2003-01-01

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Managing Homelessness: Towards a Holistic Paradigm Perspectives from Ireland and Australia

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Abstract:

The problem of homelessness still persists in many advanced capitalist societies today, despite marked improvements in their overall economic prosperity. The broad objective of this research is to undertake a comparative study of approaches to addressing the problem of homelessness in two such societies - the Republic of Ireland and the State of Victoria in Australia - and to develop an outline model, which addresses the problem of homelessness in a more holistic manner.

The two locations of Ireland and Victoria were chosen because major reviews of homelessness policies have been undertaken recently in both areas. In addition, although geographically distant, they are of a similar size in terms of population, with just under 4 million in the Republic of Ireland and 4.8 million in Victoria. Also, strong historical and cultural links exist between the two jurisdictions, which can be traced back to deportation in the nineteenth century.

The discussion commences with a brief overview of homelessness as both a theoretical and a practical construct, providing a backdrop to the more focused part of the study. Moving on to the main part of the work, perspectives on homelessness in Ireland and Victoria are presented. The next task is to review the limited data available in order to identify similarities and differences that may emerge, and relate them to the more general findings in the literature. Finally, the case is made for the need to adopt a more holistic approach to addressing the problem of homelessness and an outline model is presented.

Key Words: Homelessness; Ireland; Australia, Social Policy.

Introduction

Homelessness is not a recent phenomenon in society. As far back as the 16th century, in England, the crime of vagrancy could lead to punishment by death. This severe sentence was ameliorated somewhat in the 18th century, being replaced by deportation to the colonies, especially Australia (Chambliss, 1964). Yet, despite its long-standing prevalence, Harvey (1998:6) observes that 'the area of research into homelessness is especially burdened with problems of definition', a view shared with Avramov (1995).

Perhaps this confusion about homelessness is due to the rich heterogeneity of the homeless experience. Glasser and Bridgman (1999) highlight how homelessness as a construct varies greatly from culture to culture and even within cultures. For instance, In Quebec, the advocacy community refer to les itinérants, while sans-abri is used by professionals and academics in relation to homelessness. Given these varying appellations, the authors conclude: 'one way to confront this problem is to define homelessness as the opposite of having adequate housing' (Glasser and Bridgeman 1999:4). This is somewhat similar to a definition from the European Observatory on Homelessness, which was founded in 1991 to put the assembly of data on European homelessness on a more systematic basis. It considers that 'exclusion from a personal dwelling marks the condition of homelessness' (Avramov 1995:165). In sum, whatever the contributing factors may be, those who do not have 'that most treasured possession - a fixed abode' (Coleman 1990:98) carry the label of homelessness.

Extent of Homelessness

While a detailed survey of homelessness is beyond the scope of this study, some statistics substantiate its prevalence in many parts of the developed world. In the US, an estimated 842,000 people used shelter services at any one time during 1996. This figure was up from 500,000 in 1987, pointing to a long-term upward trend in homelessness (Marks 2000). The EU also has a homeless problem estimated at 1.8 million (Harvey 1998). Turning to Japan, Prusher (2001) reports that it now has at least 20,500 homeless. These statistics from the US, the EU and Japan – all highly developed economies – provide evidence to support the view that increased affluence has not diminished the condition of homelessness.

Homelessness: Why does it Occur?

O'Flaherty (1996:4) cautions that 'causality is a slippery concept'. This observation is particularly relevant in relation to homelessness. Those huddled on the street corner or assembled in a shelter may all share a search for a place to sleep, but why and how they got there remains complex and contiguous. It is clear from the literature that the process of homelessness is not uni-dimensional. Rather it embraces a wide range of factors.

