Revolving or evolving doors: 
Women’s homeless pathways

Robyn Maree Martin
Bachelor of Social Work
Master of Social Science

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School of Global Urban and Social Studies
RMIT University
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DECLARATION

I certify that except where due acknowledgement has been made, the work is that of the author alone; the work has not been submitted previously, in whole or in part, to qualify for any other academic award; the content of the thesis is the result of work which has been carried out since the official commencement date of the approved research program, and ethics procedures and guidelines have been followed. Professional editorial assistance was provided by Dr Lesley O'Brien which focussed on language and consistency; conforming to standards for editing practice.

Robyn Martin

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ABSTRACT

This thesis has explored 35 women's lived experiences of homelessness in Perth, Western Australia. Detailed attention has been given to what led to the women entering homelessness, how they managed living homeless, and the factors that either facilitated a sustainable pathway out of homelessness, or left other women vulnerable to ongoing homeless experiences.

The project has relied on feminist informed frameworks, which were underpinned by critical post-modern social work theories and practices. Women aged between 18 and 67 years with at least one experience of homelessness in the previous 10 years contributed through in-depth interviews. A further 30 stakeholder participants shared their knowledge and ideas through in-depth interviews. These 30 stakeholders constituted service providers, policy influencers and policy makers.

The majority of women in the study experienced homelessness as a result of the behaviours and choices of other people they shared a relationship with. This led to the development and application of a relational category to the commonly applied concepts of structure and individual agency found in most homelessness research. Application of the relational category promoted an expanded and in-depth understanding of homelessness experiences and processes for the women who contributed to the study and women’s homelessness more broadly.

Six pathway types have been used to explore the different processes associated with a lived experience of homelessness. The six pathways reflect the age at which women first experienced homelessness and the reason why they entered into homelessness. These pathways include a youth category involving the first experience of homelessness before the age of 18. Youth pathways were applied to 21 women and are categorised as escape, eviction and ‘choice’. A further 14 women were defined as belonging to adult homeless pathways involving domestic and family violence and substance misuse. The sixth pathway type relates to the 17 women who transitioned from youth to adult homelessness.
The six pathway types represent significantly different experiences of entering homelessness, living homeless, and creating a sustainable pathway out of homelessness. All 11 women who entered homelessness as a result of escaping violence and abuse before the age of 18 transitioned to adult homelessness. The study found that escaping abuse at a young age created the conditions for a transition to adult homelessness. Transitioning to adult homelessness signalled the beginning of long-term iterative homelessness, problematic substance use patterns, mental illness, and engagement with homeless social networks. These homeless sub-cultural groups simultaneously provided a place to belong and learn about the practices associated with homelessness, while also exposing women to violence, abuse, re-traumatisation, and exploitation. Women who transitioned to adult homelessness were found to be least likely to have created a sustainable pathway out of homelessness.

Women who entered homelessness as adults on a domestic and family violence pathway were most likely to create a sustainable pathway out of homelessness. Leaving homelessness behind was supported by: stable housing; engaging in education, employment, and training; developing high-level awareness of personal safety; supportive personal and professional relationships; and recovering from the experiences of domestic and family violence and homelessness.

Analysis of the homelessness policy, program, and service delivery landscape shows that while new initiatives will assist some people experiencing homelessness, it is unlikely to register with women who experience homelessness for reasons other than domestic and family violence. This means that women who transitioned to adult homelessness after escaping or being evicted, and women who experienced homelessness due to substance misuse are likely to continue to experience revolving doors and repeatedly move in and out of homelessness. Most of these women have extensive histories of violence and abuse and it is proposed that trauma-informed responses while currently uncommon are necessary within the specialist homelessness service system.
CHAPTER ONE – INTRODUCTION

Why can’t there be a handbook that would assist women in these situations?
(Debbie)

In 1987, a friend suggested that some practical experience would help me make sense of the theoretical concepts I was encountering in my first year of University. Consequently, I approached a local women’s refuge, offering to volunteer and within a few months I was invited to take a paid position. The refuge was funded by the Supported Accommodation Assistance Program (SAAP), under the auspices of a local Church. The organisation also operated a financial counselling and emergency relief service, a low cost supermarket, and a single men’s homelessness accommodation service. The programs operated in Fremantle, Western Australia and were loosely based on Christian principles of helping others deemed ‘less fortunate’. Service delivery models, principles, policies, and procedures were informal and undocumented. Workers in the service were usually recruited through Church networks and few had human service qualifications.

It is fair to say that this introduction to social work was a baptism of fire for me as an inexperienced and relatively young worker. My understanding of the issues facing the women and my capacity to respond effectively were incomplete, yet my commitment, motivation, curiosity, and openness to difference sustained me and compensated (to a degree) for my lack of experience and knowledge. Despite my inexperience, I was struck by a question my colleagues and some of the service users were asking about why some women would get out and stay out of homelessness and others cycled in and out of homelessness. This planted a seed for me that was to continue to grow over the next 25 years of my social work practice in domestic and family violence, community and Indigenous mental health, substance misuse, child protection, and women's re-entry to community after prison.

My approach to social work practice has always been underpinned by my motivation to transform unjust structural, political, individual, and community contexts. I am proud to be a social worker and to take a politicised approach to my practice. My roles have traversed direct service worker through to executive management and
academic positions. Within all of my social work roles activism, collaboration, and sector involvement have been central. Sitting alongside my professional identities is my personal biography of growing up in a political family where conversations about oppression, racism, and unionism were common and frequent. My family’s political orientation fundamentally shaped my view of the world and enabled a deep sense of obligation to others who have less privilege and opportunity.

Throughout these years, my feminist informed practice has been underpinned by relationships and connections with people experiencing homelessness, marginalisation, and disadvantage. I consider these people my teachers and experts who are "qualified by experience" (L. Mahboub, Consumer Academic, personal communication, 2008). As with many of the women in this study, my biography is marked by substance misuse, domestic and family violence, sexual assault, grief, and disconnection. Yet, because of the love, encouragement, challenge, and material support provided by my life partner, family and friends I have never encountered homelessness directly. In other words, I share some of the experiences of women in this study, yet I have had privileges, opportunities, and resources that are lacking in the lives of most women who experience homelessness. In this, I honour our similarities whilst genuinely acknowledging our biographical differences.

Research focus

The questions that eventually guided this research grew from my direct service delivery practice, sector involvement, activism, and critical reflexivity about women who experience homelessness. The research questions emerged as a result of my consultations and discussions with key stakeholders in the homelessness area (policy makers, policy influencers, researchers, and service providers) as well as my reflections about women I have worked with throughout the years.

My memories of six women in particular constantly remind me about the challenges of homelessness, the gendered nature of women's homelessness, and the struggles involved in realising the dream of a better life. Three of these women are
Indigenous. I have not had ongoing contact with any of the women, yet I continue to wonder how they fared and if they realised their dreams. These women's lives were punctuated by suffering, hardship, domestic and family violence, substance misuse, unattended trauma, racism (for the Indigenous women), discrimination, and gendered oppression. They presented as tough, particularly when trying to get their needs met, yet just underneath these flinty exteriors nested vulnerability, sensitivities, and unhealed trauma.

It became clear from my consultations and reflections that knowledge about what creates pathways into homelessness was growing, but empirically derived knowledge about pathways out of homelessness was limited, particularly in relation to women. This led me to develop a central research question of:

1) Why do some women experience long-term recurrent homelessness and others do not?

In order to fully explore and answer the main research question the following sub-questions were developed:

1.1. What factors create the conditions for women's homelessness?

1.2. What happens to women while homeless?

1.3. How do women get out of homelessness?

1.4. What are the practice and policy implications?

Additionally, I developed a set of research principles which mirror my approach to social work practice. These principles operationalised and informed the development of the research question and objectives, and underscored the methodological approach and strategies. The principles are:

a) A woman-centred approach, privileging the lived experiences and voices of women who experience homelessness.

b) Culturally inclusive, respectful, and sensitive approaches.

c) A commitment to relational research inquiry based on creating trusting, safe, and
supportive spaces for participants to discuss their experiences of, and views on, homelessness.

d) An inclusive, collaborative, and partnership approach which invited wide-ranging involvement in the project by women participants.

e) An open, non-evaluative stance towards service delivery, program, and policy practices.

f) Accountability and transparency to all research participants.

g) Constant critical reflexivity about the influence of my values, assumptions, experiences, and biography.

My social work practice is informed by a critical post-modern approach which emphasises the political nature of experience and aims to transform oppressive, discriminatory, and unjust circumstances, contexts, and experiences (Allan, 2009). Critical social work is practical in orientation and the research questions, objectives, and principles highlight the practice orientation of this project. To contextualise the project, I start by examining the contemporary Australian homelessness context.

The Australian homelessness context

During the period of the study (2005–2012) the Australian homelessness context was marked by significant change in legislative, policy, program, and service delivery direction. At the commencement of the study in 2005, the Supported Accommodation Assistance Program (SAAP) had been in existence for 20 years (Limbrick, 2006). This program was supported by the Supported Accommodation Assistance Act (1994) which framed policy and programmatic responses to homelessness within Australia. By 2008, SAAP services had become mostly crisis accommodation (with some innovative exceptions). Women across all age ranges and reasons for presentation are regular users of the specialist homelessness service system, comprising 62% of all SAAP clients during the 2008–2009 period (Australian Institute of Health and Welfare, 2010).

Enumerating homelessness outside of people accessing the specialist homelessness service system is challenging and contested, particularly as definitions dictate the type, range, and focus of enumeration, policy, and service delivery practices –
including who is excluded from official counts of homelessness (Watson & Austerberry, 1986). The cultural definition of homelessness (Chamberlain & MacKenzie, 1992) informs the Australian Bureau of Statistics’ Census collection on homelessness in Australia, yet issues such as people moving between different types of homelessness and newly emerging groups make it difficult to accurately enumerate homelessness (Chamberlain & MacKenzie, 2008; Reeve, Rionach, & Goudie, 2007).

Using data from the Australian Bureau of Statistics’ Census, SAAP National Data Collection, and National Census of Homeless School Students, Chamberlain and MacKenzie (2008, pp. viii & ix) found that 104,676 people were estimated to be homeless, of which women comprised 44%. This represented a 2% increase from the previous count in 2001. The majority (53%) of these women were found in specialist homelessness accommodation, followed by 48% who reported staying with friends or relatives. Chamberlain and MacKenzie (2008) note that 33% of the single adult homeless population were women, and of the 21,940 young people aged between 12 and 18 years, over half were young women.

Within Australian and international contexts, men are more likely to experience homelessness, yet it is argued that women’s homelessness is increasing in the United States of America, Canada, the European Union, and the United Kingdom (Averitt, 2003; Cramer & Carter, 2002; Jones, 1999; Novac, Brown, & Bourbonnais, 1996). These statistical discussions invite an examination of the contexts which leave women vulnerable to homelessness which I address in Chapter Two.

Key changes in the homelessness practice and policy sector commenced in 2008 in Australia with an acknowledgement that the number of people experiencing homelessness had not decreased in 20 years. This acknowledgement extended to identifying that few long-term housing options were available, and that bottlenecks existed in many SAAP crisis accommodation services despite service users being ready to move out or on. This situation meant that a substantial number of potential clients were being turned away due to limited vacancies in SAAP (Commonwealth of Australia, 2008b). These factors led to a rethink of the homelessness service delivery and policy systems starting with the newly appointed Prime Minister, Kevin Rudd asserting that the
level of homelessness in Australia was "unacceptable" (Commonwealth of Australia, 2008b, n.p.). A green paper titled "Which Way Home?" (Commonwealth of Australia, 2008b) was produced and it framed national consultations on key issues, concerns, and unanswered questions in the homelessness field.

Following this, a white paper titled "The Road Home: A National Approach to Reducing Homelessness" was produced which laid out a blueprint for a more efficient and responsive homelessness system, accompanied by a reduction in the number of people experiencing or at risk of homelessness (Commonwealth of Australia, 2008a). The strategic directions that underpin this policy framework include early intervention and prevention or "turning off the tap ... improving and expanding services ... breaking the cycle" (Commonwealth of Australia, 2008a, p. ix). Areas of focus include: stopping the potential for intergenerational homelessness; quality and coordinated service delivery; promoting the engagement of people experiencing homelessness in education, employment, and training; and specialist responses to particular groups such as young people, those who sleep rough, older people, families, and Indigenous Australians. Rupturing patterned homelessness is a focus of this thesis which mirrors these policy targets. This suggests the project’s focus is contemporary and the findings are potentially relevant for service delivery and policy activities.

