## **GOVERNING HOMELESSNESS:**

The Discursive and Institutional Construction of Homelessness in Australia

Thesis submitted for the degree of Doctor of Philosophy Faculty of Arts and Social Sciences University of Technology, Sydney 2010

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**Certificate of Authorship and Originality** 

I certify that the work in this thesis has not previously been submitted for a degree nor

has it been submitted as part of requirements for a degree except as fully acknowledged

within the text.

I also certify that the thesis has been written by me. Any help that I have received in my

research work and the preparation of the thesis itself has been acknowledged. In

addition, I certify that all information sources and literature used are indicated in the

thesis.

Jane Bullen

May 2010

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### Acknowledgement

I would like to express my gratitude to my thesis supervisors (in chronological order): Eva Cox, Dr Peter Caldwell, Dr Catherine Robinson and Dr Virginia Watson whose advice, support, comment and encouragement have made it possible for me to undertake this research journey. My thesis started with a series of raw questions that arose from my work experiences related to homelessness policy and services, and the assistance and critique of my supervisors has enabled me to formulate my initial curiosity into this research project.

Many thanks go to all those that I have worked with in homelessness services: management, staff and people facing homelessness. It was as a result of our collaborative experiences and the obstacles we found in trying to respond to the devastating problems associated with homelessness that I originally decided to investigate why it seemed that 'the causes of homelessness had changed'. There are too many people who contributed to this inspiration for me to list individually, but in particular I would like to thank those I worked with at Medea, Inanna, the Domestic Violence Crisis Service, Stepping Out Housing Program and North East Housing Service, those from other services with whom we worked closely and those others with an involvement in homelessness research, policy and services with whom I discussed this project. I thank all those people from non-government organisations and government departments who I interviewed for this research. Interviewees gave their time generously and in the spirit of hoping to understand and improve homelessness policies and services.

I thank my friends and family in Sydney, Canberra, Central Tilba and Melbourne who not only put up with my preoccupation but maintained their support for me and, above and beyond the call of duty, continued to express an interest in my project! They also got me out of the house and away from the computer from time to time, thereby helping me to maintain sanity and perspective. I especially thank my dear Auntie Bobbie for her love, laughter and support. A very special acknowledgement is due to my mother, Anne,

whose social conscience must be somehow implicated in the genesis of this thesis, and whose death during its writing has left a great absence in my life.

Thanks are not enough for my partner Bette, whose faith that I could undertake this project has continued to inspire me. Together with Bib and Bub the red heelers, she has been so understanding of the thesis challenges, and has expressed her love and support in countless daily ways.

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### LIST OF ACRONYMS

**ACT** Assertive Community Treatment

**AFHO** Australian Federation of Homelessness Organisations

**AVO** Apprehended Violence Order

**CES** Commonwealth Employment Service

**COAG** Council of Australian Governments

**CPI** Consumer Price Index

**DOCS** Department of Community Services (NSW)

**DV Domestic violence** 

**HPAP** Homeless Persons Assistance Program

NAHA National Affordable Housing Agreement

NGO Non-government organisation

**SAAP** Supported Accommodation Assistance Program

**SGI** Super Guarantee Component

WESP Women's Emergency Services Program

YSS Youth Services Scheme

### **ABSTRACT**

This thesis analyses changes in the ways in which the phenomenon of 'homelessness' has been conceptualised in Australian policies, programs and services for homeless people since the early 1980s. My experience working in this area suggested to me that a fundamental shift had occurred, away from a policy understanding of the causes of homelessness as being produced by 'structural' social and economic factors such as poverty, lack of affordable housing and domestic violence, to one in which homelessness was now understood more as a result of 'individual' issues caused by problems or behaviours of homeless people themselves. This thesis asks: how and why had such changes taken place?

I show that, consistent with my experiences, conceptions of homelessness in policy and programs have indeed been understood in homelessness research and commentary in terms of, on the one hand, structuralist conceptions of the causes of homelessness, and on the other hand, explanations that rely on a methodological individualism, with a shift over the last 30 years *from* structuralist *to* methodologically individualist conceptions of homelessness. Attempts to reconcile these two explanations, for example by means of the policy concept of 'social exclusion', have generally failed in practice to move beyond this dichotomy.

I address the question by drawing on Foucault's work on 'governmentality' and examining both historical official statements about homelessness policies and programs and in depth interviews with people who have worked in the area. I show *how* policies and programs have a constructive role in shaping understandings of homelessness and of the situations of homeless people. In particular, I show *how* changes in homelessness policies and programs over the past thirty years involved not a retreat of the state as some commentators assert, but an extension and reconfiguration of political power 'beyond the state' through a diversity of service providers. These changes sought to replace the welfare state with an 'enabling' state or so-called 'advanced liberal governmentality' which characterised the causes of homelessness in terms of 'dependency'. Homelessness programs became focussed on techniques designed to produce a managed form of self-reliance - interlinking both freedom and constraint. The

policy conceptualisation of homelessness shifted towards 'individual' factors and away from 'structural' factors. The ambiguous nature of these techniques is reflected in evidence of both improvements and reductions in service delivery, including the exclusion from services of some 'high risk' homeless people who could or would not meet case management requirements.