Broadly speaking, two schools of thought can be identified in relation to homelessness. One is the 'personal pathology' school, which focuses on individuals who become homeless due to personal difficulties such as alcohol abuse, drug addiction or mental problems. In contrast, the 'structural' school focuses on factors which are external to the individual, including lack of affordable housing, poverty and de-institutionalisation (Greve 1991; Tucker 1990) which undoubtedly can contribute to homelessness. There is evidence to support the personal perspective. For instance, Glasser and Bridgman (1999) cite substantial evidence of alcoholism being the most pervasive health problem of the homeless in the US. Likewise, alcohol dependency is identified in the European context as one of the determinants of homelessness (Avramov 1996). Drug addiction is another underlying theme in the homeless literature (Avramov 1995; Glasser and Bridgeman 1999). Moving to structural factors, evidence from the US regarding de-institutionalisation suggests that many who are discharged become homeless, due to cutbacks in community care (Jencks 1994). A similar picture emerges from the Netherlands in relation to the association between mental illness and homelessness (de Feijter and Radstaak 1994).

Therefore, a broad critical analysis of the determinants of homelessness points to a tangled web of interrelated personal problems and structural elements, all of which contribute to the problem. This means that the issue of homelessness is complex and 'cannot be reduced to proximate determinants - even less to a single determinant' (Avramov 1995:167).

To summarise this brief overview of homelessness, it is a long-standing feature in society that is still prevalent in many developed economies, despite increases in overall levels of prosperity. Due to cultural differences and multiple causation, a universally agreed definition of homelessness proves elusive. An examination of the underlying causes of homelessness indicates a constellation of contributory factors, including both personal and structural. dimensions. In turn, this demonstrates the overall complexity of the issue.

Homelessness in Ireland
In the Republic of Ireland, homelessness is a growing problem, with the largest concentration in its capital city, Dublin. In recent years, a number of initiatives have been taken at government level in response to this issue. Before these are considered, the background to the current situation is reviewed.

Historical Overview of Homelessness in Ireland
The first official assessment of homelessness in Ireland was carried out in 1925, shortly after the foundation of the new State, and indicated a figure of 3,257 homeless people (Report of the Commission on the Relief of the Sick and Destitute

Poor 1927). A measure of statutory neglect of the homeless issue can be gleaned from the fact that over 60 years had passed before the next official count took place in 1991. As noted in a recent report from the Department of the Environment (2000:26), 'it is apparent that there has been, and still is in some cases, a practice of leaving the response to homelessness to the voluntary agencies'. This was the reality for many years. It was a case of 'muddling through', with most of the provision of shelter being left to the voluntary organisations of the third sector, notably the Society of St. Vincent de Paul, the Legion of Mary and the Salvation Army, all of which still continue to provide services to-day. In the earlier years, these organisations tended to concentrate on service provision, rather than entering the wider debate on why people became homeless. Then, in 1969 a branch of the Simon Community was set up in Dublin (Coleman 1990). In addition to caring for those without a home, Simon also began a campaign to focus government attention on homelessness. As Coleman (1990:23) reports, 'caring and campaigning were the twin pillars on which Simon was built'. Beginning in the 1970s, a number of researchers such as Hart (1978) became interested in the work of Simon and the homeless issue. He and others, e.g., Kennedy (1985), the founder of Focus Point, set up to campaign for the homeless, placed homelessness on the academic research map. Yet, much remains to be done as there is still 'a dearth of empirical evidence on homelessness in Ireland' (Norris and Kearns 2000:79).

The concerted campaigning to obtain a statutory response to homelessness continued unabated. Eventually it elicited a political response with the passing of two significant pieces of legislation - the Housing Act 1988 and the Child Care Act 1991 - which, for the first time, outlined some degree of statutory responsibility towards the homeless. The Housing Act 1988 reflected a fundamental change on the part of the statutory authorities. Under Section 10 of this Act, the Department of the Environment can request local authorities to assess the scale of homelessness in their area. The first assessment in 1991 indicated that there were 2,751 homeless people in Ireland over the age of 18. (Section 5 of the Child Care Act 1991 placed statutory responsibility on the Health Boards to provide suitable accommodation for homeless children.) By 1999 the official figure for adult homelessness, which some commentators consider to be underestimate significantly (Norris and Kearns 2000), had escalated to over 5000, providing clear evidence that homelessness had increased from the level in the early 1990s.