An inability to secure appropriate and affordable housing contributes directly to recurrent and persistent homelessness and a key response has been to increase the supply of affordable housing to people experiencing homelessness and other low income groups. This is underpinned by intergovernmental agreements of the Council of Australian Governments (COAG) which led to the introduction of the National Affordable Housing Agreement (NAHA) on 1 January 2009. The NAHA is an overarching framework which replaced SAAP agreements and the Commonwealth State Housing Agreement, focussing on improved access to housing (with a specific focus on Indigenous people) and social inclusion (Council of Australian Governments, 2008a).

The three strategic directions of the new homelessness policy framework mentioned above are translated into expected outcomes, outputs, and performance indicators within the NAHA (Council of Australian Governments, 2008a). Sitting under
the NAHA are the National Partnership Agreement on Social Housing (NPASH) and National Partnership Agreement on Homelessness (NPAH). The NPAH seeks to reduce the number of people experiencing homelessness, decrease recurrent and persistent homelessness, improve social and economic participation, and promote quality service delivery (Council of Australian Governments, 2008b). These reforms have been accompanied by substantial increases in funding to expand social housing stock levels and support services to people experiencing, or at risk of homelessness (Commonwealth of Australia, 2009a).

The period in which this study was undertaken is also characterised by substantial global financial instability and in some regions, economic crisis. The Australian Government instigated a range of measures to counteract the impacts of what is known as the Global Financial Crisis, which included the National Partnership Agreement on Nation Building and Job Plan (Commonwealth of Australia, 2009a). This Agreement was conceptualised as part of a stimulus package to avoid economic recession in Australia. Similarly, the National Rental Affordability Scheme (NRAS) targeted job creation, stimulation of the faltering construction industry, and provision of affordable housing for low income households (Commonwealth of Australia). The scheme offered taxation incentives to investors and community housing providers (Department of Families Housing Community Service and Indigenous Affairs, 2010), and aims to increase the supply of affordable rental housing by 19,300 new dwellings and repair or upgrade 70,000 existing social housing dwellings (Commonwealth of Australia). While these are important measures addressing the supply of affordable housing for low income households, it is projected that demand for housing will continue to exceed supply by up to 640,600 dwellings in 2029 (Commonwealth of Australia, 2010a), and low income households will be most affected by this situation.

The Western Australian homelessness context is now examined, which is relevant as the study was located in WA, and the local homelessness policy context mirrors that found at the national level.
The Western Australian homelessness context

The housing and homelessness reforms and agreements mentioned above are based on collaborative State, Territory, and Commonwealth efforts. Each jurisdiction is expected to develop and implement strategies at the local level which meet key performance indicators. Within the Western Australian context, the Department for Child Protection is the lead agency in homelessness policy and contracting, and has expanded or developed services that mirror targets discussed above.

These services include: tenancy support in social housing and private rental accommodation; housing support to people experiencing mental ill-health and substance misuse issues; people exiting prison and out-of-home-care; homelessness accommodation support; rough living support services; and domestic and family violence related supports (Government of Western Australia, 2010b). These reforms have transformed the Western Australian homelessness landscape and brought about changes seen as long overdue by the homelessness service delivery sector. In order to ground the use of particular concepts, specific terminology applied in the thesis is now examined.

Terminology and concepts

The concept of at risk of homelessness (Chamberlain, Johnson, & Theobold, 2007) is used in this project as it captures the experience of female children and adult women who are subject to abuse in their home and therefore live with the potential risk of entering homelessness if they need to escape.

The term Culturally and Linguistically Diverse is used to recognise those participants who self-identified as belonging to a cultural or linguistic group different to the dominant, white Australian culture.

The term couch surfing is frequently used in the homelessness field and is adopted in this project. It refers to women moving from house to house and accommodated on a short term basis by friends, family or associates. Couch surfing may
involves sleeping on the floor, couches, or other places. The central feature of couch surfing is a lack of tenure and security.

Terminology related to domestic and family violence is contested and interchangeable (Fraser, 2008; Weeks & Oberin, 2004). Family violence can denote violence against women by intimate partners, child abuse, and elder abuse (Loseke, Gelles, & Cavanaugh, 2005). Within the Australian context, many (but not all) Aboriginal and Torres Strait Islander Australians have identified that the term family violence is more inclusive of their experiences within kinship networks and families (Chung, Kennedy, O'Brien, & Wendt, 2000; Commonwealth of Australia, 2009c). Terms like ‘battered’ or ‘beaten’ woman can emphasise physical violence and minimise non-physical forms of abuse. The term domestic and family violence has been adopted in this project and is based on respect for local contexts and cultural considerations. The working definition of domestic and family violence in this thesis involves:

- Violence, abuse, threat, and intimidation against women enacted by an intimate partner (current or previous).

- Physical, sexual, verbal, financial, emotional, spiritual, and psychological domains of abuse (Chung et al., 2000; Commonwealth of Australia, 2009c; Reach Out, n.d.).

Women who experience domestic and family violence are referred to as survivors, indicating their agency and capacity to survive violence and abuse, regardless of whether they end, or remain in, a relationship with the perpetrator.

The term perpetrator is used to denote the choice to perpetrate violence and abuse against another within the context of gendered relationships (Day, Chung, O'Leary, & Carson, 2009). In this thesis, this has involved men's choices to enact violence and abuse against women of all ages. Choice is emphasised, as women noted that their male partners (current or previous) did not enact violence against extended family members, friends, or members of the public, yet chose to be abusive and violent towards them and their children. This indicates the gendered nature of power relations involving the use of violence and abuse (Chung, 2001-2002; Fraser, 2008; Reed, Raj, Miller, &
Silverman, 2010; Yllo, 2005). I acknowledge that the choice to enact violence and abuse sits within a context of structural and relational factors and note that these factors are not explored in this project, given the focus on women’s experiences of homelessness.

The term hidden homelessness is adopted and it is noted that the terms housed homelessness, concealed homelessness, or latent homelessness are equally relevant as they all mean that women develop and apply “coping mechanisms” (Doherty, 2001, p. 19) which conceal their situation.

Definitions of homelessness shape enumeration, legislation, policy, service provision, and the ways in which people experiencing homelessness are constructed and construct themselves (Adkins, Barnett, Jerome, Hefferman, & Minnery, 2003; Casey, 2002; R. Edwards, 2004; Enders- Dragasser, 2001). Definitions range from literal homelessness (rooflessness) through to marginal housing where people are housed, yet unsafe and at constant risk of homelessness (Mallett, Rosenthal, Keys, & Averill, 2010). The definition of homelessness used in this project draws on the commonly applied cultural definition developed by Chamberlain and MacKenzie (1992) which covers: primary homelessness (being without accommodation that meets minimum community standards); secondary homelessness (specialist homelessness accommodation and frequent moving between temporary accommodation); and tertiary homelessness (where people do not have access to private facilities such as a bathroom or kitchen within their accommodation). This definition is chosen not only for its relevance to the Australian context, but also because it covers the range of ways in which women narrated their homeless experiences in this project.

Definitions of Indigenous homelessness differ and are mediated by cultural norms and expectations, kinship responsibilities, and historical experiences of colonisation and dispossession (Birdsall-Jones, Turner, Corunna, Smart, & Shaw, 2010). Indigenous homelessness in Australia comprises primary homelessness involving rough living and occupation of public places; secondary homelessness involving households who are at risk of homelessness with poor property conditions and overcrowding; and spiritual homelessness which encompasses disconnection from country, kin, or uncertainty about cultural identity (Memmott, Long, & Chambers, 2003).
The terms **mental illness** and **mental health impacts** will be found in this document and imply different things. **Mental illness** refers to diagnosed psychiatric disorders as found in the Diagnostic and Statistical Manual IV (American Psychiatric Association, 1994). For the women in this study, this included diagnoses of schizophrenia, bi-polar affective disorder, major depressive disorder, obsessive compulsive disorder and anxiety. These women were prescribed medication as the primary treatment response. **Mental health impacts** denote the range of psychological and emotional impacts women reported which impaired their day-to-day functioning to some extent. These mental health impacts were acute responses to distress and trauma and were not subject to diagnostic activities or psychiatric treatment.

**Specialist homelessness services and system(s)** refer to what was previously known in Australia as the Supported Accommodation Assistance Program. It includes a wide range of specialist services that provide accommodation, support, and other forms of assistance to people experiencing homelessness. These services sit within homelessness policy and program contexts.

Descriptions of **single women** refer to women who do not have children in their care. A single woman may have adult children or her younger children may be in the care of others such as ex-partners and family members, or through formal out-of-home-care arrangements (known within Western Australia, as being in the care of the Chief Executive Officer of the Department for Child Protection). Regardless of the care arrangements or age of their children, these women construct themselves as mothers.

This project relies on the concepts of **substance use** and **substance misuse**. **Substance use** refers to non-problematic and recreational use of licit and illicit substances. **Substance misuse** denotes problematic consequences which women identified as impacting on their lives adversely. The terminology and operational concepts used in this project situate all substance use as functional (Kellehear & Cvetkovski, 2004).

Where sections of a woman or stakeholder's quotes are presented in bold font these reflect the emphasis of the participant.
Thesis structure

Chapter Two articulates the conceptual framework which guided the project and includes discussions on critical post-modern social work and its relevance to this project. Homelessness concepts, contexts, debates, theories, prevalence, definitions, pathways, and women's homelessness are examined. Chapter Three lays out the methodological framework of critical reflexivity, ethical stances, and the collection, interpretation, and analysis of material obtained through interviews.

Chapter Four signals the first of the empirical chapters and provides profile information on the women and other stakeholder participants (namely service providers, policy influencers, and policy makers). Chapters Five and Six analyse the women’s pathways into homelessness and highlight the differences across pathway types. Chapters Seven and Eight examine what it was like to live homeless across the pathways. Chapter Nine unpacks the women’s endeavours to create a sustainable pathway out of homelessness. Chapter Ten concludes the thesis and draws out the policy, program, and service delivery implications of the findings. Chapters Five to Ten address the main and sub-research questions.
CHAPTER TWO – THE CONCEPTUAL FRAMEWORK

This chapter sets out the conceptual framework which has guided this project. Some of the components and values such as believing that the expert is the person with lived experience and maintaining reflexivity towards my power, positioning, and privilege were evident from the inception. In addition to these principles, new and re-found knowledge emerged and is discussed in this chapter. I start by considering critical post-modern social work.

Critical post-modern social work

My practice over 25 years as a clinician, activist, and researcher is predominantly informed and mediated by social work theories and approaches. Social work as a profession or set of practices is not unified or consistent; rather it is best understood as contested territory both within and outside the discipline (Fook, 2002). Despite the unstable nature of what social work is or does, central features such as a commitment to social justice, the promotion of individual and community wellbeing and emancipation, underscore social work identities, practices, and processes (Australian Association of Social Workers, 2010, p. 7). A critical post-modern social work approach has been adopted in this project which reflects my personal and professional positionality. Critical post-modern social work is also difficult to singularly define (Allan, 2009), with emphasis variously placed on the post-modern, the critical, or the social work components.

Social work’s history shows a clear divide in thinking and theorising around social issues between ‘fixing’ individuals to fit with normative social and cultural expectations, and transforming society and associated structures (Mendes, 2009). An individualistic approach to social work reflected the dominance of psychoanalytic thinking in practice and education settings, particularly in the USA in the early twentieth century (Fook 2002; Mendes, 2009). Assessment and intervention embedded within casework underscore an individualistic framework with minimal (if any) attention to context and environment. Structural approaches on the other hand, dispute individual explanations of social problems and critically examine the impact of oppressive structures including capitalism.
and class; highlighting the alignment of such approaches with Marxist and Socialist ideologies (Allan, 2009).

The 1970s signalled the emergence of a number of challenging movements including radical social work and feminism. Radical social work was concerned with the ways in which individualistic discourses neglected to account for the impact of material deprivation in the lives of consumers of social work services. Common to these radical movements is the idea that the personal is inherently political, accompanied by a commitment to transformation of unjust social structures and institutions (Allan, 2009). The principles of radical social work have been reworked and relabelled in the ensuing years and are now referred to as structural social work, progressive social work, critical social work, anti-oppressive practice, and anti-discriminatory social work (Allan, 2009).

