

Positioning Paper

The Development of Prevention and Early Intervention Services for Homeless Youth: Intervening Successfully

authored by

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EXECUTIVE SUMMARY

Since the middle 1990s there has been an explicit turn in youth policy towards building an early intervention and prevention capacity in schools to support homeless teenagers and young people at risk. This has occurred in all states and territories, with broad support from people across the political spectrum. This research project examines the 'causes' of youth homelessness, and attempts to identify the best early intervention and prevention practices to assist young people and their families.

We carried out a literature search on 'early intervention' and 'prevention' using electronic databases. This revealed that early intervention and prevention strategies were first developed in the medical profession. The point that emerges from the literature is that it is widely thought that early intervention and prevention strategies are reliant upon a clear understanding of what causes specific social phenomenon. However, sociologists have often argued that it is not possible to establish causal relationships in the social sciences in the same way that it is possible to establish 'cause' in the natural sciences. This is because men and women are actively engaged in making their own lives and consciously reflect upon events and social processes. This paper argues that explanations of homelessness have to move between structural accounts and explanations that focus on agency. This is because structural factors affect the risk levels of young people from different social backgrounds. At the same time, homelessness is a 'lived experience' and we have to understand what happens when young people enter and exit from the homeless population.

Our core analytical model is that homelessness is best understood as a 'career' process and we demonstrate that this way of thinking has gained considerable support in recent years. The notion of homelessness as a process is important because the terms 'early intervention' and 'prevention' imply that we can identify young people who are at risk of becoming homeless and intervene effectively.

The literature review revealed that there is a lack of clarity surrounding the terms 'early intervention' and 'prevention'. This positioning paper argues that the relationship between prevention and early intervention can best be summarised as follows:

- *Prevention* relates to causal factors because of its focus on structural factors and risk levels.
- *Early intervention* relates to process because of its focus on the homeless career and its concern with 'temporality'.

In section 8 we discuss how this distinction between early intervention and prevention has a number of distinct advantages. First, it makes it easier to classify whether an activity or service has an early intervention or a preventative focus. This sort of clarity is important when planning services and thinking about target populations.

Second, it makes evaluation more reliable as it is easier to determine what exactly has worked 'for whom, when and why' (Little 1999). This in turn increases the capacity to establish 'best practice'.

Third it draws attention to the fact that it is easier to evaluate initiatives directed towards early intervention rather than prevention. This is because preventative strategies focus on structural factors that are thought to reduce risk levels. It is difficult to evaluate these initiatives because a mark of their success is that young people do not enter the homeless population.

In contrast, it is possible to enumerate the number of young people who are assisted by services focusing on early intervention. This is because these young people are at the beginning of the homeless career and it is possible to quantify both the number of services that are offered and the results of these interventions.

The research will draw on 1,200 case histories of homeless young people who were at school. The case histories were collected from school welfare staff at the time of the

second national census of homeless school students in August 2001. They provide detailed information on homeless 'pathways' in different family types. The case histories also contain information on why some young people are able to exit from homeless and patterns of good welfare practice in schools. These insights will be checked when we make field visits to 40 schools to gather additional information on good practice interventions. The sample will be drawn purposively, so that we visit schools across the country where we believe that there are good welfare practices. There are important initiatives in Victoria, New South Wales, Tasmania and Queensland. The researchers will also visit a small number of schools in Queensland and Western Australia.

In the literature it is often assumed that it is 'cheaper and more efficient' (Freeman 1999: 235) to intervene as early as possible or to focus on prevention. Early intervention is said to hold out the promise of 'avoiding or reducing the significant costs associated with homelessness' (Lindblom 1997). As research uncovers more about the process of becoming homeless, then it may be possible to target early intervention strategies more effectively. Whether they can deliver the supposed cost benefits to the community remains to be seen. However, if early intervention can assist young people to remain in stable and supportive environments then there is a moral justification for supporting these initiatives.

1 INTRODUCTION

Homelessness is an extensive, complex process. We need very different kinds of interventions to deal with the diverse aspects of the problem (Wolch, Dear and Akita, 1998: 450)

In the 1980s the emergence of visibly homeless young people on city streets created widespread concern. At the same time, services working with marginalised and homeless people began to advocate vigorously for more resources. However, it was the publication of the (Human Rights and Equal Opportunity Commission 1989) report *Our Homeless Children* (the 'Burdekin Report'), which brought youth homelessness to a broad community audience. The report received front-page headlines when it was released on 22 February 1989. 'Homeless children dying' greeted the readers of Melbourne's *Age* newspaper, while the *Sydney Morning Herald* leader was headlined 'Govts ignore our homeless young' (quoted in Fopp, 1992: 10)

There were many follow up articles in the next few months and some dramatic television documentaries. The Burdekin Report evoked a great deal of public commentary from politicians, welfare agencies, policy experts and other community leaders, as well as stirring up significant interest in the general community. With the public and media demanding explanations as to why so many young people were without stable accommodation, policy makers and researchers began to consider strategies that could provide the most effective response to the problem. The Commonwealth acted quickly. On budget day 1989, the Commonwealth announced a '\$100 Million Social Justice Package for Young Australians' (National Clearinghouse for Youth Studies 1989). This funding included increased accommodation for homeless teenagers, improvements in the Young Homeless Allowance, and a substantial number of pilot projects.

A distinguishing feature of the research, policy and advocacy responses that followed the Burdekin Report was the primary focus on 'street kids'. The Burdekin Report emphasised the plight of homeless young people and the deprivations they experience (HREOC 1989, Ch.5). It noted that some young people experience a short period of homelessness. However, the report contained many examples of teenagers who were chronically homeless. Similar themes were taken up in media coverage of the issue, and press articles were often accompanied by photographs of young people living in derelict buildings or sleeping in public places. The Burdekin Report reinforced the public perception that most homeless young people are street kids who have a chronic problem with homelessness.

It is important to provide services for young people who are 'chronically' homeless. However, it is useful to understand that homelessness is a process, and that young people who live primarily 'on the streets' are one segment of the homeless population. It is more common for homeless teenagers to move frequently from one form of temporary accommodation to another, although some will spend occasional nights sleeping rough (Murphy 1990; Crago 1991). It is also important to recognise that young people often have their first experience of homelessness while they are still at school – and they are rarely 'street kids'.

The issue of homeless school students came to public attention when (Mackenzie and Chamberlain 1995) reported findings from a national census of homeless school students, carried out in May 1994. They contacted all government and Catholic secondary schools across the country to ask them if they had any homeless students in their school during census week. Ninety-nine per cent of secondary schools completed a census return and schools identified 11,000 homeless students in census week (MacKenzie and Chamberlain 1995). The researchers estimated that 25,000 to 30,000 school students experience a period of homelessness each year. They argued that most young people have their first experience of homelessness while they are still at school and that schools are 'sites for early intervention'.

These findings were noted by the (House of Representatives 1995) *Report on Aspects of Youth Homelessness* (the Morris Report) which stated that early intervention is 'probably the one area of public policy which could deliver to the community the greatest returns in terms of increased social cohesion through the reduction in the levels of family breakdown and long term welfare dependency' (House of Representatives 1995: 360). The report gave particular attention to improved family support services and an early intervention strategy in schools. Governments have continued to provide services for the traditional groups in the homeless population, but since 1995 there has been an explicit turn in youth policy towards building an early intervention and prevention capacity in schools and local communities.

