory processes seek to build this form of knowledge through sharing, togetherness, commitment, trust, intimacy, community ties, and what has been termed social capital. Reflective knowledge arises from us developing understandings, convictions and commitments about what we should do. Reflective knowledge gets articulated and grows in strength as people get involved with action in concrete situations (Park 1999: 148) and allows norms, culture and lived wisdom to be incorporated into our practices.

This requires ‘spaces’ where open communication can occur about what is happening, what this means and what we should do. New knowledge emerges as people act purposefully and reflect on this (‘evaluate’ in the broad sense). In recent years such understandings have been used to underpin living systems theory (Whitehead and Ness 2006, Wadsworth 2010).

The implication of acknowledging that different types of knowledge are needed to inform our understandings and practices, provides a rationale for including participatory action learning and research processes as a necessary element in how we understand homelessness and what is needed in order to respond effectively in particular contexts.

In Reconnect action research has long been included as a necessary element in the program logic of what is needed if early intervention services are to be context responsive and effective, and the widely drawn on Reconnect Good Practice Principles developed out of a collaborative action research process. The Road Home (Australian Government 2008, p.20) explicitly acknowledged the importance of action research to improving homelessness policy and practice.

For Indigenous people participatory action research and ‘yarning’ as a particular form, provides a process that is respectful, empowering and decolonising (Fredericks et al 2011). For service providers collaborative inquiry provides a process to structure engagement and what is effective in their particular context.

A variety of forms of evidence are needed in order to understanding ‘what works’ and whilst these may be underpinned by different perspectives on knowledge there is value in seeing these as largely complimentary if used with conceptual clarity and purpose.

References for this article are available in full from the CHP web site.