Critical social work is the more recent iteration of a practice approach that unsettles ideas about the causes of social issues and problems residing with individuals and communities – instead examining the influence of structural factors and seeking to disrupt pathologising individualised discourses (K. Healy, 2005). These social work approaches draw on critical social science theories which are inherently modernist, emphasising universal discourses about the impacts of structures, institutions, material conditions, and oppression. Modernist notions of power construct it as held and enacted by dominant and privileged groups, institutions, and actors. Consequently, those subject to the power of dominant groups are positioned as having little or no capacity to resist and transform their circumstances (Allan, 2009). Central to critical social work is an emphasis on transformation through collective and politicised action.

Critical social work is critiqued for its neglect of diversity, individual experience, cultural heritage, history, context, and the influence of discursive practices. In response to these and other limitations in social work generally, members of the profession started to engage with post-modernism and post-structuralism in the early 2000s, despite it having been the subject of fierce debate and contestation more broadly for the past 30 years. This engagement has not been straightforward, and the place of post-modernism and post-structuralism in social work continues to be debated and contested (Allan, 2009). I now consider post-modernism and post-structuralism, with reference to their application in this project and the associated limits and challenges.
**POST-MODERNISM AND POST-STRUCTURALISM**

Post-modernism is a set of broad and somewhat fragmented theories that contest and deconstruct modernity and ideas about linear progress, the capacity of science to find the ‘truth’ with universal applicability, and the ordered development of knowledge through the application of rules and systems (Briskman, Pease, & Allan, 2009; Fawcett & Featherstone, 2000). A discussion of post-modernism is not complete without reference to Michel Foucault (1982b) who is a key figure in the critique of, and challenge to, modernity with its panaceas for social ills and issues.

Post-modernity focuses on the individual and local; thereby displacing grand narratives which generalise experience (Parker, 1992). In this project, I have sought to destabilise and deconstruct totalising narratives about women who experience homelessness and focus instead on their unique experiences and narratives. The women's descriptive accounts and representations of their experience constitute multiple realities and ‘truths’ as point-in-time, partial expressions of their lives. These points are expanded in the findings section, highlighting the intersections of a variety of subjectivities and lived experiences.

Post-structuralism is particularly concerned with language, discursive practices and enactments of power (Fook, 2002; K. Healy, 1999). Discourses do not exist in isolation, nor can they be understood as simple, unrelated entities. Despite being presented as natural or normal, they are the subject of constant reworking and contestation (Fairclough, 1995). A discursive approach implies a positionality that has a keen interest in the workings and influence of discursive practices (Burck, 2005; Marston, 2004; Mills, 2004).

Discourse theory represents a variety of approaches including discourse analysis that focuses on linguistic and semantic features of texts; critical discourse analysis which adopts a deconstructive stance to 'common sense' and taken-for-granted assumptions; and critical feminist discourse analysis which is transformative, gendered, and deconstructive (Baxter, 2003; Fairclough, 1995; Lazar, 2005; Mills, 2004; Parker, 1992).
My work in this project has been informed by a discursive approach in that I have sought to unpack and highlight instances of supposedly taken-for-granted knowledge and practices within the women’s experiences of homelessness. Discursive practices and their relevance to this project are explored in more detail in Chapter Three.

Deconstructive methodologies are commonly used to promote a post-structuralist stance and are used to uncover discursive practices. Deconstruction aids in the exposure of discursive practices, power relations, exclusions, inclusions, emphasis, overt and covert agendas, and implied intentions (Parker, 1992). These techniques look within, beyond, and around the discourse or text; asking questions such as what is implied, what is inferred, what or who is speaking, what or whom is excluded, who is marginalised or othered, and what links can be traced between discourses? (Derrida, 1974)

I have maintained a focus on the instances where women experiencing homelessness are included, excluded, constructed, and in turn construct discourses about their experiences and other women who experience homelessness. For example, women were asked to share their preferred descriptive language in relation to their experiences. Some women adopted a ‘homeless’ subject position, arguing that “the government” needed to take notice of women experiencing homelessness (meaning institutional representatives should discursively construct the women as experts through experience, along with meaningfully consulting them on how to address homelessness). Other women distanced themselves from a ‘homeless’ tag, and were surprised that their situation fitted the definition of homelessness adopted in this project.

At the heart of post-modernism and post-structuralism is the rejection of a single, universal and fixed reality, in which local narratives, experiences, and contexts are privileged. Yet, from my perspective it is useful to ask how experiences that most commonly affect women such as poverty, racism, domestic and family violence, and child abuse can be explained. I accept that the individual, local, and lived experience of these issues is unique and generalisations are inattentive to the specifics of the experience; yet from my lived experience and perspective some common components can be traced.
My discussions are pointing to the most significant criticism of post-modernism and post-structuralism as being relativist, particularly when applied in a “strong” sense (Pease, 1999, p. 12). A high fidelity application of post-structuralism would position domestic and family violence as a contextual occurrence which is discursively created within and by constructions of gender and power relations (at the minimum). On the other hand, Pease (1999, p. 12) asserts that a “weak” form of post-structuralism positions material realities which reflect systems and experiences of domination, oppression, and injustice. From my perspective, with domestic and family violence this involves systemic practices such as oppression and misuse of privilege, power, and control which are informed by gendered relations.

This concern with relativism has been picked up by a small number of authors in the homelessness area and is referenced in the following quote: "The inherent tendency to total subjectivity, relativity and irrationality, and a primary focus on language, limit the use of post-modernism and post-structuralism, but do not negate them entirely" (Neale, 1997, p. 46). I align myself with the critical discourse theorists who argue that certain material realities exist (see Baxter, 2003; Danaher, Schirato, & Webb, 2000; Mills, 2004; Naples, 2003; Parker, 1992). In this project, such material realities include: domestic and family violence; sexual abuse and assault of female children, adolescents, and adults; homelessness; and gendered expectations and subjugations. This means a weak version of post-structuralism has been applied in this project.

Post-structuralism's attention to power is central to my social work practice, and Foucault’s quote embodies my orientation:

If power were never anything but repressive, if it never did anything but say no, do you really think one would be brought to obey it? What makes power hold good, what makes it accepted, is simply the fact that it doesn’t only weigh on us a force that says no, but that it traverses and produces things, it induces pleasure, forms knowledge, produces discourse. (Foucault, 1984, p. 61)

Power relations are a key feature of critical social work, discourse analysis, and post-structuralism. Post-structuralist accounts of power position it as fluid, contextualised, contested, and performative; which emphasises the Foucauldian sense of
a “productive, relational and exercised” model of power (Fawcett & Featherstone, 2000, p. 17). Foucault’s views on power have been highly influential in dismantling one-dimensional notions of ‘power over’ (as seen in early versions of critical social work); arguing against the idea that one type of institutionalised power has more sway than another (Mills, 2004).

In contrast, critical discourse theorists argue that the capacity to be in command of certain discourses demonstrates the capacity to dominate, suggesting that power is both relational and dominating (Baxter, 2003; Fairclough, 1995; Fopp, 2007; Marston, 2004; Naples, 2003). This has relevance in homelessness discourses which as Clapham (2005) argues, are frequently constructed by those with authority and privilege, such as policy makers, service providers, and the media, with service users having some (yet limited) capacity to resist, inform, and influence these discourses. My approach has sought to unpick instances of oppression, domination, and subjugation. This has been accompanied by my enactment of continuous reflexivity about power relations, and the role of gender in women's experiences of homelessness.

Critical and post-structuralist theories invite the surfacing of alternative ways to view taken-for-granted phenomena and ideas. Foucault's (1982a) investigations of 'madness' interrogated the practices of psychiatry and created space for alternative understandings of distress to surface which underpin consumer driven mental health recovery movements (Deegan, 1996). The concept of recovery is used in this project to make sense of women's experiences of mental illness, trauma, violence, and abuse. The use of the term recovery as suggestive of a return to previous states of functioning is problematised by some authors in the domestic and family violence field (for example Evans, 2007). I note these concerns, however my conceptualisation of recovery (and as seen in contemporary mental health practice and theory) contests the notion of return to earlier functioning, instead focussing on the unique, localised, and specific definition of recovery that an individual develops and applies (Barker & Buchanan-Barker, 2010).

There are a number of features of a recovery approach relevant to this project, starting with the notion that recovery is driven and defined by the person with lived experience. A service provider’s role is to journey alongside the person, encouraging and
conveying hope and their belief in the person’s inherent capacity (Commonwealth of Australia, 2010b). Mental health recovery is commonly constructed to have three components involving: clinical recovery which focuses on the management or alleviation of symptoms and debilitating impacts; social recovery which encompasses connectedness with others, citizenship activities, and engagement in education, employment, and training; and personal recovery which covers the intrapersonal domain of coming to know the self, one’s capacities, and limitations (Barker, 2001).

Elsie is a 45 year old non-Indigenous mother of one who came into homelessness on a youth escape pathway and transitioned to adult homelessness. Her quote captures the centrality of personal recovery which was also evident in other women’s narratives about their homeless experiences:

I think that one of the greatest miracles in my life is that I’m not bitter, with everything I’ve been through ... that would have to be one of the biggest miracles in my life. I know I’ve made a conscious choice of being better not bitter. So even though I go through meltdown and everything else ... my conscience is clear. Whatever happens when I die I want to have a clear conscience and not have any regrets. I will have sadness because things happened the way they did but ... the opportunities came and I didn’t miss them. (Elsie)

I have applied and extended mental health recovery concepts to include recovery from abuse and trauma (throughout the lifespan), mental illness and ill health, substance misuse, and experiences of homelessness. I now turn to discuss how feminism(s) form part of the conceptual framework guiding this project.

**Feminism(s) and Critical Post-Modern Social Work**

The term feminism(s) is chosen to indicate the contested and variegated nature of a set of theoretical and ideological perspectives that are known in one form or another as feminism. Dux and Simic capture this by asserting that feminism is “an umbrella term for a political, cultural and social philosophy that aims to eradicate sexism” (2008, p. 7). The
business of feminism is gender, and specifically gender injustice and oppression experienced by women. Despite theoretical and definitional differences, most feminist research seeks transformation of women’s experiences of oppression, discrimination, and subjugation (Baxter, 2003; Featherstone, 2006; Naples, 2003). As noted earlier the goal of transformation is pivotal to this project and reflects both feminism(s) and critical post-modern social work.

Radical feminism arising in the 1970s has been a potent contributor to the articulation of women’s lived experiences. This type of feminism is popularly represented by images of lesbian separatists fighting to overturn patriarchy and rejecting limiting biological constructs of women (S. Murray, 2002). Publicising, politicising, and seeking to transform the private treatment of women and children at the hands of perpetrators of violence and abuse is radical feminism's most significant and enduring contribution. Yet, it is critiqued on the grounds of the essentialist constructions of 'woman', which preclude women of colour, Indigenous women, culturally and linguistically diverse women, lesbians, queer women, women with disabilities, and other expressions of diversity. Such criticisms has given rise to the post-modern turn in feminist thinking (Fraser, 2008).

Post-modern and post-structural forms of feminism are concerned with language, deconstruction, and difference, and contest the modernist concept of 'woman' as stable, universal, essential, or foundational. These approaches to feminism uncover multiple accounts of women's experiences and subjectivities, revealing the diversity of 'women'. In unsettling the notion of 'woman', differences in class, culture, sexuality, ability, and performance of gender can surface – all of which destabilise modernist feminism's unified accounts of women's oppression.

The post-structuralist concern with language, knowledge, and truth with attention to women’s unique experiences is particularly important given language is seen to construct while also being constructed and 'truth' cannot be found through language or other social conventions. In this type of approach, women's experiences of power and knowledge are examined and the ways in which power relations are enacted and resisted are interrogated (Fraser, 2008). In line with this, generalisations, meta-
narratives, dominant discourses, and universal truths are probed for how they came to settle in women's lives (Zalewski, 2000).

Post-modern feminism(s) are criticised for the tendency to gender relativism which displaces the traditional feminist focus on gendered oppression, leading to "political disintegration" (Tong, 1989, p. 7). Post-modern feminists would dispute this, arguing that the deconstruction of all parts of women's experience is a political act which has the capacity to highlight individual experiences of gendered oppression (Zalewski, 2000). Two other criticisms include post-modern feminism's failure to recognise, value, and appreciate the achievements of earlier feminists (Dux & Simic, 2008) and the limited applicability and clarity for those outside of the academy (Belsey, 2006).