Current Extent of Homelessness in Ireland

The official estimate of homelessness in 1999 identified 5,234 homeless people. It was on the basis of defining a homeless person as:

... [having] no accommodation available which, in the opinion of the authority, he, together with any other person who normally resides with him or who might

reasonably be expected to reside with him, can reasonably occupy or remain in occupation of, or

... living in a hospital, county home, night shelter or other such institution, and is so living because he has no accommodation of the kind referred to in paragraph (a)

(Department of the Environment, 2000:8).

Almost 50% of the total homeless in 1999 were adult males (2593/49.6%), while females accounted for 26.7% (1399) and dependent children numbered 1242 (23.8%). These official figures indicate a definite male predominance among those who are homeless. However, as the definition used does not include women and children who are no longer in a family home but are moving between friends and relatives, the preponderance of males among the homelessness may not be as high as these official statistics indicate.

Regarding location, almost 70% (3640) of the homeless people counted were in the Dublin area, indicating that the problem is at its most acute in the capital city. Four other cities - Cork, Galway, Limerick and Waterford - accounted for a further 13% of the overall figure, showing that homelessness is mainly an urban phenomenon.

Homelessness: Contributory Factors

A recent report from the Dublin Simon Community (2001) provides a good analysis of the main factors that contribute to people becoming homeless. It identifies structural factors such as poverty and a shortage of housing, together with personal difficulties, including alcohol addiction (44%), mental illness (25%), drug addiction (12%) and other life events such as imprisonment. A slightly earlier review by The Society of St. Vincent de Paul (1999:15) is in broad agreement with this mix of personal and structural factors, noting that 'the causes of homelessness are increasingly complex'.

With regard to housing, the owner-occupier section dominates the market, now accounting for about 80% of permanent private households, while the local authority share has declined to just under 10% and private rented accommodation accounts for only 8% (O'Sullivan, 1997). The advent of the Celtic Tiger economy has caused house prices to escalate sharply and has driven up rental costs (Holland, 2001). These trends have considerable implications for those who are homeless, as they cannot afford either to buy a house or pay high rent.

De-institutionalisation is another factor which can contribute to homelessness, particularly in relation to the mentally ill. In the early 1960s, there were 26,000 patients in institutions for the mentally ill in Ireland. Then, with the advent of the concept of community care, patients were discharged to the community, with the result that, by 1992, only 6,000 remained in psychiatric units (Report of the

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Inspector of Mental Hospitals for the year ending 31st December 1992 (1995). However, due to insufficient provision of sheltered accommodation and professional care, many of those who were discharged ended up homeless. The official national figure of psychiatric patients who are homeless is now 1,500 (Redlich, 2001), highlighting their vulnerability when returned to the community. This situation shows how government policy in one area (closure of mental institutions) can impact negatively on another area (homelessness) and indicates the need for a more holistic approach to policy making. Overall, it is clear that 'the dynamics of homelessness involve a complex interrelationship of social and economic factors' (Department of the Environment, 2000:17).

Ireland: Responses to Homelessness

Concern about the escalating problem of homelessness in the mid 1990s led to a number of initiatives being taken. In Dublin, where the need is most acute, the Homeless Initiative (HI) was set up in 1996 in order to improve co-ordination and delivery of services to homeless people. It was funded jointly by the Eastern Health Board and Dublin Corporation. Noting that existing services were fragmented and uncoordinated, one of the key strategies adopted by the HI was to build a strong partnership with voluntary agencies involved in service provision for the homeless. Recently the HI has been replaced by the Homeless Agency which has published a three-year action plan for homelessness in Dublin 2001-2003 (Homeless Agency, 2001). This plan is ambitious, with a vision of eliminating long-term homelessness by 2010. There are two guiding principles: (i) having a continuum of care for the homeless by having an integrated delivery system for services and (ii) adopting a partnership approach with other organisations providing services for the homeless.