This paper begins by articulating the rationale for early intervention. Then it outlines various Commonwealth and State initiatives directed towards early intervention and prevention in recent times. After that, we explain how we carried out a literature review using electronic databases. Then we outline how key findings from the literature will inform our research.

2 RATIONALE FOR EARLY INTERVENTION

The emphasis on early intervention as a social policy approach is generally explained in one of two ways. For the political right, early intervention 'holds out the hope of reduced government intervention and expenditure' (Billis 1981; Kemshall, Parton, Walsh and Waterson 1997; Freeman 1999; Westthorp 2002). (Burke 1994) suggests that early intervention sits within a specific model of social management. Burke argues that in Australia a mixture of corporatist and economic rationalist models exists, and in the context of market driven policy decisions there is an emphasis on targeted welfare delivery, rather than of universally directed services (Burke 1994:14).

The second justification for early intervention belongs to what Billis (1981) terms the 'social conscience' tradition. The justification is a moral one in that the argument for early intervention and prevention policies is that they maximise opportunities for a full and participatory social life. Early intervention is positioned as a strategy that enables individuals to gain assistance before the situation becomes chronic and denies them access to those possibilities the community takes for granted. For the political left 'the concept is part of the progress towards a better society where the social ills of capitalism will be diminished, if not eliminated' (Billis, 1981: 367). There is a sense in which both 'sides' of politics endorse early intervention, albeit for different reasons.

3 RECENT INITIATIVES

One of the first initiatives taken by the Howard Government in 1996 was on youth homelessness, with an expressed focus on 'early intervention'. A Prime Ministerial Taskforce was set up to oversee a large pilot program:

The Youth Homelessness Pilot Programme signals the Government's intention to increase the service emphasis on early intervention strategies – that is, before the first key transition, a permanent break from home and family, is reached. This will ... assist family reconciliation through early intervention. (Prime Ministerial Youth Homeless Taskforce 1996)

The Taskforce funded 26 pilot projects at a cost of \$8 million over two years. There was an ongoing action research program, and an extensive evaluation. The Taskforce's report was launched in December 1998. It reported encouraging results from the pilot projects and led to the establishment of the *Reconnect Program*.

The *Reconnect Program* provides support for homeless teenagers and young people 'at risk'. The target was 100 services across Australia, and there was recurrent funding of \$22 million for four years. In 2002 there are 93 services around Australia with about 190 early intervention workers. This was a significant programmatic response.

There are several other important developments that have contributed to the national early intervention capacity. The Full Service Schools program was a one-off initiative of \$22m that accompanied the implementation of the Youth Allowance. The funds went to 65 clusters, with most projects involving several schools. This program funded a wide range of support activities, usually supporting young people at risk. The evaluation of this program concluded that early intervention had become widely embedded in many schools and communities.

Some states have also made significant investment in early intervention¹. In Victoria, a comprehensive student support policy is contained in the *Framework for Student Support in Victorian Government Schools*. This policy framework is probably the most comprehensive in Australia. Some \$34m is allocated to schools for 300 student welfare coordinators. They are trained teachers who also take on welfare responsibilities. Every secondary school has a student welfare coordinator, and larger schools have more than one, or several people on different campuses. In addition, \$43m is allocated for social workers, guidance officers and psychologists. Following the Victorian Task Force report on *Suicide Prevention* in 1997, the government increased spending for school counsellors by \$8m a year and initiated the School Focused Youth Service (SFYS) program. This program deployed 41 community workers to lead the development of improved coordination between schools and community agencies.

In New South Wales, school counsellors are trained psychologists. In 1996, there was a major financial investment to increase the number of school counsellors by about 200. In 2002, there are 790 school-based counsellors and guidance officers. Some counsellors work across two or three schools. There are also a number of schools that have part-time counsellors. In district offices, there are 84 home-school liaison officers, including 12 working with Aboriginal students. There are also 300 district support teachers who deal with behavioural issues and attendance. All 46 districts have a student welfare consultant who coordinates support and advises schools.

In Queensland, there are 165 guidance officers located in secondary schools. These people are school based and every medium to large secondary school has at least one guidance officer. In July 1997 a Youth Support Coordinator Initiative was established as a three-year pilot program to address issues of student homelessness and early school

¹ The information for the States and Territories was supplied by personnel from their Education Departments.

leaving. A budget of \$1.9m was approved in 1996/97 and allocated to 13 services around the state with a target of 35 participating schools. The evaluation concluded that:

The initiative has been successful and should be maintained as a key program for the prevention of, and early intervention in, early school leaving and student homelessness. (Department of Families Youth and Community Care (Qld) 1999)

The Youth Support Coordinators Initiative has subsequently been funded as an ongoing program.

In Tasmania, there has been a lot of activity in recent years to strengthen the welfare infrastructure in schools, especially in the eight senior secondary colleges. Tasmania has social workers and guidance officers located in schools but they are managed through district offices. There are 70 such positions and districts will often find ways to achieve a more generous provision than warranted under the official formula. Senior colleges organise their own welfare support and typically this is a small team of about three counsellors and support workers in each senior college.

South Australia's system for student support is similar in many ways to Victoria. It is strongly school based. There are 186.5 equivalent full-time student welfare coordinators who are in schools across the state and 135 generic welfare officers located in regional and district offices. There are two alternative schools for at risk students, and 32 personnel supporting alternative pathways for students under 15 years of age, who are having difficulty in mainstream schools

Western Australia has 166 welfare officers but they are located in district offices following a restructure in 1998 which moved these staff from school based locations. They move between different schools, as needed. All schools are responsible for deciding the profile of student support staff. A senior high school with 500 or more students will typically have: a school nurse who spends a fraction (0.3) of her time in feeder primary schools; a psychologist; a school-based police officer; and, sometimes, a part-time chaplain. Smaller schools have less resources.

The ACT has high schools and senior colleges, similar to Tasmania. High schools typically have at least one full-time counsellor, while senior colleges have a welfare team. In the ACT, secondary schools are well resourced – probably better than in any other state.

Schools in the Northern Territory are well provided with welfare support in Darwin and other regional centres. There is a counselling position in every secondary school, a school nurse, a home-school liaison officer, and in many cases a community based police officer. However, there are many small schools in remote communities and they do not have these resources. The Northern Territory also has the biggest problem with homelessness (Chamberlain 1999), and school retention rates from Year 7/8 to Year 12 are lower in the Territory, compared with other states.

In summary, there has been an increase in early intervention capacity around the country, but overall how well various initiatives are working on the ground is unknown. This research will investigate which initiatives are effective and identify patterns of best practice.