These descriptions of feminism(s) could be read as culturally neutral or colour blind. Women of colour argue that feminism(s) neglect to theorise the intersection of culture, race, and gender (Hovane, 2006; Moore, 2012). This theoretical gap led to the development of theories of intersectionality which refer to methodology and positionality that map the intersections of women's lives across multiple identities, subject positions, and experiences (Ropers-Huilman & Winters, 2010). Kimberlé Crenshaw's work in this area is influential and highly relevant to this project as she has examined the ways in which structural factors such as access to employment, housing, childcare, poverty, and income mediate race, gender, and experiences of violence (Crenshaw, 1995).

Some post-structuralist feminists have critiqued the idea of intersections, arguing they denote foundational and hierarchical categories of identity (Lykke, 2010). Feminist intersectionality has expanded to include tracing intersections of sexualities, disability, age, "animals, earth others and post-human cyborgs" (Ropers-Huilman & Winters, 2010, p. 82). While this project has not extended analysis to the latter types of intersections, it is concerned with intersections of gender, class, race, sexualities, age, and (dis)ability, which are reflective of the critical, post-modern social work framings discussed previously.

This research project is deeply concerned with gender injustice, and specifically how this intersects with women's subjectivities and experiences of homelessness. I have
drawn on a variety of feminist frameworks and appreciate the freedom that post-modernism offers me in being able to examine the local, deconstruct the 'how', expose the workings of 'truth' and discursive practices, while also subscribing to the view that certain material realities exist. For example, women's economic positioning may be theorised in various ways, however in my worldview, women experience gendered financial disadvantage which shapes their day-to-day lives.

As will be discussed shortly, women of all ages and cultures are overwhelmingly the target of men's violence, abuse, and exploitation, yet evidence will also be presented that culturally and linguistically diverse and Indigenous women face specific and compounded vulnerabilities, which highlights the intersections of gender, age, class, and culture (at the minimum). Tong's (1989) suggestion of feminism as a kaleidoscope resonates with me, as I am interested in blurred boundaries and images which create new ways of enacting feminism: "What makes feminist thought liberating is its vitality, its refusal to stop changing, to stop growing" (Tong, 1989, p. 237). I also support Zalewski's arguments that the supposed "gulf" (2000, p. 139) between modern and post-modern feminisms may appear large, and without minimising the obvious differences, I believe shared ideas and approaches can be traced and these have provided a good fit for understanding women's experiences of homelessness.

In summarising the critical post-modern social work approach taken in this study, I reiterate that this project was born from my experiences as a social worker in homelessness and other fields, and came about because, along with my colleagues in practice, policy, and research settings, I continued to ask questions about what helps people get out and stay out of homelessness. Despite social work being a contested, unstable concept my approach to practice is one that is committed to political and transformative practice – aimed at a fairer and more compassionate world. Women's experiences of homelessness are a product of gendered relations and constructions; something this project has taken seriously with its practice oriented, transformative focus. This means that critical post-modern social work with an emphasis on intersectional feminist analysis is highly relevant to the conceptual understandings underpinning the project. My approach has sought to create meaningful categories without dismissing or marginalising difference (Fook, 2002).

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The emphases in this project include politicisation of individual experience, examination of the workings of power and privilege, transformation, interest in context, attention to discursive practices, localised narratives, and critical reflexivity (Allan, 2009; K. Healy, 1999; Mullaly, 2007). By applying critical post-modern social work principles underpinned by feminist intersectionality, it is hoped that the limits of different approaches mentioned previously are eased, and the following quote points to this, as well as the tensions and opportunities within my approach:

A post-modern and critical social work practice ... will focus both on how structures dominate, but also on how people construct and are constructed by changing social structures and relations, recognising that there may be multiple and diverse constructions of ostensibly similar situations. Such an understanding ... can be used to disrupt dominant understandings and as a basis for changing those so that they are more inclusive of different interest groups. (Fook, 2002, p. 18)

I now consider the main debates, concepts, and contexts within the homelessness field.

Explaining homelessness

There is no one single cause, no one single structure or personality flaw. In fact, it is not even the triggers themselves that result in homelessness or rooflessness. It is the interaction between triggers, life events, the political or legislative climate of the day, the individual's reaction and interaction with the circumstances and time that together contribute to homelessness. (Ravenhill, 2005, p. 4)

Theories explaining homelessness cover diverse frameworks and include critical realism, post-structuralism, constructivist approaches, and positivist framings. Critical realist approaches seek to provide a comprehensive model for measuring and examining the relationships (and direction of the relationships) between various factors (Fitzpatrick, 2005) – yet limited attention is paid to discursive contexts and power relations. Post-structuralist approaches invite an examination of the localised, individual experience, and
context (Bleiker, 2003), yet they often disregard individual agency as it is rejected as an essentialist concept, although Foucault's notion of resistance can be read as a form of agency (Foucault, 1982b; Neale, 1997).

Constructivist approaches invite detailed understanding of the meanings people make around housing and homelessness (Jacobs, Kemeny, & Manzi, 1999; May, 2000). A limitation associated with constructivist approaches is that relativism can emerge where meanings and constructions are privileged and practical responses to addressing homelessness are limited. Positivist approaches provide forms of evidence favoured by policy makers, which promote a policy focus on the structural drivers of homelessness. Such approaches can, however, fail to take into account meanings ascribed by individuals and households (Critcher, Waddington, & Dicks, 1999). Despite the range of theories used to explain homelessness, none explicitly consider gender and associated differences.

Explanations of homelessness have historically been divided into the binaries of structural or individual agency factors which neglect the experience of homelessness as a conjunction of multiple, interconnected events, experiences, and meanings (Beer, Delfrabbo, Natalier, Oakley, & Verity, 2003; MacKenzie & Chamberlain, 2003; Williams, 1999). While most Australian, British, and European research is underpinned by explanatory frameworks that incorporate both structural and individual factors, a fully developed framework that accounts for the nature and direction of relationships between the elements is yet to be produced (I. Anderson, 2003; Fitzpatrick, 2005; G. Johnson, Gronda, & Coutts, 2008; Mallett et al., 2010; May, 2000; McNaughton, 2006; Neale, 1997; Neil & Fopp, 1992). The terms structural and individual are commonly applied, but other terms such as situational, external, and institutional are also found in the literature (for example Crane, 2009; Crane & Brannock, 1996; G. Johnson, 2009). To give just one example of this, substance misuse and mental illness can be theorised as responses to structural inequities, yet they are commonly ascribed the status of individual agency and experience (Mallett et al., 2010).

Anthony Giddens' (1984) concept of structuration is frequently referred to in homelessness research as a means of capturing the ways in which structures mediate
individual action, while also being mediated by individuals and their actions – suggestive of reflexive action and awareness. Giddens argues that “all human beings are knowledgeable actors” (Giddens, 1984, p. 281), and that our knowledge is limited by our conscious and unconscious awareness of expectations, discourses, and norms. Giddens frames power as relational, limiting, and opportunistic (Neale, 1997).

Giddens’ ideas have been adopted by numerous theoretically disparate researchers (for example, Fitzpatrick & Clapham, 1999; McNaughton, 2006; Neale, 1997; Ravenhill, 2005); which is suggestive of the promise of his framework when navigating the muddy waters of structure and agency. However, the emphasis on an individual's capacity for reflexivity in the face of material, psychological, social, and spiritual deprivation means that agency is inadvertently emphasised over structural influences (Layder, 1985; McNaughton, 2006). Given these cautions I have adopted a curious approach in relation to how structuration theory fits women's experiences of homelessness, and in particular how women's reflexivity plays out in the face of historical or contemporary experiences of trauma and abuse. Further discussion of how these factors have been employed as analytic tools is provided in Chapter Three – Methodology. Along with structure and agency, homelessness is commonly constructed as a dynamic process, which I now consider.

**A dynamic approach to understanding homelessness**

A dynamic approach to researching, analysing, and understanding homelessness seeks to capture the factors, conditions, contexts, and patterns at play in the experience. As with definitions of homelessness, considerable variation is evident in the literature on what a dynamic approach might entail. In order to address this, Pinkney and Ewing (2006) analysed and traced three approaches. While the approaches are presented as distinct, it is evident that many researchers combine elements of these approaches in their work.

The first approach emphasises homelessness **processes** and **transitions**, utilising metaphorical constructs of homeless careers to understand the temporal, adaptive, biographic, developmental, and cognitive processes involved in homelessness. Homeless
career metaphors are used to provide an orientation to pathways in, within, and out of homelessness, including the pathway to ‘chronic’ or persistent homelessness. Influential researchers include Snow and Anderson (1993), MacKenzie and Chamberlain (2003), and Johnson and Chamberlain (2008a).

The second dynamic approach analyses entry, exit, and return patterns and characteristics with most of this research emanating from the United States of America. It focuses on frequency and categorises homeless experiences as one-off events, episodic occurrences or long-term patterns. These approaches destabilise deterministic notions of people spiralling into chronicity and aim to produce statistically reliable data on patterns of homelessness across large cohorts; reflecting a positivist theoretical framing (Pinkney & Ewing, 2006).

The third approach emphasises housing and homelessness histories, with key researchers such as Clapham (2005), May (2000), and Robinson (2003) advocating longitudinal and biographic research designs. The experience and meanings made about housing and homelessness are emphasised in these biographical approaches, reflecting a constructivist framework.

This project has incorporated components of approaches one and three, by examining processes within the context of housing biographies, framed by meanings women made of their experiences (an approach adopted by G. Johnson et al., 2008). This has provided the most theoretically congruent approach, while also resonating with other components of the conceptual framework. Yet, it is noted that attention to gender is missing from the discussion on dynamic approaches to understanding homelessness. Turning away from theoretical and explanatory frameworks, I now examine homeless pathways.

Homelessness concepts and devices

Homelessness pathways denote ... common routes into, through and out of homelessness, while also allowing for divergence and convergence, forks in
the track, made sometimes by external interventions, at others by choice or chance. (Mallett et al., 2010, p. 29)

Homeless pathways are common metaphorical constructs reflective of Weber's (1949) notions of ideal types which emphasise similarities and differences within social phenomenon. Pathways metaphors provide the means by which to build unified analytic frameworks. Weber argues that ideal types provide "a mental construct for the scrutiny and systematic characterization of individual concrete patterns which are significant in their uniqueness" (Weber, 1949, p. 100).

At first glance, Weber's philosophical stance and emphasis on ideal types may seem at odds with critical feminist post-structuralist inquiry. However, my examination of ideal types from feminist perspectives indicates degrees of alignment, as reflected in the following quote:

Weber's methodology has many advantages for the current debate over feminist methodology. Most fundamental is that his approach presupposes that social analysis is always undertaken by situated, engaged agents who live in a discursively constituted world. (Hekman, 2004, p. 236)

A feminist informed application of ideal types can therefore include deliberate attention to the situatedness of the researcher and detailed exploration of difference. Ideal types in this project have created a lens and container from which to view, explore, deconstruct, and expand my understanding of the empirical materials collected from women and other stakeholders.

Homeless pathways as ideal types emphasise non-linear, multifaceted, and complex processes which constitute just one part of a housing and life history (Crane, 2009; Edgar, Doherty, & Meert, 2003; G. Johnson et al., 2010; Mallett et al., 2010; National Youth Commission, 2008). The use of a pathways metaphor is widespread in homelessness research, policy, and service delivery practices. Anderson and Tulloch (2000) synthesised mostly British homeless pathways research and identified that three main pathway types of youth, adult, and later life are evident in the literature. Their work also uncovered additional factors such as housing careers, lifespan transitions, and
disruptive events which create the conditions for homelessness (I. Anderson, personal communication, August 2007). This project did not distinguish between pathways into, within, or out of homelessness (also evident in the work of Casey, 2002; McNaughton, 2005).

The application of a pathways metaphor varies considerably and in order to identify key features of pathways I have analysed six influential homeless research projects and traced two main themes. The first theme relates to how a pathway is classified which may utilise:

a. Temporal characteristics (McNaughton, 2004; Snow & Anderson, 1993).


c. The reason for the first homelessness event (Clapham, 2005; G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003).

The second approach to pathways involves analysis of processes, mediating factors, and relationships between different events (G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003; Mallett et al., 2010; McNaughton, 2004; Snow & Anderson, 1993). This discussion highlights that while pathways are commonly used to further understanding of homeless experiences and patterns, the ways in which they are constructed and applied varies considerably. This adds layers of complexity in comparing different research findings to a range of homeless experiences.