Another major initiative resulted in the publication by the government of Homelessness - an integrated strategy (Department of the Environment, 2000) which adopts a national perspective on homelessness. A cross-departmental team, representing seven government departments, was given the remit to develop an integrated response to the issues which affect homeless people, incorporating all matters relating to homelessness including accommodation, health and welfare, education and preventative measures. A recurring theme in many of the submissions received by this team from voluntary organizations concerned the lack of a synchronised framework that brings together all of what is needed in a coordinated way . . . a failure by policy makers to make the connection between homelessness and the wider issues of social policy, poverty and social exclusion (Department of the Environment, 2000: 22)

Also, nearly all the voluntary bodies highlighted the inadequacy and uneven pattern of funding for service provision (see Hayes, 1996:1997).

Detailed proposals, which address the perceived shortcomings in the present operation of services, are presented in the strategy document. They include:

> Clarification of statutory responsibilities, with local authorities in each area providing accommodation and health boards covering in-house care needs;

> The establishment of a homeless forum in each county, with representation from both statutory and voluntary bodies;

> Improvements in funding arrangements, with commitment over a three-year period;

> Better provisions in the areas of health, education and training for homeless people.

Cumulatively, these provisions, if implemented, should ensure substantial improvements in the services made available to the homeless in each area.

In addition to the provision of services for those who are homeless at present, it is recognised that there is a need to implement strategies which focus on preventing homelessness. A more recent report by the government addresses this requirement. Entitled Homeless Preventative Strategy (Government of Ireland, 2002), it focuses on patients leaving hospital and medical care, prisoners leaving custody and young people leaving care, and proposes measures to ensure that they do not become homeless.

Homelessness in Ireland: Discussion

It is clear that homelessness is a significant current social issue in Ireland, particularly in Dublin, its capital city. For many years, homelessness was a victim of official neglect at policy level, with voluntary organizations being left to bear most of the burden. In earlier years, many of these agencies focused on service provision. Then campaigning by newer voluntary organizations eventually succeeded in mobilising official action. In recent years, the government has acknowledged the severity and complexity of the problem, responding with proposals to address it.

The partnership approach now being adopted between voluntary and statutory bodies in addressing the problem of homelessness reflects the broad development of the partnership model in Ireland since 1987 (Roche 2000), in keeping with similar trends elsewhere in the EU (Gribben, Pinnington & Wilson, 2000). In 1993, the government established the National Economic and Social Forum (NESF) which broadened partnership participation to include groups representative of the voluntary sector.

Turning to the relationship between the State and the third sector (known in Ireland as the voluntary sector), in the past it has been characterised by a remoteness between the two groups (Hayes, 2002). However, the government now sees this sector as 'essential partners in economic and social development' (Government of Ireland, 2000:iii), marking a fundamental change in official attitudes to support for voluntary groups. For example, it accepts that current statutory funding practices for the sector are highly fragmented and aims to change to a system of single line funding. This broadly-based promise to improve funding arrangements should impact positively on funding for voluntary groups dealing with the homeless.

Homelessness in Victoria

Homelessness in Australia, and more specifically the state of Victoria, has been the subject of significant policy initiatives involving government and non-government organisations (NGOs) since the mid-1970s. More recently, the Victorian government has conducted a major review of homelessness services and policies, prompted by concerns about the efficacy of existing services and perceptions of a serious escalation of the problem. For instance, the most recent data available to the Victorian Homelessness Strategy showed that, in the year to June 1999, there was a 51% increase in requests for emergency accommodation.