4 METHOD

Our first task was a systematic literature search on 'early intervention' and 'prevention' using electronic databases. In total 37 databases were searched covering a range of areas (disciplines) including sociology, social work, social theory, medicine, psychology and criminal justice. The search included both overseas and Australian literature; it focused only on peer reviewed articles and was not time limited. Five search terms were originally identified. They were:

- Homeless(ness)
- Early Intervention
- Youth Homeless(ness)
- Adult Homeless(ness)
- Prevention

Using these terms an extensive body of literature was revealed. The bulk of this literature had little to do with the focus of this paper. In particular the term homeless(ness) drew up thousands of entries, as did the terms early intervention and prevention. Youth homelessness also produced a large number of entries, although the number of entries for the term adult homelessness was small. To refine the search, the five terms were then combined in a variety of ways – homeless(ness) and early intervention; homeless(ness) and prevention; etc. This reduced the number of entries, but also drew out articles where the terms appeared at some point in the main text, rather than necessarily being the substantive content of the article. A review of the abstracts of these articles was then undertaken, and this identified 25 articles with direct relevance. After the initial search three new terms were included to ensure that nothing had been missed. These were:

- Homeless(ness) At risk
- Homeless(ness) Career
- Homeless(ness) Patterns.

In combination with the original search terms, an additional thirteen (13) articles were located. Another element of the search included a thorough scan of the bibliographies of the selected articles. A final search for government reports and policies relating to early intervention and homelessness produced a large number of entries from 1986 onwards.

Much of the literature focuses on adults as well as youth. We made a decision to include studies on both groups. There are some conceptual and analytical issues where age is of little significance, but we also point to issues where it is important.

Our literature review begins by giving a brief history of the concepts of prevention and early intervention, drawing attention to how these discourses have often assumed that we can identify 'cause'. Then the paper outlines a framework for thinking about the causes of youth homelessness, bearing in mind that homeless people are actively engaged in 'making their own lives'. After that we clarify how key concepts will be operationalised in the research. Finally, the paper identifies key knowledge gaps in the literature.

5 HISTORY OF PREVENTION AND EARLY INTERVENTION

Early intervention and prevention were first developed in the medical profession. This is the discipline, according to Freeman (1999: 235), that makes the 'strongest claim to scientific status'. Medical practitioners developed a disease model of prevention with the aim of eliminating, isolating or immunizing people before the onset of disease. The disease model of prevention is conceptualised at three different levels or layers – primary, secondary and tertiary prevention (Wass 2000). Primary prevention is concerned with health risks and might include health education to encourage clients towards better health. Secondary prevention is about early treatment to minimise complications and tertiary prevention is concerned with rehabilitation. At each level distinct strategies are developed to reflect the progression of the disease through different stages. It is important to note that disease prevention strategies target the individual for change rather than the social or environmental conditions that underlie the condition.

The medical model of prevention was transposed to the social welfare arena first through disability, and then through other areas including criminal behaviour, child protection, family welfare and child care more generally. For instance this model was adapted by (Boddy 1986) to assist in the prevention of child abuse; (Carter 1993) adapted the model when discussing the prevention of youth homelessness; and (Wolfe and Jaffe 1999) use the 'primary, secondary and tertiary paradigm' to categorise a range of domestic violence preventative strategies.

The development of early intervention strategies is, however, uneven across the welfare sector. In some fields, such as child care, early intervention strategies are well developed. In October 1982, the United States Department of Education awarded a five-year contract to Utah State University to initiate a research program to evaluate the effects of different interventions for children with disabilities. The contract led to the establishment of the Early Intervention Research Institute (EIRI) - an interdisciplinary group of researchers funded by a variety of federal, state, and private grants to conduct research on early intervention. This included the collection of cost-effectiveness data, developing demonstration programs, provide technical assistance to practitioners, and disseminating information about these activities. Early intervention strategies are well developed in areas such as child care (Kemshall, et al. 1997: 214), but in other areas such as youth homelessness, early intervention strategies are at an embryonic stage.

In contrast, the concept of prevention has been embedded in welfare dialogue for a long time. Billis (1981) and (Hall 1976) both trace the emergence of the preventative concept in the UK back to the 1940's. Hall suggests that around this time there was a shift in welfare emphasis 'to prevent social ills rather than to merely treat the symptoms' (Hall 1976:10). In a theoretical paper discussing the concept of prevention Freeman (1999) argues that prevention is an artefact of modernity. The underlying premise of his argument is that 'prevention is built on scientific understandings of cause and effect and the possibility of prediction; on a capacity for controlled intervention by government in social life' (Freeman 1999: 233). Freeman's concern about the efficacy of early intervention and prevention as social policy responses is that they 'assume that ideas about causes can be translated from the natural to the social world' (Freeman 1999: 235). Billis (1981) and Little (1999) set out much the same argument. Thus, in the physical world prevention strategies can be devised for situations where there are 'single factor causes and effects' (Billis, 1981:370).

The point that emerges from the literature is that an event or phenomenon cannot be prevented unless 'unambiguous causal links can be demonstrated between the intervention strategies and the problem they were intended to eradicate' (Billis 1984, cited in Crane and Brannock 1996:14). However, in the next section we will see that this is far more problematic when it comes to explaining the 'causes' of social phenomena such as youth homelessness.

6 FRAMEWORK FOR THINKING ABOUT 'CAUSE'

Sociologists have often argued that it is not possible to establish causal relationships in the social sciences in the same way that it is possible to establish 'cause' in the natural sciences. This is because men and women are actively engaged in making their own lives and consciously reflect upon events and social processes. In a famous passage from *The Eighteenth Brumaire of Louis Bonaparte* Marx wrote that:

Men make their own history, but they do not make it just as they please; they do not make it under circumstances chosen by themselves, but under circumstances directly encountered, given and transmitted from the past (Marx 1969).

Marx was drawing attention to the fact that people make their own history, but there are constraints placed by social context and external structures. This is sometimes referred to as the debate about the relative importance of structure and agency. People are influenced by the social structures and cultural traditions of the society into which they are born, yet at the same time they are actively engaged in 'making their own history'.

The British sociologist Anthony (Giddens 1984) proposes the notion of 'structuration' as a way of understanding the relationship between agency and structure. Giddens suggests that while society does not create individual behaviour, nor do individuals simply create society. Rather, structure and agency are intimately related, and neither exists independently of the other. Giddens notion of structuration suggests that while structures make social action possible, it is social action that creates those structures. One important feature of Giddens approach is the emphasis on power as a two-way process. Even the most powerless, according to Giddens, have the capacity to exert some power, to make some choices and the capacity to resist. In this section we will argue that explanations of homelessness have to move between structural accounts and explanations that focus on agency. This is because structural factors affect the risk levels of young people from different social backgrounds. At the same time, homelessness is a 'lived experience' and we have to understand what happens when young people enter and exit the homeless population.

A number of authors (Fopp 1995; Neale 1997; (Blasi 1990; Shlay and Rossi 1992; Neil and Fopp 1993; Hallebone 1997; Avramov 1999) have pointed out that in the literature on homelessness, there has been a tendency for researchers to opt for either structural or individualistic explanations. While this oversimplifies the matter to a certain degree, these conceptual frameworks are not only 'historically relevant' (Neale 1997: 49), but also continue to exert influence in the contemporary policy and research dialogue relating to homelessness.

6.1 Structural and individualistic explanations

Structural explanations 'locate the reasons for homelessness beyond the individual, in wider social and economic factors' (Neale, 1997:49). This approach gives emphasis to macro level phenomenon such as the imbalance in the housing and employment markets (Weitzman, Knickman and Shinn 1990; Elliott and Krivo 1991; Fopp 1992; Shinn and Weitzman 1994; Shinn, Weitzman, Stojanovic and Knickman 1998). It suggests that the appropriate response to addressing homelessness 'requires intervention on a broad societal scale' (Neale, 1997:49). From a structural perspective the drivers of homelessness are the lack of affordable housing, and/or the shortage of reliable employment. The argument is that changing structural conditions give rise to new forms of disadvantage that increase the susceptibility of particular populations to homelessness.