The use of typologies to "order and categorise similarities and differences" (Snow & Anderson, 1993, p. 36) is seen to promote in-depth understanding of behaviours, experiences, and contexts associated with homelessness. Two common typologies found are homeless careers and sub-cultures. These reflect processes, impacts, adaptive techniques, and emergent identities (G. Johnson & Chamberlain, 2003; Mallett et al., 2010; McNaughton, 2004; Snow & Anderson, 1993). Homeless career typologies detail predictive, sequential, and linear stages related to emergent identities which often culminate in long-term homelessness (G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003; Mallett et al., 2010; May, 2000).
The idea of homeless sub-cultures was introduced by Snow and Anderson (1993) in their research work on primary homelessness during the 1980s. These authors argued that a homeless sub-culture denoted groups with common interests, shared behavioural expectations, specific rituals, values, and beliefs. Membership is underpinned by choice or may be a consequence of marginalisation. More recently, notions of sub-cultures have been applied to understand homeless populations who experience substance misuse, marginal housing arrangements, and other vulnerabilities (G. Johnson et al., 2008).

A critical and post-modern account of culture positions it as dynamic, difficult to define, emergent, and constituting blurred boundaries between different cultural groups and practices (Quinn, 2009). From my perspective, this means the construct of homeless sub-cultures requires a critically reflexive approach so as to avoid essentialising people experiencing homelessness, their performances, and practices. This discussion is not intended to discount the investigation of how people experiencing homelessness socialise and connect in meaningful ways; rather it identifies the link between language, power, and the construction of specific ‘truths’ and realities (Danaher et al., 2000).

In this project, homeless sub-cultures means groups of people experiencing homelessness (or who have experienced homelessness) who connect and share their experientially derived wisdom on surviving homelessness, engage in shared practices, and identify as socially connected to other people experiencing homelessness. I use the terms homeless sub-cultures, homeless sub-cultural group, and homeless social networks to imply the same meaning and emphasise the fluid, emergent, blurred boundaries associated with my understanding of culture(s).

Iterative homelessness refers to episodic and repeated homelessness, interspersed with housing of variable quality and suitability, and focuses on the frequency of moves rather than how long people remain in one place (Robinson, 2003). It is similar to the concept of being in and out of homelessness or episodic homelessness (Bassuk, Perloff, & Dawson, 2001; MacKenzie & Chamberlain, 2003). I have taken up the concept of iterative homelessness to describe the experiences of many women in this project. Robinson captures the experience of iterative homelessness in the following: "Having access to accommodation or housing ... often represented a temporary change
of circumstance with its own additional risks, and a following exit back into homelessness" (2010, p. 40).

The variation in definition and application of ideal types, pathways, typologies, careers, and homeless sub-cultures invites a critical stance. For example, a pathway could be constructed as a meander or stroll, a direction, a choice, a process, or a difficult experience. Limitations in the application of metaphors and typologies are evident and indicate the need to maintain awareness of how dominant discourses emerge from metaphor as "they ... represent a particular social worldview and normative social model of how society should operate" (Fopp, 2009, p. 277).

Importantly for this project, the influential research cited above fails to differentiate gendered experiences of homelessness, leaving unanswered questions about the specific and localised experiences of women in relation to homeless pathways, careers, and sub-cultures. Key questions that emerge from this literature include:

- Is the construct of a homeless pathway relevant for women and their experiences of homelessness?
- If a comparative gendered analysis of pathways was undertaken, what differences and similarities would be found?
- If the pathways metaphor fits for women's experiences of homelessness, what would differentiate the pathways amongst different women?
- Is a homeless career typology useful to understand women's homelessness?
- Does the end point of a homeless career (i.e., 'chronic' or long-term homelessness) fit some or all women's experiences?
- Are the ideas and models associated with homeless sub-cultures applicable to women?

Despite the lack of gendered analysis in relation to homeless pathways, the concept has been adopted in this project by framing pathways as dynamic and contextual and just one part of a woman's housing and life history (i.e., homelessness is not the totality of the woman). Such an approach is underscored by critical and post-modern social work stances that emphasise transformation, individual strengths and
capacity; simultaneously giving attention to structures and discourses that inform women's pathways out of homelessness.

The application of pathways in this project asks questions related to power relations, inclusions and exclusions, and taken-for-granted assumptions about women and homelessness. While the research application of homeless pathways to women's experiences is limited, I assert that this nuanced and contextualised approach reflects a feminist stance. It privileges the voice of women who have lived homelessness, while seeking to meaningfully collate information on women's experiences of homelessness. I now focus on what is known about women's homelessness.

Women's homelessness

Women will remain one of the most vulnerable groups within society, subject to pressures for both increased participation in the labour force and an expectation that they will continue to perform traditional roles with respect to family raising and the provision of care. (Tually, Beer, & Faulkner, 2007, p. iv)

As Tually, Beer, and Faulkner suggest, the backdrop to women's homelessness relates to their economic and social positioning. Despite the principle of Equal Pay being legislated in Australia since 1969, women continue to experience pay rates 16-18% lower than men (Commonwealth of Australia, n.d.-b). Women's engagement in paid employment is commonly shaped around their caring responsibilities, which means women dedicate twice as much time to domestic labour as men and almost three times as much time in caring for children (Australian Bureau of Statistics, 2008). These caring responsibilities extend to older relatives, including their spouse's family members (Tually et al., 2007). Such responsibilities mean women are three times more likely than men to be engaged in part-time work (Cerise, O'Connell, Rosenman, & Sarat Chandran, 2009).

Consequently, women fill the ranks of the low paid, casualised and part-time workforce as these modes of employment enable women to meet their caring responsibilities. The workplace continues to be a site of ongoing sexual discrimination for women (Department of Families Housing Community Services and Indigenous Affairs,
Despite an international increase in women's labour market participation in the past 25 years, the same picture of types and patterns of engagement in the labour market framed by caring responsibilities, part-time and insecure work, and discrimination are found in other developed countries (Australian Bureau of Statistics, 2008; Doherty, 2001; Enders-Dragasser, 2010; Malos & Hague, 1997; Mina-Coull & Tartinville, 2001; Schwartz, 2010; Sikich, 2008). These factors lead to the likelihood of many women “accumulating poverty” (Cerise et al., 2009, p. 1) over their lifetime.

These factors impact on women in later life as their contributions to superannuation funds are 50% of men's, resulting in greater reliance on income support in older age (Kisor & Kendal-Wilson, 2002), with a significant impact being the difficulty in affording appropriate housing. The experience of house and home are mediated by gender and for women who spend most of their time in unpaid labour, home can represent a site of simultaneous oppression, identity, and freedom (Adkins et al., 2003; Doherty, 2001). The concept of 'home' is underpinned by discursive practices that privilege nuclear family structures over other household types such as singe women or lone female parent households, which are often constructed as undermining and threatening normative roles and expectations (Watson & Austerberry, 1986).

For women, the close connection between housing and relationships indicates significant vulnerability to homelessness due to the behaviour and choices of men, gendered roles and expectations, economic positioning, relationship breakdowns, trauma, domestic and family violence, and abuse. All of this means that women's housing arrangements can constitute both risk and protective factors, which directly impinge on wellbeing and the potential for homelessness (Tosi, 2001). Additionally, housing markets, urban planning, housing design, and policy activities represent and reinforce institutional discourses about women, nuclear family structures, and stereotypes of gendered roles (Watson, 1988). Key issues shaping women's housing futures include an ageing population, increasing cultural diversity in older populations, expected increases in the number of women with disabilities, expanding numbers of women who are sole parents, growth in the numbers of women living alone, continuation of gaps in gendered pay rates, ongoing over-representation in casual and part-time work, and women's caring roles (Tually et al., 2007).
These economic and housing contexts can heighten women’s vulnerability to poverty and homelessness. Particularly at risk are women who are single, lone parents, Indigenous, migrant, older, or who have health or disability issues (Bernard, 2010; Casey, 2002; Hughes, 1999; Radley, Hodgetts, & Cullen, 2006; Sharam, 2008). Poverty is a well established risk factor for housing stress and homelessness (Tually et al., 2007; Zugazaga, 2004), yet a disregard for gendered differences (Chityil, 2010; Enders-Dragasser, 2010; Radley et al., 2006; E. Riley et al., 2007) persists within literature, research, policy, and pockets of service delivery in the homelessness field as discussed by Reeve, Rionach, and Goudie:

The experiences of homeless people are well documented in literature and research but all too often this research is dominated by the views and experiences of homeless men. And while homeless people, regardless of gender, will share many common experiences, a failure to adequately understand the (sometimes distinct and unique) situations and experiences of homeless women can ultimately result in a failure to develop appropriate responses. (2006, p. 89)

A small number of comparative studies on gender and homelessness have been undertaken and while the findings are limited, gendered differences are noteworthy. These studies highlight that women and girls are more likely to: turn to family and friends before seeking professional assistance, have histories of trauma, experience out-of-home-care, be the main or sole carer of children, and enter homelessness as a result of physical and sexual abuse (D. Anderson & Rayens, 2004; Averitt, 2003; Bassuk, Buckner, Perloff, & Bassuk, 1998; Edgar & Doherty, 2001b; Graham, 2005; Jones, 1999; Metraux & Culhane, 1999; Novac et al., 1996; Radley et al., 2006; Reeve et al., 2007; Reid, Berman, & Forchuk, 2005).

In comparison, men tend to have a greater lifetime earning capacity due to their expanded ability to engage in employment, are more likely to be involved in the criminal justice system, and enter homelessness because of substance misuse, gambling issues, and their use of violence and abuse against women and children (Bridgman, 2002; Cramer & Carter, 2002; Mina-Coull & Tartinville, 2001; E. Riley et al., 2007; Roll, Toro, &
Ortola, 1999; Zugazaga, 2004). These discussions highlight the significant known differences between women and men when it comes to experiencing homelessness.

The discussion that follows examines the experiences of women from developed nations, and I note that women from developing countries have significantly different experiences due to variations in cultural, social, legal, human rights, and religious contexts (Sikich, 2008). In addition to the previously identified gendered, economic, and housing contexts that predispose women to homelessness a wide range of conditions and factors are noted in literature as contributing to women's homelessness and the most commonly cited reason is domestic and family violence (Bassuk et al., 2001; B. Buck, 2002; Chung et al., 2000; Commonwealth of Australia, 2009c; Patton, 2003; Radley et al., 2006; Spinney & Blandy, 2011). Experiences of lifetime sexual and physical abuse and associated long-term impacts are frequently cited as contributing factors in women's homelessness (D. Anderson & Rayens, 2004; Catherine House Inc, 2003; Graham, 2005; Jones, 1999; Roll et al., 1999; Stainbrook & Hornik, 2006; Styron, Janoff-Bulman, & Davidson, 2000). Substance use and mental illness are also commonly cited (Bassuk et al., 2001; Kisor & Kendal-Wilson, 2002; Robinson, 2011).

Other factors mentioned include marginalisation and social exclusion (D. Anderson & Rayens, 2004; Bassuk et al., 1997; Catherine House Inc, 2003); cultural expectations (Novac, Serge, Eberle, & Brown, 2002; Sikich, 2008; Wong, Culhane, & Kuhn, 1997); problematic tenancy histories and eviction (Jones, 1999; Zugazaga, 2004); separation from children (Carolan, Burns-Jager, Bozek, & Escobar Chew, 2010; Metraux & Culhane, 1999; Syngajewski, O’Leary, Koch, Flynn, & Owens, 2007); and inappropriate or inadequate service delivery responses (Reeve et al., 2006; Robinson, 2005).

While this discussion reports a broad range of issues, I have found that they are drawn from a disparate and fragmented body of knowledge representing methodologically and theoretically diverse approaches. The range of topics covered include risk and protective factors, service delivery practices, the role of support networks, mothering whilst homeless, the impact of sexual abuse, stressful life events, rough living, and single women. Of the 15 projects considered in the discussions above, two have examined why women become homeless, their experiences within, and their
attempts to get out of homelessness. These studies (Jones, 1999; Reeve et al., 2006) do not explicitly use pathways metaphors. Instead they describe factors, contexts, and processes that occurred for the sample groups. These discussions highlight the relevance of questions I posed earlier about homeless pathways and their applicability to women.

Despite these limitations, some specific issues can be traced including the mostly hidden nature of women's homelessness as discussed by Tomas and Dittmar: "If homelessness were a lack of independent housing, secure employment, and a living wage then very many women would have to be considered homeless" (1995, p. 495). Despite turning to family and friends before approaching service providers, women of all ages have been found to be acutely conscious of the potential for "support burnout" (D. Anderson & Rayens, 2004, p. 15) which can lead to the loss of much needed resources and supports (Averitt, 2003).