Historical Overview of Homelessness in Victoria

Australia has a large and diverse third sector that dates from the time of European settlement just over 200 years ago. Charitable organizations, mainly church-based and philanthropic in outlook, emerged during the early days of colonial rule and, for many years, homelessness in Victoria remained the primary responsibility of the charities (IC,, 1995: 8-9). By the end of the nineteenth century, there were limited facilities for homeless people in Victoria. These included seven public benevolent asylums and various private philanthropic homes for adult homeless men and women and homeless youth, together with a small number of 'female refuges' set up to 'reclaim' women from 'evil recourses' (CSV, 1990:76). However, as services were insufficient to meet demand, some homeless people were 'housed' in prisons and in asylums.

Over time, prisons and psychiatric facilities came to be regarded as unsuitable places for those whose only 'crime' was to be homeless. Shelters for 'fallen women' also fell themselves by the wayside. But generic shelters run by religious organizations proved more durable. In 1945, the Victorian Government began to subsidise the establishment costs of new hostels (to be run by religious and charitable organizations) and built some hostels for younger people in the 1960s. The funding of women's refuges in the 1970s reflected the emerging feminist perspective of the time (CSV, 1990:76).

In 1974, major change came about when a reformist national government passed legislation with the intention of subsidising the construction and/or running of temporary accommodation centres for homeless people to be run by welfare and community-based organizations and local authorities. This new legislation marked the beginning of the national government's involvement in homelessness and 'signalled the first acknowledgement by government that people who were homeless had both the right to, and special needs for, assistance' (Barnes, 1996:54). In the mid-1980s, there were further initiatives at both national and state levels. In 1985, the Supported Accommodation Assistance Programme (SAAP) brought all Commonwealth crisis accommodation provisions under one programme, jointly funded by the Commonwealth and state governments. Currently, the Commonwealth Government funds 58% of the SAAP in Victoria, with the State Government funding the remaining 42%.

In Victoria, the introduction of service agreements in the mid 1980s had significant implications for community organizations, which, up to that point, had been funded by government on an historical or submission basis (O'Neill, 1997). The new funding arrangements, based on service quality and performance indicators, changed the relationship between the state and the NGOs. However, this moderate managerialist agenda was overtaken in 1992 with the election of a government that adhered to a far more radical, market-driven approach to managing public sector resources, seeking to achieve greater efficiencies in delivering public services (Alford and O'Neill, 1994).

Current Extent of the Problem
According to the census conducted by the Australian Bureau of Statistics (ABC) in 1996, (the most recent record), there were nearly 18,000 homeless persons in Victoria. Of these approximately 1,200 were defined as 'primary homeless' – that is to say, were without conventional accommodation and living on the streets. A further 12,000 were defined as 'secondary homeless' or moving between various forms of temporary shelter (such as friends, relatives, shelters, refuges, boarding houses etc). The remaining 4,800 were defined as 'tertiary homeless' or living permanently in single rooms in private boarding houses without their own bathroom, kitchen or security of tenure (VHSMAC, 2001:13).

The census indicated that the rate of homelessness in Victoria was highest in inner Melbourne where nearly 4,000 (or the equivalent of 173 persons per 10,000 population) were recorded as homeless. The figures were much lower in metropolitan Melbourne (28 per 10,000) and regional Victoria (47 per 10,000) (VHS , 2000:4). While the ABS figures are not regarded as definitive, they are the first reliable record of the homeless population in Victoria (Chamberlain and Johnson, 2000b:16).

Homelessness: Contributory Factors

A combination of structural and personal factors is understood to contribute to homelessness in Victoria. The direct causes of homelessness are usually linked to poverty, unemployment, health, social dislocation, domestic violence and conflicting social values (VHS, 2000:4).

However, homelessness in Victoria is unlikely to be attributable to a single cause or to structural factors alone. An inner Melbourne outreach service estimated that of the homeless persons it assisted, 77% had substance abuse problems, 32% had psychiatric problems, 33% had acquired brain injury, 27% had criminal offending behaviour and 55% had significant health problems. An estimated 98% had one or more of these serious problems (VHSMAC, 2001: 11).

Victoria: Responses to Homelessness

Homeless services in Victoria mainly fall into three categories: personal support, crisis and transitional accommodation, and housing assistance. The two main government initiatives in relation to homelessness are the SAAP and the Transitional Housing Management Programme (THM).