The Burdekin Report (1989) was read by many as a predominantly structural account of youth homelessness. It drew particular attention to family poverty, youth unemployment and poor welfare services as the major causes of youth homelessness. It also demonstrated that young people are more at risk of becoming homeless if: they come from

indigenous families (Ch.12); if they have grown up in poor families (Ch.9); if they have been in the state care and protection system (Ch.10); and if they have arrived in Australia as unaccompanied refugees (Ch.13).

In contrast individual theories of homelessness emphasise agency. (Fopp 1995) has argued that in Australia media explanations of homelessness are often of this character. In populist versions of this approach, individuals are viewed as responsible for their situation because of various personal deficits, such as alcoholism, fecklessness and so forth. According to Fopp (1995) these approaches often appear to 'blame the victim'. (Neale 1997) argues that evidence of victim blaming can be found in 'the stereotypes and images of deviants, dossers, alcoholics, vagrants and tramps'. This approach was first developed by American sociologists such as Donald Bogue (1963), Howard (Bahr 1973), and Caplow, Bahr and Sternberg (1968) in relation to men who inhabited skid row. Their approach emphasised the individual characteristics that lead men to become 'estranged' or 'disaffiliated' from mainstream society. Disaffiliation was a product of various individual circumstances, but once disaffiliated and 'beyond the reach of organised society' (Piliavin, Sosin, Westerfelt and Matsueda 1993: 580), the likelihood of these men returning to conventional roles in society was limited.

Although interest in the work of Bahr and Caplow subsequently waned, their approach provided the theoretical foundation for a wide range of present day researchers. Contemporary agency theories of homelessness such as the 'Individual Deficit' model (Grigsby, Baumann, Gregorich and Roberts-Grey 1990; Westerfelt 1990; Piliavin, Sosin, Westerfelt and Matsueda 1993; Wong, Culhane and Kuhn 1997; Wright, Caspi, Moffitt and Silvia 1998) represent an extension of the original line of thinking established in the disaffiliation thesis. These days objective indicators of disaffiliation are preferred - such as marital and parental history, current and historical living arrangements, and the extent of contact with current family members – rather than the subjective measures used by Bahr and his colleagues. Nevertheless, this sort of approach to the study of homelessness is congruent with the ideology that casts homelessness in strong moral terms 'attributing homelessness to laziness, depravity, ... as well as to less disparaging conditions such as imbecility, high temper and heredity' (Piliavin et al 1993: 581).

6.2 Critique

Both structural and individualistic approaches are not convincing when it comes to identifying the causes of homelessness. Structural accounts, on the one hand, often emphasise that that either poverty or unemployment are the primary causes of homelessness, but they fail to explain why most poor people and most unemployed people do not become homeless. By ignoring personal vulnerabilities as an explanatory factor, structural frameworks struggle to explain why 'one person in an otherwise similar position is more likely to become homeless than another' (May, 2000:614). Structural theories which explain homelessness based solely on a persons structural positions generally fail to explain how these factors translate into homelessness. Consequently, they suffer from a certain degree of structural determinism (Fopp 1992). In May's words 'The specifics ... are largely unexplored' (May 2000: 614).

On the other hand approaches that seek to explain homelessness by individual pathologies (agency) ignore the structural context these pathologies occur in. They ignore, for instance, the impact of deinstitutionalisation, the impact of gentrification, welfare reform and changes in the labour market. Elliott and Krivo (1991) argue that an emphasis on the individual serves to divert attention away from structural factors and the interrelation of these structures with micro (individual) processes. By isolating the context in which these illnesses occur, individual explanations tend to present a 'truncated, decontextualised and over pathological picture of the homeless' (Snow, Anderson and Koegel 1994). The problem of homelessness is, consequently, depoliticised and returned to the realm of personal responsibility.

Moreover, these studies are not good at establishing the temporal order in which events occur. It is true that studies of the homeless population often reveal high levels of 'individual dysfunction' such as drug and alcohol abuse, mental health issues, and so forth (Blasi 1990; Sosin, Piliavan and Westerfelt 1990; Shlay and Rossi 1992; Baum and Burnes 1993; Snow *et al.* 1994; Burt 1999; Fitzgerald, Mack and Paula 2001). However, most of the studies are unable to determine whether these issues occurred before or after people became homeless. According to Piliavin *et al.* (1993: 578):

... despite this repeated documentation of high rates of behavioural health problems among adults, research has not systematically investigated whether these conditions are causally related to the onset of homelessness and to the duration of homeless careers. Consequently, assertions as to the conditions contributing to homelessness are virtually without systematic empirical support.

It is possible that for many people substance abuse and deteriorating mental health are a consequence of being homeless, rather than the reason why they became homeless in the first place. The inherent danger in these studies is captured by the methodological imperative that correlation does not equate with causation.

6.3 Alternative framework for thinking about cause

It was pointed out earlier that sociologists have argued that in order to establish 'causation' in the human sciences it is often necessary to think about structural factors and the role of human agency. This will be the approach in our research. The Burdekin Report (1989) also subscribed to this view, even though it was often interpreted as a predominantly structural account. In Chapter 8, the report began by suggesting that there are two ways of thinking about the issue. One approach focuses on the dynamics of what happens in families, such as relationship breakdowns, failures to handle interpersonal conflict, and so on. The other focuses on structural factors such as the large number of families in poverty, high levels of youth unemployment, housing policy and the lack of community services. The Burdekin Report was pointing to the fact that the risk levels are higher for young people from certain social backgrounds, but that welfare practitioners have to respond to the immediate issues that arise from family conflict.

Other researchers have also focussed on the relationship between agency and structure. (Weedon 1987) for instance argues that there is no single oppressive force causing homelessness. Her argument seeks to bridge the gap between structural and individualistic accounts by illuminating the structural context in which individuals make sense of their lives. This approach has been adopted by others in a variety of ways (Brandon 1980; Hutson and Liddiard 1994; Tomas and Dittmar 1995; May 2000). In summary, this attempt to integrate the two approaches rejects the notion that homelessness can simply and unproblematically be reduced to only structural or individual factors. Instead the theoretical framework is based on the proposition that it is the interrelation of agency and structure that causes 'some people, and not others, [to] become homeless in any given set of circumstances' (Neale, 1997: 57). This approach suggests that people become homeless because of personal inadequacies or failures for 'which they cannot be held entirely responsible' (Neale, 1997: 49).

In our view structural factors are important for explaining why youth homelessness increased between the 1970s and the present time. Chamberlain and MacKenzie (1998: Ch.11) point out that when young people left home because of family conflict in the 1960s they usually found a job. This was the era of the 'long boom' when the unemployment rate was no more than one per cent most of the time, and there were 'jobs for everyone' (Groeneweg 1972). Once homeless teenagers acquired an income, they moved into shared households or began boarding with other families. The decline of the youth labour market does not explain why young people become homeless in the first place, but it does explain why today's homeless teenagers often cannot return to secure accommodation.