Accommodation found through networks is not without risk, as many women discover that the offer of accommodation from male family members, friends and 'landlords', is tied to an expectation of sex in exchange for housing (Novac et al., 1996; Reeve et al., 2006; Syngajewski et al., 2007; Tomas & Dittmar, 1995). Remaining in abusive situations also contributes to women’s hidden homelessness (Jones, 1999; Reeve et al., 2006; Tually, Faulkner, Cutler, & Slatter, 2008). Further violent events once homeless complicate and exaggerate the experience for women as they constantly move in order escape abuse and maximise their safety (S. Murray, 2009).

This discussion highlights further questions about women's homelessness that remain unanswered:

- What are the ways in which gendered violence informs a homeless pathway?
- If hidden homelessness is a particular risk for women, can a pathways metaphor build deeper understanding and enhance policy and service delivery responses?

I now examine the relationship between domestic and family violence and homelessness.
**Women and Domestic and Family Violence**

Domestic and family violence is the principal cause of homelessness among women. (Commonwealth of Australia, 2008a, p. 7)

Domestic and family violence is cited as the major reason why women with accompanying children (49% of support periods) and unaccompanied women over 25 years of age (40% of support periods) presented to specialist homelessness services in the 2007/08 period (Australian Institute of Health and Welfare, 2010, p. 31). These figures are only a snapshot of the community-wide prevalence of domestic and family violence as accurate reporting is undermined by issues such as fear, shame, retribution, the source of information (i.e., police or survivors), and retrospective reporting (Australian Bureau of Statistics, 2006; Morgan & Chadwick, 2009). Despite these difficulties and the widely held view that under-reporting occurs, men are three times more likely to perpetrate violence than women (Australian Bureau of Statistics, 2006, p. 6).

The Personal Safety Survey (2006) conducted in Australia found that 31% of women were assaulted by current or previous male partners, with 15% of women reporting assault by an unknown male (Australian Bureau of Statistics, 2006, p. 9). Pregnancy amplifies risk with 36% of women reporting violence from male partners and 17% indicating that the violence commenced when they became pregnant (Australian Bureau of Statistics). Disturbingly, 64% of violence and abuse against women occurs in their homes (Australian Bureau of Statistics, 2006). An earlier Australian study reported that 87% of survivors of violence are women and 98% of perpetrators are men (Access Economics, 2004). Globally, somewhere between 15-71% of women are affected by their partner's choice to enact violence (World Health Organization, 2009). These statistics challenge the populist discourse that men are equally as likely to be 'victims' of domestic and family violence (Reed et al., 2010) along with highlighting the pervasive nature of relational abuse.

Women in domestic and family violence situations have historically been faced with two choices when it comes to their safety and that of their children. These choices are to remain in the relationship and continue to be subjected to violence and abuse, or enter the homeless population. This latter type of homeless pathway has been the
source of frustration and activism by domestic and family violence workers and feminists, as they have long argued that women should have the choice to remain in their homes. When women are able to remain in their homes there is a greater likelihood they can maintain social connections, minimise disruption to children's routines, avoid homelessness, and increase perpetrator accountability through legally enforced removal from the home (Chung et al., 2000; Commonwealth of Australia, 2008a; R. Edwards, 2004; Women's Health Goulburn North East, 2005).

Chung and her colleagues convincingly argued in 2000 that homelessness caused by domestic and family violence represented a “social failure” to criminalise the perpetrator's violence (Chung et al., 2000, p. 2). The end result of this sustained advocacy is the recent introduction of Safe at Home models in Australia. These responses create the conditions for women and children to remain in their homes, while perpetrators of violence are removed. The effectiveness of Safe at Home models depends on the unique risk issues for each woman, and the responsiveness of criminal justice systems. Rigorous evaluation data is yet to emerge from Safe at Home programs in Australia, but early information indicates increases in the number of Violence Restraining Orders issued, additional arrests, enhanced police responses, and women reporting they feel safer (Crinall & Hurley, 2009; McFerran, 2007). Ideally, these responses would form part of a continuum of services matched to different experiences and needs of survivors and would not replace crisis accommodation, counselling, or advocacy services (Oberin, 2009).

It is important to note however, that leaving an abusive relationship is a process that may involve leaving and returning many times, with 35% of women reporting this experience (Australian Bureau of Statistics, 2006; Benevolent Society, 2009). Leaving a domestic and family violence relationship is supported by enactments of individual agency and resistance which may include photographing injuries, keeping written records of incidents, retaliating, secretly preparing to leave (sometimes over many years), obtaining information on domestic and family violence, informing others of the abuse, withdrawing sexually and emotionally, and reframing oneself as a survivor - not a 'victim' (Patton, 2003).
Compared to other groups of women who experience homelessness, there is a reasonable amount of empirical evidence available on domestic and family violence and homelessness. However, little comparative data is available that accounts for the similarities and differences between domestic and family violence and other experiences of homelessness for women. These women are now considered.

Young Women

If your body does not present limits to other people, you begin to feel that you do not have a right to exist, to take up space. (Raphael, 2004, n.p., cited in Wesely, 2009, p. 97)

Whilst young women comprise around 50% of youth homeless populations the amount of research discussing their specific situations is limited (Novac et al., 2002; Reid et al., 2005). The following discussion highlights the available research on young women. However, where major gaps exist in this knowledge base, reference will be made to research on young people's experiences of homelessness so that a broader picture can be established. The opening quote points to the commonly reported experience of young women who experience homelessness internationally; with young women three to six times more likely than young men to experience homelessness as a result of sexual abuse (Alvi, Scott, & Stanyon, 2010; Dizdarevic, 2010; Gwadz, Nish, Leonard, & Strauss, 2007; Rosenthal, Mallett, & Myers, 2006).

Within Australia, young women under 25 were almost four times more likely than young men in the 2007/08 period to present to specialist homelessness services because of sexual abuse (Australian Institute of Health and Welfare, 2010). Between 12% and 29% of women report childhood sexual abuse (Australian Bureau of Statistics, 2006; World Health Organization, 2009). Childhood sexual abuse leaves young women twice as vulnerable to further sexual assault and 20% more likely to experience some form of violence as an adult (Noll, Horowitz, Bonanno, Trickett, & Putnam, 2003; Tyler, Hoyt, & Whitbeck, 2000). Other impacts of sexual abuse on young women include an increased likelihood of engaging in sex work; exchanging sex for accommodation, drugs, and food; substance misuse; post-traumatic stress disorder; self-harm; suicidality; poor
psychological functioning; and compromised coping skills (Dizdarevic, 2010; Graham, 2005; Gwadz et al., 2007; Lindsay, 2000; Novac et al., 2002).

As with their male counterparts, young women typically become homeless in order to leave behind intolerable situations and in their quest for independence (Mallett et al., 2010; Reid et al., 2005). Young women who escape problematic family environments have an increased likelihood of experiencing adverse and multifaceted life events, including poor housing outcomes and an increased likelihood of transitioning to adult homelessness (Enders-Dragasser, 2010; Reeve et al., 2007; Reid et al., 2005).

Other factors specifically related to young women's homelessness include domestic and family violence, mental illness, substance misuse, neglect, physical and emotional abuse, the death of a parent, the failure of child protection systems to provide adequate protection, educational issues, and pregnancy (D. Anderson & Rayens, 2004; Bassuk et al., 1997; Catherine House Inc, 2003; Hughes, 1999; Jones, 1999; Lindsay, 2000; Novak & Schoibl, 2001; Reeve et al., 2006; Stainbrook & Hornik, 2006; Styron et al., 2000; Szoboszlai, 2010; Tomas & Dittmar, 1995; Wesely & Wright, 2009; Zugaza, 2004). In comparison, young men are more likely to experience homelessness due to substance misuse, family conflict, and involvement in the criminal justice system (Dizdarevic, 2010; Gwadz et al., 2009; Novac et al., 2002; Reid et al., 2005).

Family conflict is cited as a common reason for youth homelessness, yet it is a broad term which spans communication difficulties, differences in opinion about a young person's choice of intimate partner, physical assault, sexuality practices and preferences, neglect, parenting styles, parental substance misuse, and parental mental illness (Cauce et al., 2000; Crane & Brannock, 1996; G. Johnson et al., 2008; Mallett, 2010; Rosenthal et al., 2006). Family conflict can also relate to strained relationships between a young person and a step parent coupled with a sense of being rejected by the biological parent (Fitzpatrick & Clapham, 1999; Neil & Fopp, 1992). These discussions alert me to the need for specificity when applying the term family conflict. Again, a gendered analysis is missing from the bulk of discussions on family conflict and homelessness; leaving me wondering what the specific experiences of young women who report family conflict might involve.
Out-of-home-care is identified locally and internationally as a significant risk factor in a range of problematic psychosocial outcomes, with homeless experiences reported by 12% to 42% of young people who experience out-of-home-care (Fowler, Toro, & Miles, 2009; National Youth Commission, 2008). A recent Australian research project found that for young people with an out-of-home-care experience, 73% had slept rough, 27% moved directly from care into homelessness, and at the time of the study, 26% were homeless (G. Johnson et al., 2010, p. 19). Research on attachment, bonding, and the neurobiological development of children and young people highlights that a lack of secure attachment experiences and trauma impact on maturation processes and can manifest throughout the life-course (Perry, 2001). Despite the significance and prevalence of out-of-home-care in youth homelessness, the main reference to young women is the statistical proportion of the sample they represent with little discussion on their specific experiences.

In addition to young people with out-of-home-care experiences, Indigenous, culturally and linguistically diverse, same sex attracted, transgender, intersex and young people with disabilities are particularly vulnerable to homelessness (Centre for Multicultural Youth, 2010; Edwards, 2010; F. Murray, 2010; National Youth Commission, 2008; Novac et al., 2002; Reid et al., 2005). Indigenous young people are identified as over-represented in the youth homelessness population, despite the challenges of enumerating homelessness in Indigenous communities (MacKenzie & Chamberlain, 2008).

The experience of homelessness is complex for culturally and linguistically diverse young people as they navigate different cultural values, expectations, and identities - often as first generation Australians. For young women, this may include clashes around gendered role requirements, culturally informed behaviours, and restrictions on engagement with the dominant culture (Centre for Multicultural Youth, 2010; Dizdarevic, 2010). Many of these young people have experiences of dislocation, separation from family, and trauma before arriving in Australia.

Same sex attracted, transgender, and intersex young people are less visible in specialist homelessness services due to homophobic and heteronormative practices.
which suggests that they constitute part of the hidden youth homeless population (F. Murray, 2010). Extending analysis to young people with disabilities, a picture of even greater risk of homelessness and marginalisation emerges (Edwards, 2010; McDonald, 2010). An examination of the experiences of single women follows.

**SINGLE WOMEN**

Single women are often neglected in the limited amount of gendered research, particularly if the immediate reason for homelessness is not domestic and family violence (Casey, 2002; Sharam, 2008; Watson & Austerberry, 1986). It is asserted locally and internationally that the number of single women experiencing homelessness is expanding, yet under-reported (Adkins et al., 2003; D. Anderson & Rayens, 2004; Bassuk et al., 2001; Casey, 2002; Doherty, 2001; Jones, 1999; Kisor & Kendal-Wilson, 2002; Reeve et al., 2006; Robinson, 2005; Roll et al., 1999; Sharam, 2008; Stainbrook & Hornik, 2006; Wardhaugh, 1999; Watson & Austerberry, 1986). Single women over the age of 45 have been highlighted in Australia recently as an emerging group due to economic and social vulnerability coupled with limited family supports (McFerran, 2010; Prime Minister's Council on Homelessness, 2011).

The marginalisation of single women in homeless research, policy, program, and service delivery raises a number of questions about the factors that create homeless experiences, their skills and capacity to manage homelessness (in light of limited service delivery resources directed at such groups), and their capacity and resilience to build a sustainable pathway out of homelessness. I identified earlier that single women can be constructed as a threat to civil society as they do not fit dominant constructions of wives, mothers, and nuclear families (Watson, 1988). This highlights the importance of ensuring that the focus on women’s homelessness is broad and inclusive, encompassing women who experience domestic and family violence, young women, and single women.
The conceptual framework summarised

The conceptual framework that has guided this project has incorporated critical post-modern, social work, and feminist framings which strengthen my claim to produce practice oriented research findings. As major homelessness studies have failed to account for gender differences in homeless pathways, questions about gendered applicability and transferability, differences between groups of women, the specific experiences of young women (i.e., out-of-home-care or from groups deemed to be at specific risk of homelessness), and single women remain unanswered in the literature to date.