Supported Accommodation Assistance Programme (SAAP): This funds more than 300 services in more than 180 community and local government organisations across Victoria. Its overall aim is to provide transitional supported accommodation and related services in order to help people who are homeless to achieve the maximum possible degree of self reliance and independence.

SAAP funds services targeted at young people (15-24), single men, single women, families, women escaping domestic violence and various combinations of these groups. It uses five service delivery models. These are: crisis supported accommodation; transition support; homeless persons support centres; telephone information referral service and a variety of services to enhance the capacity of direct service providers (VHSMAC, 2001:11). This mix of service provision endorses the view that homelessness is not a homogeneous problem.

SAAP defines a person as homeless if:
... the only housing ... (including a conventional house or flat) ... to which the person has access:
damages, or is likely to damage the person's health; or
threatens the person's safety; or
marginalises the person through failing to provide access to:
adequate personal amenities
the economic and social support that a home normally affords; or

places the person in circumstances which threaten or adversely affect the adequacy, safety, security and affordability of that housing.

While critics argue that this subjectivist definition, 'lacks conceptual rigour ... [and] tends to exaggerate the numbers of the homeless population' (Chamberlain and Johnson, 2000a:11), it is the 'official' definition of homelessness in Victoria.

Transitional Housing Management Programme (THM): This programme, funded entirely by the Victorian Government, works in conjunction with SAAP to assist homeless people make the transition to long-term secure housing. It provides a range of housing assistance to households in crisis as a result of homelessness, assisting them to establish and/or maintain appropriate, secure and sustainable housing (KPMG, 2000: 27).

The Victorian Homelessness Strategy

The Victorian Government has recently concluded a major review of homelessness services and strategies. The final report of the Victorian Homelessness Strategy (VHS), Directions for Change (2002), prepared by representatives of the homeless sector, proposes a new approach to addressing homelessness, based on a vision of a strong, client-focused system. It advocates a whole of government approach, partnership with the third sector and prevention.

The report identifies five key objectives to underpin future policy directions in Victoria:

improving client focus and outcomes;

developing and maintaining an integrated and sustainable service system;

working across government and with the community to prevent homelessness;

increasing access, to and supply of, affordable housing;

supporting and driving change (VHS, 2002: np). It is intended that these strategic objectives should provide the overarching framework for change over the next two to three years, building stronger collaborative partnerships between homelessness services and the broader community and health sectors and with other areas of government.

Homelessness in Victoria: Discussion

In the past, services for homeless people in Victoria have tended to reflect 'the incremental and disjointed development of government programme arrangements, rather than a concerted attempt to make responses to fit client needs' (VHSMAC, 2001:36). With the VHS, the Government is now confident that it has a framework from which 'further innovation and increased capacity can be developed, leading to collaborative and holistic approaches to preventing and reducing homelessness' (VHS, 2002:116).

But some dark clouds still linger. Homelessness stems from a combination of broad economic and social conditions and personal factors. A State government in Australia has little control over or influence upon these matters. Thus, the VHS is very explicit about what it cannot be expected to achieve – such as increasing the supply of affordable housing and addressing the many broad structural factors contributing to homelessness (VHS, 2002:17). Despite all these caveats, there is real optimism that the Strategy will 'kick-start' the process of developing 'an improved homelessness sector' (VHS, 2002: 18).

Homelessness in Ireland and Australia - Comparative Analysis

On the surface, Australia and Ireland seem to have much in common. Both are prosperous economies with stable political systems and they have a long tradition of church-based third sector organisations working to address a range of social problems, including homelessness. However, there are points of difference in terms of how Ireland and Victoria have responded to the issue of homelessness, as well as emerging areas of convergence. These are now discussed.