Chamberlain and MacKenzie (1998: Ch.11) also point out that risk levels are much higher for young people who come from alternative family types (blended families, single parent households etc.), and that many more young people now grow up in alternative family types, compared with 30 years ago. Overall, then structural factors are important for explaining why youth homelessness increased between the 1970s and the present time. Structural factors also draw attention the fact that the risk levels are higher for young people from certain social backgrounds. However, it is not pre-determined what will happen when young people are in conflict with their families. Teenagers and parents can negotiate family conflict in different ways, and there are many possible outcomes. The risk levels are certainly higher for young people from certain social backgrounds, but the process of becoming homeless is always a lived experience.

7 HOMELESSNESS AS A PROCESS

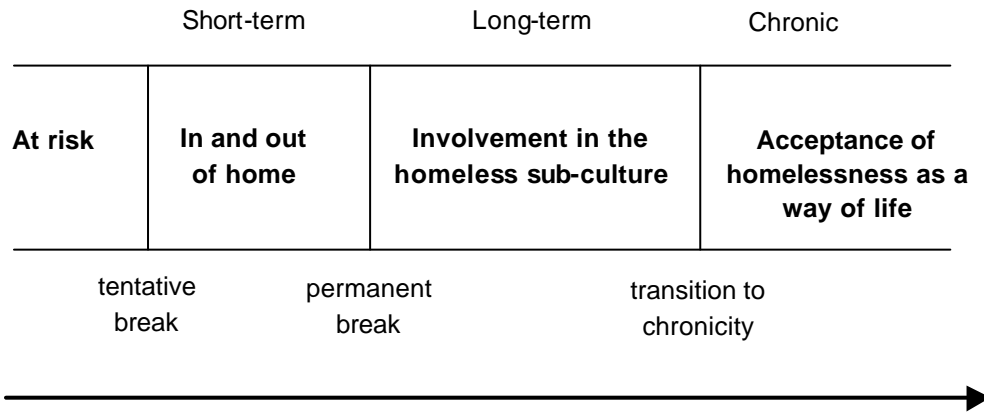
The notion of homelessness as a process has gained considerable support in recent years (Blasi 1990; Sosin *et al.* 1990; Chamberlain and Mackenzie 1992; Piliavin *et al.* 1993; Tomas and Dittmar 1995; Piliavin, Wright, Mare and Westerfelt 1996; Chamberlain and Mackenzie 1998; Wolch, Dear and Akita 1998; Dworsky and Piliavan 2000; May 2000; Auerswald and Eyre 2002; Chamberlain and Johnson 2002). The notion of homelessness as a process is particularly important because it is implicit in the term 'early intervention' that it 'is possible to observe in the lives of people the early manifestations of the phenomenon in the making, and respond in such a way that progression to experiencing the phenomenon is halted or impeded' (Crane and Brannock, 1996:5). Effective early intervention is predicated on the belief that homelessness is a process.

There is a growing body of research into the temporal characteristics of the homelessness population. In a study of female headed families living in poverty 'homelessness is modelled as a three-state process' (Wasson and Hill 1998) in which families move from their own residence, to doubling up with other families, and finally into homeless shelters. The authors point to early intervention as 'an important public policy goal', although they fail to specify how an early intervention strategy might actually work. In a similar vein (Wolch *et al.* 1998) propose a 'three stage . . . process of homelessness in the United States'. The initial focus on their model is on structural factors such as 'changes in the economy and in patterns of welfare provision'. Second, it draws attention to 'components of the supply side that contribute to the increase in homelessness'. The final stage of their model focuses on individuals. In a six month panel study of homeless individuals in Minneapolis, Michael Sosin and his colleagues (Sosin *et al.*, 1990: 171) concluded that 'the typical pattern of homelessness seems to be one of residential insecurity rather than constant homelessness over long periods of time'. Neil and Fopp (1993: 1) reflect a similar view when they note that 'homelessness ... may be a state people enter and exit intermittently' and that 'homelessness is not an event, but a process'. The notion that homelessness is a process led to development of what (Randall 1980) has termed the 'homeless career'.

In everyday language, the term 'career' is used to refer to an individual's progress along a particular occupational trajectory. However, sociologists use the term to refer to the transitional stages involved in the development of any form of biographical identity (Goffman 1961; Becker 1963). The notion of a 'homeless career' draws attention to the fact that people go through various stages before they develop a self-identity as a homeless person, and they may require different types of assistance depending on their location on the career trajectory.

Two models of the homeless career have been influential in Australia. Chamberlain and MacKenzie's (1998) model of the youth homeless career is an 'ideal typical' model, following the methodological precepts of the German sociologist, Max Weber (1864-1920). Ideal types are heuristic devices which are used to order reality, so that the core characteristics of a process (or social formation) can be seen more clearly. Chamberlain and MacKenzie's model of the homeless career is shown in Figure 1. The first phase is when young people become *at risk of homelessness*. The idea that young people are 'at risk' has been widely used in recent times, but it is a slippery concept which has been used in different ways and is difficult to operationalise (Dryfoos 1990, 1994; Batten and Russell 1995; Withers and Batten 1995).

Figure 1: Ideal typical model of the youth homeless career



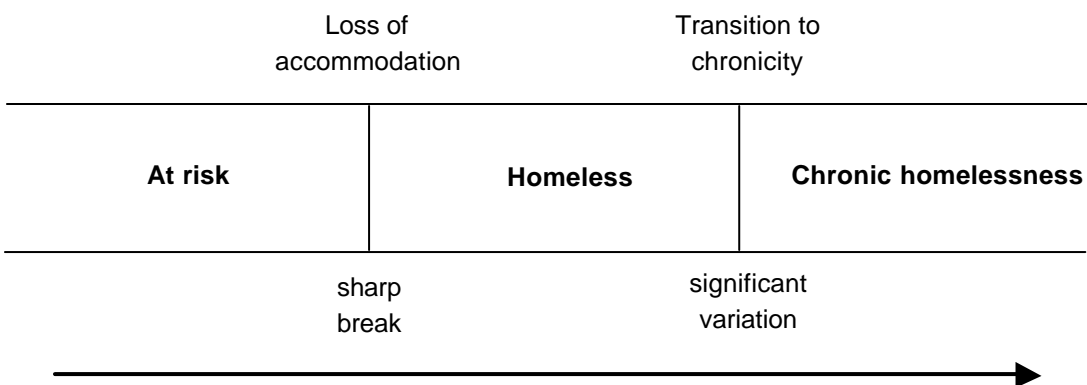
Source: Chamberlain and MacKenzie (1998: 71)

The first tangible indicator of homelessness is when young people make a *tentative break* from home and family. This is usually called ‘runaway’ behaviour, and most young people who run away stay temporarily with friends or relatives. In some cases, running away will be a once only experience and the young person will not do it again. In other cases, the underlying family problems are not resolved, and some young people begin to move in and out of home. This signals the second stage of the homeless career which is referred to as the *in and out stage*. Some young people move through the in and out stage quickly, whereas others remain in the phase for a sustained period of time.

The *permanent break* is the next biographical transition. It signifies that the young person no longer thinks of him or herself as belonging to the family unit, and that he or she is unlikely to return ‘home’ on a continuing basis. The permanent break is usually marked by a bitter dispute that is of major symbolic importance to the young person, after which affective bonds are permanently severed.