This project asserts that framing homelessness as a dynamic process underscored by metaphorical constructs such as pathways facilitates the building of empirical evidence about women's homelessness from a critical, nuanced, and gendered perspective. Finally, it is important to note that the broader backdrop to this conceptual framework is the national policy context of breaking the cycle of homelessness and improving service delivery responses (Commonwealth of Australia, 2008a). The next chapter examines how the conceptual framework has been operationalised through specific methodological approaches and strategies.
CHAPTER THREE - METHODOLOGY AND METHODS

Doing feminist research demands that my participation and presence – my voice – within my research project must be explicitly admitted and included. (Haggis, 1990, p. 77)

The conceptual framework discussed in the previous chapter is reflective of my positionality, of which I have been conscious of throughout all stages of the project. This has involved ongoing connection to the values, beliefs, assumptions, biographic experiences, motivation, and commitments I have operationalised as well as the processes I employed in making sense of and constructing others (Chase, 2005; Cousin, 2010; Darlington & Scott, 2002; Ellis & Berger, 2001; Fontana & Frey, 2005; Hewitt, 2007; Mills, 2004). This positionality is reflected in my framing of the participants as teachers, collaborators, guides, and wise experts who have assisted me to improve my understanding of what it means to be the 'other', 'homeless', and marginalised.

Qualitative and quantitative methodologies orientate researchers and their audiences in particular ways to ideas about validity, objectivity, reliability, and transferability. The ways in which ‘truth’, ‘reality’, knowledge, ontology, and epistemology are constructed distinguish methodological approaches such as quantitative or qualitative frameworks and mirror researcher positionality (Critcher et al., 1999; Darlington & Scott, 2002; Oakley, 2000). Interpretive and qualitative research approaches are more likely to employ concepts like trustworthiness, accountability, and transparency as: "truth and legitimacy do not speak for themselves, but rather are produced and situated discursively" (Ceci, Limacher, & McLeod, 2001, p. 714). Qualitative and interpretive methodologies were chosen as the best possible fit for exploring women's lived experiences of homelessness.

In order to enact trustworthy, accountable, and transparent research processes I have continually adopted a number of strategies. These include critical reflexivity, adopting an ethical stance, ongoing examinations of power relations, creating spaces for poly-vocality, and co-constructing findings and representations. These strategies are explained in this chapter, starting with critical reflexivity.
Critical reflexivity

Our view of the world is always from within it, and what we see, or what we erase from view, will be framed by our cultural resources, particularly our language. (Cousin, 2010, p. 10)

Terms like reflection, critical reflection, reflexivity, and critical reflexivity are used interchangeably; however, they refer to different actions and theoretical frameworks. Reflection involves reflecting upon action or an incident, often with a view to improving one's practice (Adams, 2002). Critical reflection considers the influence of a wide range of structural factors on individual, family, and community experiences with the explicit aim of facilitating emancipation, transformation, and social justice (D'Cruz, Gillingham, & Melendez, 2007).

Reflexivity is more commonly presented as a post-modern process that examines dominant and individual assumptions, beliefs and values; uncovering taken-for-granted practices, power relations and the mechanisms by which knowledge is generated (D'Cruz et al., 2007; Taylor & White, 2000). Reflexivity provides opportunities for researchers to reflect on dominant discourses and taken-for-granted assumptions, whilst enhancing self-awareness (J. McCabe & Holmes, 2009). Given this, reflexivity is presented as important within homelessness research as it involves naming and knowing one's positionality, as well as considering the unanticipated and actual implications of the project and its outcomes (Fopp, 2007).

Critical reflexivity forms a key part of my social work and academic practice and incorporates a post-structuralist approach to deconstructing taken-for-granted assumptions, while incorporating a critical examination of structural and institutional influences and power relations. In this project, critical reflexivity has been an important strategy which promoted examination and consideration of my positionality and privilege as they sat alongside the participants.

The critically reflexive strategies I employed included self-awareness and questioning, continual examination of relationships and interactions between myself and
participants, reviewing power relations, questioning how knowledge and taken-for-granted assumptions came to exist, inviting participants to examine dominant discourses which framed their experiences, and working liminal spaces between certainty and uncertainty. Journaling, supervision, stepping into the world of participants, and critical conversations with peers also assisted me in these strategies (see also S. Riley, Schouten, & Cahill, 2003).

The analogy I use to explain my process of critical reflexivity is the application of different lenses to situations (identified in different components in Figure 1) which then created the space for comparing, contrasting, and questioning. This means the approach is comprehensive, taking into account multiple domains. There were times for example when I found it difficult to build rapport with some participants. Enacting critical reflexivity allowed me to systematically examine issues related to my personal and professional values, theory and knowledge; power and its workings; difference; disadvantage; opportunity; and broader influential frameworks. Critical reflexivity means my responses (particularly when troubling) became more conscious and the focus for examination. Figure 1 highlights these features.

**FIGURE 1 – PRACTICE FRAMEWORK**
This is not an infallible approach and lapses in reflexivity have occurred throughout this project, (for example when I found myself silently disagreeing, judging or questioning participant responses and narratives). The techniques to strengthen reflexivity mentioned above (i.e. journaling, supervision, discussions with critical friends) have assisted me to identify lapses in critical reflexivity, yet as Duncan notes: "Despite our attempts to be transparent, our intentions, emotions and interiority were not always accessible to ourselves, and even less so to informants and readers of the research account" (Duncan & Watson, 2010, p. 51). Critical reflexivity is one of the manifestations of my commitment to be an ethical practitioner which I now consider.

Ethical research practice

The link between reflexivity and ethical research seems to rest on transparency. (Etherington, 2007, p. 604)

I have operationalised the Australian National Health and Medical Council (National Health & Medical Research Council, 2007) guidelines and principles on research in this project. In addition, I have incorporated the Australian Association of Social Workers’ Code of Ethics (Australian Association of Social Workers, 2010) to reflect my discipline base. These frameworks orientate research practitioners to act consciously and respectfully, avoid harm to participants, promote informed consent, and invite the right to withdraw without repercussions. Ethical clearance for the project was obtained through RMIT University (then) Design and Social Context Portfolio Research Ethics Sub-Committee on 14 March 2006.

I engaged with a broad range of literature on ethics, reflective of my chosen methodologies and my emphasis on framing ethics as an ongoing business - not a one off event related to formal ethics approval. Feminist and interpretive ethical frameworks have been the most relevant for this project, as they align with my commitment to enact emancipatory and collaborative approaches (Gilligan, 1998; Hewitt, 2007; Paradis, 2000). The idea of the distanced and ‘objective’ researcher is challenged and deconstructed in feminist approaches (Acker, Barry, & Esseveld, 1996; Naples, 2003; Oakley, 1981; Oleson,
2001; Wolf, 1996) yet discussion on the practicalities and challenges in enacting such values is limited in the feminist literature (Naples, 2003).

I have been particularly interested to explore the connections that emerged with participants and have been challenged and surprised by the opportunities to re-think similarities, differences, and connections between the women and myself. Some of these connections are easy to describe; others are less tangible. I am not referring to relationships of an intimate, sexual, or exploitative nature as these type of blurred boundaries have no place in research or practice (Fontana, 2001; Irwin, 2006; Reinharz & Chase, 2001). Boundaries are understood in this project as the spaces and differences that separated myself from others (Crichton-Hill, 2004; Dickson-Swift, James, Kippen, & Liamputtong, 2006; Liamputtong, 2007). My application of boundaries throughout all areas of my practice represents a combination of attention to separation and the relational, liminal spaces that can grow in these openings and differences. My particular and limited experience of homelessness created an immediate point of distinction between the women participants and myself. In making these comments, I am drawing attention to the tensions and difficulties in assuming that my standpoints (gender, age, life experience etc.) indicate a capacity to speak for other women.

I take the view that differences need to be acknowledged to avoid assumptions of homogeneity; however I was open to the discovery of similarities between participants and myself in the research process. My connection with Lucia, a 41 year old non-Indigenous mother of three, is an example of how through purposeful researcher self-disclosure and engagement with the lived world of participants, rich possibilities emerged (Oakley, 1981). Lucia and I share similar professional and life experiences and are close in age. Lucia pointed these similarities out at our first meeting, and I affirmed our comments. We share a critical and deconstructive approach to professional practice, are both committed feminists, and have worked in similar areas - all issues that we celebrated and which facilitated rapport between us.

Ultimately, the research relationships I sought to build with participants reflected my commitment to partnership and collaboration. Self-disclosure is an important part of feminist research as it has the potential to reduce power differentials between the
researcher and participants (Acker et al., 1996; A. Coleman, 2002; Rager, 2005; Wolf, 1996). It is also important to note that the un-reflexive application of self-disclosure or other dialogic strategies do not reduce power differentials (Naples, 2003). Dickson-Swift et al argue for instance, that self-disclosure “encourage[s] participant disclosure” (2006, p. 856), but this speaks to me of a colonised positioning of participants and does not reflect my positionality. From my perspective, reflexive, purposeful self-disclosure has the potential to build connections, but should not be used as a shortcut to elicit information from participants. I carefully and consciously consider self-disclosure in all areas of my practice and ensure I am clear about my motivation for disclosing. This forms part of my critically reflexive practice, and as with Rager (2005), I avoid privileging my experiences and stories over the participants.

Engaging with difference in a respectful manner is essential if one is to undertake ethical research. The cultural differences that existed between Indigenous and culturally and linguistically diverse participants and myself have been key differences that I have carefully considered and ethicised in this project. Institutionalised ethical requirements as seen in national guidelines (National Health & Medical Research Council, 2007) rarely capture the diversity, capacity, or experiences of Indigenous and culturally and linguistically diverse participants (Duncan & Watson, 2010).

Key features of ethical research with Indigenous and culturally diverse women in this project include openness and respect for difference, assuming a naive enquirer position (i.e. not knowing, and being open to being informed by those with the lived experience), respectful relationships, critical reflexivity, demonstrating trustworthiness, and integrity (Smith, 1999). The intersections of race and culture and other factors highlighted by women have been privileged by sensitively asking questions about how cultural identity, practices, and values mediated experiences of homelessness and violence. Indigenous and culturally and linguistically diverse participants were open to discuss these issues, with Indigenous women referring to examples of racism and discrimination which are discussed and contextualised in the empirical chapters.

Planning and preparing for research by anticipating possible ethical and sensitive issues and developing strategies to address these prior to entering the field have been
important in this project (Dickson-Swift et al., 2006). I found the early preparation work required to obtain ethics and candidacy approval highly beneficial in promoting my reflexive consideration of anticipated ethical issues. In particular, I actively engaged with the idea of Indigenous involvement and representation in this project, noting that it is a complex ethical issue to contend with in the context of my subjectivities. I made contact with, and invited the input of, seven Indigenous organisations and leaders many times throughout the project. To my disappointment, the input was limited despite my repeated attempts and invitations to contribute in any manner that suited. Two service providers offered ideas on ways of approaching Indigenous women in order to maximise their participation.

National Health and Medical Research (National Health & Medical Research Council, 2007) guidelines do not explicitly address research with culturally and linguistically diverse groups; however, I adopted similar principles to those recommended for Indigenous people. I consulted with a transcultural domestic and family violence agency with whom I had a pre-existing professional relationship and this enhanced my understanding of the particular and local experiences of these women. Research and ethical guidelines are concerned with individuals or communities who may already experience or be exposed to risk as a result of research activities, and I now consider this.

‘Vulnerable’ participants

Qualitative research methods are well matched to research that seeks to explore potentially sensitive topics as in-depth interviews can create contained spaces for participants’ stories, emotions, and experiences (J. Johnson, 2001; Liamputtong, 2007). The approach I have taken in this project is to heed cautions in relation to potential vulnerability, while also maintaining an open and reflexive stance that values the capacity and agency of each woman. This stance invites possibilities and undermines the potential to pathologise participants based on their experience or categorical identity (i.e., women experiencing homelessness).
This has been reflected in a number of ways including my choice of language. I use the term ‘people experiencing homelessness’ rather than ‘homeless people’. This signifies that homelessness is one part of a person’s experience (past or present) and not the sole defining feature of their multiple subjectivities. It also speaks of the relationship between language, discourse, power, and ‘reality’. Another way I have operationalised this principle is by attempting to reflexively suspend my assumptions and professional knowledge about the impact of homelessness, abuse, domestic and family violence, mental illness, substance misuse, or having one's children taken into care. This stance opened up unexpected possibilities and from my perspective as a social worker, new ways of understanding resilience, capacity, and coping. This discussion does not negate the trauma, suffering, and imprints of marginalisation and abuse experienced by most women in this study.