Defining Homelessness

Much of the discussion regarding homelessness in Ireland and Australia reflects the wider debate in the literature on the difficulty of arriving at a universally accepted definition. This debate is of more than just theoretical importance – it defines the extent of the problem and how it should be addressed.

The definition of homelessness adopted by the Department of the Environment in Ireland is narrower, when compared with the broader definition used in Victoria. Thus, while official figures might suggest that homelessness is a significantly greater problem in Victoria, the more literal definition adopted in Ireland would exclude many defined as homeless in Victoria, particularly those in the tertiary category of the Australian definition. In turn, this definitional difference is reflected in the variation in responses to homelessness in each jurisdiction. At a more general level, it endorses the need for caution in making comparisons on the extent of homelessness in different jurisdictions.

Factors Contributing to Homelessness

In line with findings in the literature reviewed earlier, a combination of structural and personal factors have been identified as contributing to the incidence of homelessness in Ireland and Victoria. In both societies it is understood that the causes of homelessness are diverse and interrelated. Broad economic and social factors, together with personal factors, are all cited as contributory causes of homelessness in Ireland and Victoria, with rising housing costs and de-institutionalisation being specifically mentioned in both jurisdictions.

The findings support the view that homelessness is predominantly an urban problem, as current figures indicate that the capital cities of Dublin and Melbourne have approximately 70% of the respective homeless populations in Ireland and Victoria.

Strategies to Address Homelessness

Historically, in both jurisdictions, there was a heavy reliance on third sector organizations to deal with the problem of homelessness. This resulted in fragmented and uncoordinated services being provided. In recent years, governments in both Ireland and Victoria have recognised these shortcomings and have responded by developing broadly based 'action plans' to bring about systemic change. The Homeless Agency has announced an ambitious three year action plan for homelessness in Dublin, while in Victoria, the final report of the Victorian Homelessness Strategy incorporates an action plan to trial new ways of responding to homelessness and explore the potential of 'joined up' government approaches.

Roles and Responsibilities of the State and the Third Sector

Differences in the role of the state in addressing homelessness in Ireland and Victoria are compounded by the different structures of government that apply. In Ireland, a unitary system of government prevails, whereas Victoria is one of six states in Australia's federal system of government, which presents infinite scope for intergovernmental tension. The history of government intervention in homelessness in Victoria provides ample proof of this. A more systematic approach only began to emerge when a reformist nationalist government used its substantial financial powers to intervene in homelessness policy. These developments in Australia contrast with those in Ireland where the initial impetus for change in the role of government came from the third sector.

Despite differences in the structures of government, there is convergence between Ireland and Australia in terms of the relationship between government and the third sector. In both jurisdictions there has been considerable movement towards the adoption of partnership models, consistent with international trends in the relationship between government and civil society (Gribben et al, 2000). In Victoria, this comes after efforts to place the funding relationship with NGOs on

a more contractual basis ultimately proved problematic. The shift to a new role for government has also been accompanied in both Ireland and Victoria by a realisation that past efforts to ameliorate homelessness have been hindered by fragmented policies and that a 'whole of government' approach is now essential.

Homelessness: Towards a Holistic Paradigm

The evidence from Ireland and Victoria, Australia indicates that:

Homelessness is a growing problem in both areas;

It has both personal and structural dimensions;

Past practice of relying on the third sector to deal with the problem proved inadequate;

The complex web of macro and micro causal factors gives rise to the need for an overarching holistic statutory response to its resolution;

A partnership model needs to be developed between the government and the third sector service providers in order to address fragmentation in existing services;

Broader socio-economic policies need to be reviewed regarding their impact on homelessness;

Preventative strategies need to be put in place to ensure that those who are vulnerable do not fall into the trap of homelessness in the future.

The broad parameters of this approach are set out in Figure 1 below.