Some young people who make a permanent break are determined to remain at school. Other students drop out after a month or two. A third group leave school at about the same time as they make the permanent break. Students who drop out become involved in the homeless sub-culture. Some become immersed in the sub-culture quickly, although others remain on the margins. Those who become immersed in the sub-culture often make the *‘transition to chronicity’*, or chronic homelessness. These teenagers come to accept crime, substance abuse, drug dealing and prostitution as a normal part of everyday life (Hirst 1989; O’Connor 1989). Experienced youth workers know that it is difficult to help young people who have made the transition to chronicity, because they no longer express a strong disposition to change their lifestyle.

Figure 2: Ideal typical model of the adult homeless career



Source: Chamberlain and Johnson (2002: 29)

Chamberlain and Johnson (2002) have argued that the homeless career is different for adults, and this has implications for how we understand 'early intervention' when applied to adults. Their ideal typical model of the adult homeless career identifies three stages and two biographical transitions (Figure 2). The first stage is when adults become *at risk* of homelessness. This refers to people who are in housing crisis. It is normally obvious when adults are at risk of homelessness because their housing is under threat.

The first biographical transition is when adults lose their accommodation. This is qualitatively different from the teenage homeless career which is often marked by uncertainty as young person begins to move in and out of home. There is a sharp break when adults lose their accommodation and there is no ambiguity that they are homeless.

The next stage in the adult career is when people have become homeless. Most adults cling to the idea that this will be a temporary state of affairs, but in many cases their problems get worse. They are often in debt and do not have appropriate rental references – and many remain homeless for a sustained period of time.

The final biographical transformation is the *transition to chronicity*. This denotes the acceptance of homelessness as a 'way of life'. However, a significant minority of adults resist this transition, even when they have been homeless for a sustained period of time.

This discussion has drawn attention to the fact that early intervention is not a fixed notion. The meaning of 'early intervention' varies depending on the specific target group. The discussion confirms that by thinking of homelessness as a process various critical junctures can be identified and services targeted accordingly. Traditional thinking viewed homelessness as a sudden crisis. The notion of homelessness as a process has opened up new ways of thinking and new policy opportunities.

In the next section we define our key concepts. They are 'early intervention', 'prevention' and 'at risk'. Each is defined in relation to our models of the homeless career.

8 CLARIFICATION OF KEY CONCEPTS

Given the growing prominence of early intervention and prevention as a public policy response (Parton and Pugh 1999; Thomson Goodall and Associates Pty Ltd 1999), it might be expected that early intervention and prevention would be reasonably well defined. In fact, they are not. Part of the confusion as to what early intervention means stems from the interchangeable use of the term with prevention. For example, the second evaluation of SAAP supported 'a greater focus on preventative activity through a modest expansion of SAAP's early intervention activities' (Lindsay 1993: 3, in Crane and Brannock 1996: 14). As Crane and Brannock (1996: 14) put it, 'In the literature the terms prevention and early intervention in relation to youth homelessness are often used interchangeably, inconsistently and with little specificity'. To unpack this conceptual tangle, the first task is clarify what we mean by 'prevention', 'early intervention' and 'at risk' (Kemshall *et al.* 1997).

8.1 Prevention

In the literature on prevention, it is common to find frameworks that identify a number of different levels of prevention. For example, (Hargreaves and Hadlow 1995) define preventative approaches in the following way – 'a primary focus aimed at strategies which would prevent the emergence of the problem, a secondary focus which would address problems in their early stages, and a tertiary focus which would address mitigation of their most damaging effects'.

There are problems with Hargreaves and Hadlow's use of the term 'secondary prevention' to refer to 'addressing problems in their early stages', and with their use of the term 'tertiary prevention' to refer to mitigating the most damaging effects of homelessness – because in both cases assistance is being provided to people who are already homeless. This is not 'prevention'.

In the Australian literature, (Carter 1993) developed a preventative framework which underpinned a major research project by the Brotherhood of St Laurence on the 'Prevention of Youth Homelessness' (Charman, McClelland, Montague and Sully 1997). Carter identified 'primary', 'secondary', 'tertiary' and 'quaternary' prevention. In her account, *primary prevention* 'involves addressing the underlying political, economic and social causes which place young people at risk of homelessness'. *Secondary prevention* is about identifying young people in schools 'who are most at risk of homelessness' and 'strengthening their attachments by building up their protective factors and decreasing their risk factors'. *Tertiary prevention* 'involves ensuring that young people who experience short periods of homelessness do not become chronically homeless'. Finally, *quaternary prevention* provides services such as emergency accommodation, income benefits, and longer term housing options. The aim is 'to prevent permanent life long homelessness'.

There are also problems with Carter's use of 'tertiary prevention' and 'quaternary prevention' to refer to providing services to young people who are already homeless. 'Tertiary prevention' could be thought of as a form of early intervention, but one is not 'preventing' homelessness if young people are already in the homeless population.

According to (Crane and Brannock 1996) and Little (1999) it is essential to distinguish strategies which focus on early intervention from strategies which focus on prevention. Early intervention is about providing assistance to young people who are either in the early stages of the homeless career or perceptibly 'at risk'. In contrast, preventative strategies focus on:

the development and implementation of policies, practices and strategies which address structural or external factors contributing to youth homelessness, or which focus on factors which are both protective and situational. These responses are not targeted to specific individuals or families on the basis that they are considered vulnerable to homelessness. (Crane and Brannock 1996: 15)

Prevention strategies target activities towards the structural level. This is how 'prevention' will be used in this paper. Preventative strategies focus on providing services to those social groups where it is thought that young people are more at risk of becoming homeless, or providing services which facilitate protective factors for all young people against homelessness (education, employment, stable family life, involvement in the community etc.). As Carter puts it, 'we can conceive of protective factors as the other side of the coin to the risk factors' (quoted in Crane and Brannock 1996: 15). Risk factors include family conflict, social isolation, failure at school and so forth. Protective strategies might include counselling facilities for young people and their families, special programs for students with different educational needs, and so on. Preventative strategies are generally regarded as 'socially desirable in [their] own right' (Billis, 1981: 371).

8.2 Early intervention

We have just seen that preventative strategies are not targeted towards specific individuals or families on the basis that they are considered to be vulnerable to homelessness. In contrast, early intervention strategies focus on people who are at the earliest stages of the homeless career. However, we have just seen that the ideal typical model of the adult homeless career is somewhat different from the youth career (Figures 1 and 2).

In the case of adults, early intervention strategies have to focus on preventing adults from losing their accommodation. Once people lose their accommodation their problems usually get worse. In a study of 1,960 homeless households in Melbourne, Chamberlain and Johnson (2002) have shown that most households face practical issues such as what to do with their furniture, or where to send children to school. Others encounter new problems, such as how to keep the family unit together, or issues related to access to children. Other people try to return to conventional accommodation, but they face a range of practical problems. Most are usually in debt, so they do not have the financial resources to re-enter the private rental market, and there are long waiting lists for public housing (Chamberlain and Johnson 2002: 32-33). Others have been evicted and do not have appropriate references. In the case of adults, early intervention is about intervening when people are in housing crisis. It involves operationalising the concept of 'at risk'. We discuss this in the next section

In the case of young people, early intervention refers to measures taken as soon as possible after a young person has become homeless – at the beginning of the homeless career. As we have seen some young people move in and out of home for a sustained period of time and this is a crucial time for early intervention. Once young people make a permanent break from home then the opportunity for early intervention is over. However, schools still have a critical role to play because they can support young people who want to remain at school and make the transition to independent living. This is early intervention in a broader sense of the term and it is equally important.

However, Crane and Brannock have pointed out that in some cases early intervention can occur before young people make a tentative break from home and family. They say that early intervention should involve policies and strategies that allow schools to 'respond to a perceived difficulty or crisis which may be a precursor to a specific instance of homelessness' (Crane and Brannock 1996: 15). They are alluding to providing supports to young people who are perceptibly 'at risk' of homelessness. According to MacKenzie and Chamberlain (1995: 23) 'preventative strategies focus on young people who may be 'at risk', but who are not actually homeless'. However, they also say that the distinction between early intervention and prevention can become somewhat blurred, and that 'some young people ... are evidently 'at risk' even though they may not have run away' (Chamberlain and MacKenzie 1998: 116). In everyday welfare practice, early intervention includes young people who are 'at risk' as well as those who are actually homeless.

8.3 At risk

At risk is a popular if somewhat slippery concept. It is used to identify those at risk of suicide, those at risk of substance abuse, those at risk of re-offending and people at risk of homelessness, to name just a few 'risk' categories. However, the concept of risk has a long history. It first emerged in the context of gambling in the 18th century (Kemshall *et al.* 1997). Risk referred to the probability of an event happening, and the subsequent scale of the losses or gains secured. This led to the development of more complex mathematical theories of probability, which in turn became the 'basis for scientific knowledge, transforming the nature of evidence, of knowledge, of authority and logic and became the preserve of the expert' (Kemshall *et al.*, 1997: 222). The key element is that risk was initially a neutral construction, and became embedded in both science and manufacturing as a base for decision making. As Mary Douglas (Douglas 1986, 1992) points out, as notions of risk have been transferred into other, more politicised realms such as homelessness, the association with technical or scientific calculations of probability has diminished. This emphasises the problem of transferring scientific constructs into the social domain where epistemological doubts concerning the causes of homelessness render an early warning system problematic.

In this paper, we use 'risk' in three ways. First, it has been pointed out that risk levels are higher for young people from certain social backgrounds. Second, in everyday welfare practice, early intervention includes young people who are 'at risk' as well as those who are actually homeless. Third, in the case of adults, early intervention strategies require the identification of households who are 'at risk', because once adults lose their accommodation their problems usually get worse. People in housing crisis often present to services seeking assistance (Chamberlain and Johnson 2002).

An important issue in the literature concerns the identification of young people who might be at risk. Freeman (1989:235) notes that many intervention strategies 'seek to apply to individuals an understanding of cause and effect which can only be established at the level of the group'. This means strategies targeting people at risk tend to be broad (i.e. focusing on groups), which diminishes their efficacy in terms of assisting at risk individuals. At a group level, the identification of gender, race, age or household type as risk categories is problematic. By labelling some groups as vulnerable there is the problem of diverting attention away from why people are at risk. According to (Dwyer and Wyn 2001) risk can be a dangerous label, in that it individualises the problem. Billis expresses similar concerns when he notes that the use of at risk as a framing concept can lead to 'an assumptive leap from associating particular problems with some conditions to explaining these problems as caused by these conditions' (Billis, 1981:372). It is in this context that (Wyn and White 1998) claim that risk is part of a framework that is based on 'a personal deficit model, and thus the continued individualization of what are social problems'.

While identifying risk factors can mistakenly lead to the view that these problems are the causes of homelessness, there are three other substantive concerns with the concept. For (Bessant 2000) risk based research relies upon normative assumptions about 'the social and economic dependence of young people'. The 'at risk' project, according to Bessant (2000: 41) has largely replaced classifications like 'delinquency' and 'maladjustment' that were central to the sociology of deviance. The sociology of risk, according to Bessant (2000: 32) 'has become a new way to frame old problems and preserve old projects'. Risk is part of an empirical project that represents the 'assured voice of modern social science'. In so far as risk is a sociological category Bessant (2000: 35-38) argues that there is no real empirical or objective basis for identifying a population of young people who are at risk. Furthermore Bessant claims risk based research is the domain of the expert. It authorises the researcher to speak as the expert on homeless youth at the same time and 'delegitimises young people as speakers and active subjects' (Bessant, 2000:41). Poole (2000) expresses similar concerns. In a review of Chamberlain and Mackenzie work on early intervention she expresses concern that the concept, no matter how it is dressed up,

is 'another means of control and surveillance of families and young people by middle class professionals' (Poole 2000).

However, it is important that these theoretical issues do not obscure the real dilemmas faced by some young people. Approaches critical of the concept of risk tend to 'romanticise young people and to criticise any approach which results in evidence that is any way unfavourable to young people or problematic' (Dwyer and Wyn 2001). The problems with the at risk concept does not mean it should be abandoned. Dwyer and Wyn (2001:150) tackle this issue directly when they pose the question of 'how do we take risk factors seriously without demonising those affected, but how do we avoid demonising them without belittling the difficulties they are trying to face'. Bessant fails to offer any alternative, and it is at the level of practice that this is most keenly felt. The concerns of Poole, Bessant, Billis and to a lesser extent Wyn and White bypass any mention of the practical benefits such categories make to policy makers and service providers who operate within a resource constrained environment. Critics of the concept of 'risk' ignore the personal, social and economic benefits of assisting young people before they become homeless.

9 IDENTIFICATION OF KNOWLEDGE GAPS

The literature search revealed that there has been little systematic research on the most effective strategies for early intervention and prevention. Our research will attempt to fill this gap and to provide detailed information on the 'causes' of youth homelessness. The findings will provide valuable information for policy makers in Commonwealth and State Government departments, as well as information for school welfare teams and other professional service providers. Most importantly, there will be information on strategies for family reconciliation, and strategies to support young people moving to independent living, with the important outcome of reducing welfare dependence.

The research will investigate why young people become homeless, through analysing 1,200 case histories of school students who were homeless in the weeks following the 2001 National Census of Population and Housing. The case histories were collected from school welfare staff across the country as part of the second national census of homeless school students in August 2001 (Chamberlain and Mackenzie 2002). This data has now been analysed, using a coding frame that identifies key themes in the case histories.

The literature review pointed out that it is not possible to establish 'causes' of youth homelessness in the same way that one can establish 'cause' in the natural sciences, but it is thought that the risk levels are significantly higher for young people from certain social backgrounds. Structural factors do not 'cause' homelessness, but they do affect risk levels. A preliminary analysis of the case histories indicates that young people from 'alternative family types' (blended families, single parent families etc.) are at greater risk of becoming homeless than young people from conventional nuclear families. The case histories also provide detailed information on 'pathways' in different family types. These findings will help us to interrogate critically our model of the youth homeless career, and to investigate whether there is more than one dominant career trajectory. We will investigate whether there are significant differences in the factors causing homelessness amongst Indigenous and non-Indigenous students.