Figure 1: Homelessness: an outline holistic model of resolution
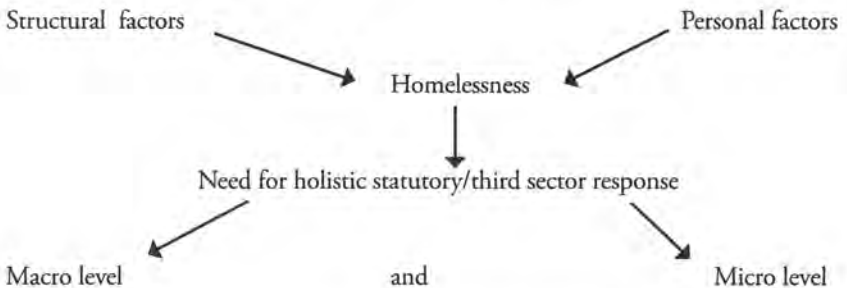
There is ample evidence to suggest that the earlier polarisation in the literature between the external structuralist perspective on homelessness and the personal pathology perspective now seems over simplistic. This points to the need for a more holistic paradigm, which incorporates both elements in the debate. A systematic approach is required which recognises and takes on board the interconnectedness between the macro and the micro factors, leading to an integrated approach to addressing the problem of homelessness. While voluntary agencies have shown their ability 'to be sensitively attuned to specific needs in a manner that evades the wide embrace of the

state' (Hayes, 1996: 3), they are 'intrinsically particularistic and selective in contrast to the more universal scope of governmental agencies' (Kramer, 1987: 250). This characteristic explains how homeless provision by third sector organizations, with the focus on service provision, resulted in an overall fragmentation of services in earlier times.

More recent developments at statutory level, both in Ireland and in Australia, reflect the need for an over-arching strategy in response to homelessness, rather than tacking the problem on a piece-meal basis with a heavy reliance on third-sector provision of services. There is now a realisation on the statutory side of the need to work in partnership with third sector organizations, learning from their long standing expertise in service provision, in addition to taking action at statutory level on the broader structural problems impacting on homelessness. However, Thompson and Strickland (1992: 47) remind us that 'we strategise beautifully, we implement pathetically'. Therefore it remains to be seen how these strategies translate into practice in the years ahead.

Summary and Conclusions

This study has presented an exploration of homelessness in two geographically distant but historically linked locations - Ireland and Victoria, Australia - with a view to examining the incidence of homelessness in each jurisdiction, together with approaches towards the resolution of the problem. The research is set in the wider context of an increase in the incidence of homelessness in many advanced economies and the development of policy measures in response. For instance, in the European Union, the Federation of National Organizations working with the Homeless (FEANTSA) has established a multi-country research programme to inform the development of homeless strategies across Europe. In the US, strategies have included large budget expenditures to address the problem, largely within a welfare orientation aimed at reducing the level of homelessness.

Results from this research show that homelessness is a growing problem in both Ireland and Victoria. Despite being far apart geographically, there are significant similarities in the approaches to homelessness in both locations. In the past, third sector organizations carried most of the burden of service provision for the homeless, resulting in a disjointed and fragmented response to the overall issue. More recently, statutory responses have been initiated in both jurisdictions, which are aimed at achieving a more coordinated approach in responding to homelessness. As the Victorian Homelessness Strategy observes, 'there is a growing realisation, both across Australia and internationally, that social exclusion, and homelessness as one of its most severe manifestations, are complex social phenomena that are linked, at least in part, to structural, economic and social isolation' (VHSMAC, 2001: 3).

What the recent Irish and Victorian experiences in addressing homelessness have in common with those of the EU and the US is an acknowledgement that homelessness can no longer be dealt with in a fragmented fashion. It cannot be seen as the primary responsibility of the third sector. If homelessness is to be overcome, it must be addressed in a comprehensive manner that encompasses all relevant areas of government, working in partnership with third sector organizations engaged in service provision for the homeless. Consideration of macro and micro level causes of homelessness, together with prevention and remedial measures, must be factored into the overall response.

If this holistic approach, embracing both macro and micro factors, is adopted and implemented, it should auger well for a considerable alleviation of the problem of homelessness in the years ahead.

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