The case histories also contain information on the reasons why some young people are able to exit from homelessness and patterns of good welfare practice in schools. These insights will be checked when we carry out interviews with school welfare staff. The research team will make field visits to 40 schools to gather additional information on good practice interventions. The sample will be drawn purposively so that we visit schools where we believe that there are good welfare practices. The schools have not been selected as yet, but there are some important initiatives in Victoria, New South Wales, Tasmania and Queensland, and the chief investigator will also visit a small number of schools in Queensland and Western Australia. If schools are selected in particularly distant locations, then telephone interviews may be used to economise on travel time.

The field visits will be used to investigate the following issues regarding early intervention, prevention and 'at risk':

1. What preventative strategies are currently used in schools and how do schools assess whether these are effective?
2. What strategies are used to facilitate early intervention and how do schools to identify young people who are homeless? Which strategies are most effective at facilitating family reconciliation?
3. To what extent do welfare staff operate with a notion of 'at risk', how are these students identified, and what procedures are put in place to assist them?
4. What strategies are used to support young people to live independently (if they are unable to return home)? What community supports are available? Do welfare staff consider this 'early intervention'?

Finally, the field visits will be used to cross check findings and factors uncovered during the analysis of the primary data.

10 CONCLUSION

This paper began by documenting how since the middle 1990s there has been an explicit turn in youth policy towards building an early intervention and prevention capacity in schools and local communities. This has occurred in all states and territories, with broad support from people across the political spectrum. For some people early intervention and prevention are seen to hold out the hope of reducing government expenditure on welfare in the longer term. For others, the justification belongs to what Billis (1981) calls the 'social conscience' tradition. This focuses on moral arguments about the rights of all people in the community to have adequate housing and other basic rights. We sympathise with some aspects of the 'social conscience' tradition, but we still think that it is necessary to investigate whether early intervention and prevention strategies are effective.

Our literature review revealed that early intervention and prevention strategies were first developed in the medical profession. The point that emerges from the literature is that it is widely thought that early intervention and prevention strategies are reliant upon a clear understanding of what causes specific social phenomenon. As Little (1999: 308) notes 'prevention and early intervention are more effective when they are designed in response to clear evidence about the likely causes'. However, sociologists have often argued that it is not possible to establish causal relationships in the social sciences in the same way that it is possible to establish 'cause' in the natural sciences. This is because men and women are actively engaged in making their own lives and consciously reflect upon events and social processes. We argued that explanations of homelessness have to move between structural accounts and explanations that focus on agency. This is because structural factors affect the risk levels of young people from different social backgrounds. At the same time, homelessness is a 'lived experience' and we have to understand what happens when young people enter and exit the homeless population.

We found that there are a number problems involved in the evaluation of early intervention and prevention strategies which are currently being tried around the country. At the most fundamental level, there is a lack of clarity surrounding the terms 'early intervention' and 'prevention'. Indeed, we pointed out that sometimes these concepts are used interchangeably. We think that the relationship between prevention and early intervention can best be summarised as follows:

- Prevention relates to causal factors because of its focus on structural variables and risk levels
- Early Intervention relates to process because of its focus on the homeless career and its concern with 'temporality'

This approach is not necessarily a characteristic of either the policy or research literature that we analysed. However, we think this approach has a number of distinct advantages.

First, it makes it easier to classify whether an activity or service has an early intervention or a preventative focus. This sort of clarity is important when planning services and thinking about target populations.

Second, it makes evaluation more reliable as is it easier to determine what exactly has worked 'for whom, when and why' (Little 1999). This in turn increases the capacity to establish 'best practice'.

Third it draws attention to the fact that it is easier to evaluate initiatives directed towards early intervention rather than prevention. This is because preventative strategies focus on structural factors that are thought to reduce risk levels. It is difficult to evaluate these initiatives because a mark of their success is that young people do not enter the homeless population. But how do you quantify this? The Brotherhood of St Laurence's carried out a major project on the prevention of youth homelessness in the early 1990s. However, the final report stated that it was 'well nigh impossible to quantify the extent to which the program had prevented youth homelessness' (Charman *et al* 1997: 113). In our view,

preventative strategies are worth attempting. However, it must be recognised that it is difficult to provide quantitative indicators of how well they work.

In contrast, it is possible to enumerate the number of young people who are assisted by services focusing on early intervention. This is because these young people are at the beginning of the homeless career and it is possible to quantify both the number of services that are offered and the results of these interventions. For example, the Commonwealth's Reconnect program provides support for homeless teenagers and young people at risk. There are currently 93 Reconnect services around Australia. In the first 18 months, just over 6,000 young people were assisted and about three-quarters (77 per cent) of these cases had been finalised. The program appears to have about a 75 per cent success rate (Reconnect Data Report 2001).

The assumption is generally made that it is 'cheaper and more efficient' (Freeman, 1999:235) to intervene as early as possible or to focus on prevention. Early intervention holds the promise of 'avoiding or reducing the significant costs associated with homelessness' (Lindblom 1997). Cost pressures on public policy make early intervention attractive (Billis, 1981: 368). In theory this means that in areas characterised by scarce resources, any savings can be redirected towards other areas of assistance. However, in practice, such benefits are not always apparent because 'outcomes are difficult to identify and attribute to specific intervention' (Parton and Pugh, 1999: 235). In a review of the cost effectiveness of a range of prevention programs Welsh (cited in Little 1999) found that some programs increased rather than decreased 'the burden on the public purse'. This should not be interpreted as an argument against early intervention and prevention, but his findings suggest the need to proceed cautiously and to have realistic expectations about what these sorts of programs can achieve (Little, 1999: 310).

One of the few attempts to evaluate the economic benefits of early intervention was undertaken by (Pinkney and Ewing 1997). Using data from the 1994 census of homeless school students (Mackenzie and Chamberlain, 1995), they attempted to determine the potential net benefits of school based early intervention, as well as the economic costs of homeless youth. The study has a number of limitations. The most obvious are the assumptions that underlie the costings, the application of conservative estimates, and the fact that their annual costings for criminal and health costs are based on old data. Furthermore, the study is quite complicated as it is broken down into 12 different outcome measures, each of which is difficult to quantify with any precision. It should be pointed out that these problems are not uncommon with cost benefit analyses. They simply highlight how problematic cost benefits analyses are when applied to complex social phenomenon. Nevertheless, Pinkney and Ewing (1997) conclude that an early intervention strategy aimed at keeping school student at school and out the homeless population would 'break even at a success rate of 21 per cent'.

One study that indicates the effectiveness of early intervention, but is not directly concerned with cost effectiveness, is by Chamberlain and Johnson (2002). Their study was based on 2,800 households presenting to a housing service in Melbourne over a 12 month period. At first contact, 34 per cent of the households were classified as 'at risk' and 64 per cent were homeless. They found that 83 per cent of at risk clients managed to maintain secure accommodation. In contrast, only 19 per cent of the homeless had exited from the population and 81 per cent remained homeless. They point out that their figures need to be treated with caution, but these findings 'point towards the interpretation that early intervention can be effective' (2002: 38)

Early intervention must be underpinned by the acceptance that homelessness is a temporal process. As research uncovers more about the process of becoming, remaining and exiting homelessness, then it may be possible to target early intervention and prevention strategies more effectively. Whether they can deliver the purported cost benefits to the community remains to be seen. However, if early intervention can assist young people to remain in stable and supportive environments then surely there is a strong moral justification to support early intervention initiatives.

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