**CONFIDENTIALITY**

Confidentiality, privacy, and anonymity are important ethical issues (Australian Association of Social Workers, 2010; Bhattacharya, 2007; Bryman, 2004; Darlington & Scott, 2002; Dudley, 2005; Hewitt, 2007; Letherby, 2003; Liamputtong, 2007; Naples, 2003; Neuman, 2006). Protecting participants’ identities may include changing names, locations, and other identifying details (for example number of children or cultural identity) through to ensuring that any documents associated with the participant are securely stored in locked cabinets and password protected in electronic storage devices.

All of these procedures have been followed in this study; however some women requested that their first name be used and I responded by discussing risks associated with confidentiality and identification, along with the extended timeframe of the project (meaning while a woman may choose to have her name used in 2006, this could change by 2012 when the project was due to be completed and we may or may not still be in contact). My professional practice standards emphasise confidentiality and I was challenged by the women's requests to be identified by their first names. I discussed this with my supervisors and we agreed that the women were expressly requesting their names be used, while being informed of potential risks.
I chose to change the name of one woman as it is distinctive and when coupled with her story could have led to her being identified, particularly as she is a regular user of homelessness services and classified as 'difficult' by most agencies. Additionally, contact with this woman was broken when she changed her mobile phone number, which meant that I could not check if her consent was still valid some years after being interviewed. Confidentiality can also be tested in cases where participants disclose information related to illegal behaviours or intended actions (Bryman, 2004; Liamputtong, 2007; Yegidis & Weinbach, 2006). Disclosures about consumption of illegal substances were made by some women and no action was taken as I assessed there was no significant risk to the woman or others. These discussions point to the importance of assessing and understanding risks and impacts, which I now consider.

**Risks and Impacts**

Thorough assessment of the potential benefits, risks, and harm associated with the research project has been an ongoing activity, as has paying attention to ensuring that benefits outweigh any potential harm (Etherington, 2007; Hewitt, 2007; Letherby, 2003; Liamputtong, 2007; National Health & Medical Research Council, 2007; Yegidis & Weinbach, 2006).

The potential benefits and implications of participating were explored with women and service providers during my initial contacts. Benefits were presented in terms of potential changes to service delivery practices and policy, privileging the voices and perceptions of women who experience homelessness, bringing a woman-focussed analysis to homelessness research, and improved understanding of service delivery and policy practices. The majority of women mirrored Elsie’s motivation for participating in the project as "wanting to help others" in the hope that awareness would be raised about the gendered nature of homelessness, violence, and abuse.

A relational interviewing style was adopted to facilitate the building of meaningful, non-exploitative rapport with participants and demonstrate transparency. Research interviews can reflect counselling interviews, yet the purpose is clearly
different - something I have kept in mind throughout all contact with participants (Ellis & Berger, 2001). Despite this, research interviews can be experienced as therapeutic and healing (Hewitt, 2007), which reflects my experience in this project. The majority of women commented without prompting that the interview had been cathartic, therapeutic, and helpful as it provided the opportunity to consider the fullness of their story and trace the changes they had brought about (Averitt, 2003). The nature and frequency of these comments suggested that the interviews created a reflective space for women to examine their experiences from different angles.

However, for those women who continued to experience homelessness, or reported a sense of vulnerability I was aware that the interview had the potential to reinforce the perception that on the surface, not a lot had changed since their first experience of homelessness. With these women I regularly summarised and paraphrased the effort they had put into changing their circumstances, the outcomes, their strengths, and the barriers they had faced. Most of these women were weary from years of abuse and homelessness and consequently did not report an overwhelmingly positive stance towards the future, yet they expressed appreciation that I was interested in their experiences, positioned them as experts, and listened closely to their narratives. This sentiment is picked up by Debra, a 35 year old mother of three, who entered homelessness on the substance misuse pathway when she explained why she was comfortable talking with me:

You can tell people who’ve had a hard life. It doesn’t mean that they look like shit. It means they’ve got heartache on their face and that’s ... all there is about it and it’s the truth. (Debra)

Before each interview I discussed the potential for distress and asked each woman about her personal and professional support networks and who they would normally approach for emotional support or debriefing. In most cases, women had friends, family, or professionals, yet in a small number of cases women did not have supports, and we collaboratively identified professional supports that could be accessed if needed. Through my work in crisis, casework, and counselling settings I have developed a skill base in assessing and authentically responding to distress.
One woman became distressed when sharing her story. The woman’s anguish was tied directly to her sense that she had "failed" as a wife and mother because she had ended a 16 year abusive marriage. This sense of failure was linked to cultural and religious values which privilege marriage regardless of abuse or violence. When she became distressed, I stopped asking questions and suggested we conclude the interview. She consistently said that she was "okay" and wanted to continue, but was saddened by thinking about the events that had led to her decision to end her marriage. I validated her experiences, statements, and emotions throughout the interview.

I rang the woman the day after the interview and she reiterated that she was “okay”, but continued to experience sadness about the breakdown of her marriage. I followed up with a phone call one week later and the woman thanked me for my concern, and reiterated that she was fine. Most other women commented at the end of the interview that they were surprised they had not become distressed during the interview and reframed this as an indication of their healing and ability to gain emotional distance and closure from their experiences.

This discussion about impacts and risks is not complete without consideration of the ways in which researchers can also be emotionally affected, and Ellis and Berger best articulate my positionality in this area: “By seeing myself as a subject as well as a researcher, I am able to move from the distanced observer to the feeling participant and learn things I could not learn before, both about them and me” (2001, p. 858). Most literature frames impacts on researchers as risks to be managed (Dickson-Swift et al., 2006), yet some authors suggest that research encounters offer rich opportunities to build a deeper understanding of the self (Grinyer, 2004; Naples, 2003; Rager, 2005; Wray, Markovic, & Manderson, 2007).

As an experienced social worker, I have well developed strategies and systems to enhance my emotional and professional resilience and detect the potential for vicarious trauma, yet I am not immune from such experiences. I expected to be emotionally, physically, and spiritually affected by the women and their stories of courage, growth and resilience - and I was. I experienced sadness and anger around men's choices to enact violence and abuse against women and girls and celebrated the strength and
wisdom of the women who survived and healed from such experiences. I experienced the engagement with women as a privilege and respected the women, myself, and my responses when I was affected by what I heard or witnessed.

I do not frame my emotional reactions as unprofessional, nor do I consider them a source of shame. Rather, I see them as an opportunity to connect to myself, my strengths, and vulnerabilities. Being affected by another invites me to reflexively examine myself and those who have gifted me by sharing their experiences. I am not the same person I was before I started this project, and I am humbled and grateful for this transformation. It has been a precious journey in sacred territories and is only possible because of the generosity of the women, other stakeholder participants, and my supporters, including my supervisors.

As identified throughout the discussions to date, I position participants as experts by experience, and this reflects a strengths approach (Saleebey, 2006). As already noted, women said they were motivated to participate because they wanted others to know about their experiences and hoped that change would occur in policy, programs, service delivery, and community perceptions. Women affected by domestic and family violence talked about wanting people to understand why it is not easy to leave an abusive relationship – in other words their experience drove them to participate and debunk myths about why women may remain in abusive relationships.

The area of acknowledging participants’ contributions is framed as ethically thorny, but there are a range of opinions about compensating participants for their contributions, which include reimbursing costs such as parking, petrol and public transport, through to reciprocating by undertaking errands for participants, providing information, or paying participants for their time and expertise (Bryman, 2004; Darlington & Scott, 2002; Dickson-Swift et al., 2006; Grinyer, 2004; Liamputtong, 2007; National Health & Medical Research Council, 2007; Neuman, 2006; Paradis, 2000; Wolf, 1996; Wray et al., 2007; Yegidis & Weinbach, 2006). Despite information sheets containing a description of the $10.00 payment that would be provided to the women, many were surprised when I handed this to them at the completion of the interview. Most women said that their participation was not dependent on being paid; rather they
wanted systemic and institutional changes to occur so that women would not have to go through what they experienced. In addition to making this small payment of recognition, I took food and beverages to share at each interview. I now explore how women became involved in the project.

**Recruitment and access - women participants**

When it comes to the recruitment, inclusion, and exclusion of participants the National Health and Medical Research Council (2007) recommends a fair process which ensures a range of eligible participants are provided with the opportunity to be involved. These principles were adopted in applying purposive sampling based on inclusion criteria of women over the age of 18 who had at least one experience of homelessness in the previous 10 years.

I began the recruitment process by examining housing, homelessness, and human service directories. I then made telephone and email contact with agencies representing a diverse mix of service types and models, target client groups (age, culture, and presenting issues), and locations within metropolitan Perth. I was known to some of these agencies through my activities in homelessness, domestic and family violence, and social work education. In most cases having pre-existing professional networks enabled my access and allowed me to meet staff, explain the project and anticipated outcomes, detail my collaborative research approach, and answer questions. In two cases, being known to an agency and its management hindered my access, despite numerous contacts including visiting and discussing the project in person. Both of these agencies position themselves as research active in the homelessness and human service fields.

The types of agencies I approached included women's refuges (homelessness, domestic and family violence, women with children in their care, and single women), youth homelessness and housing services, tenancy support programs, homelessness day centres, family support agencies, generalist homelessness agencies, Indigenous, and culturally and linguistically diverse specific homelessness services. Figure 2 highlights the sources and number of referrals of women participants.
The agencies that agreed to promote the study on my behalf were requested to provide brief verbal details of the study and share written information with potential participants. I encouraged agency staff to make contact with me at any time with queries. In the case of the domestic and family violence group, I was invited by the facilitator to join the group after their final session and explain the project.

The emphasis during recruitment was on voluntary involvement, confidentiality, and reassurance that participation in the study had no bearing on receipt of services from the referral agency. This was identified in written material and reiterated once contact was made with the woman. Women were also invited to ask questions of me or about the study prior to meeting for an interview. When contact was made with women I checked on safety concerns and procedures I needed to follow regarding telephone, email, and in person contact. Three of the four women who self-referred were working in agencies targeted for recruitment and asked to be involved in the project as they had experienced homelessness. The other woman in this category heard about the project from a friend (who had self-referred) and asked to be involved.

Working with agency staff was not altogether straightforward and I spent considerable time explaining the project and research processes in order to maximise the understanding and accuracy of information given to potential participants. With some
agencies this went smoothly and with others minimal or incorrect information was relayed to women. Based on previous research experience and my knowledge of the demands of service delivery in the homelessness field, I expected some slippage in terms of accuracy of information. I countered this by asking each woman at the first contact what they knew about the project. This gave me a snapshot of the woman’s knowledge, while allowing me to clarify information, emphasise confidentiality, explain the right to withdraw, and the distinctions between this study and the referral agency.

I experienced challenges with the gate-keeping practices of agency staff (Letherby, 2003). Recalling my experience as a service provider, I had some understanding of the potential for agencies to refer women deemed 'suitable' (for example women constructed by service providers as likeable, articulate, or adequately recovered from their experiences). I addressed this by regularly discussing with agency staff my desire to capture a wide variety of women’s experiences. A small number of agencies accepted this invitation and promoted a woman’s right to assess her own suitability for involvement. This latter approach emphasised the woman’s capacity and agency, rather than assuming that she was unable to make informed decisions. Other organisations adopted a protective stance and staff only shared information about the study with women they perceived suitable. In some cases, agencies advised me that some women’s circumstances made it inappropriate for them to be informed of the study. Without wanting to discredit the service providers’ assessments, this approach narrowed the variety of women who were referred and represents a limitation of the project.

An additional complication that arose in working with agency gatekeepers was the potential for certain unhelpful practices of the agencies to be brought to my attention by women participants. Close work with human service agencies can inadvertently lead to researchers adopting an evaluative stance (Darlington & Scott, 2002), and this occurred for me when a woman disclosed her dissatisfaction with agency practices and staff attitudes. I assessed the woman's concerns to be justified based on my interactions with staff and the language they used to describe her whenever I rang the agency to speak with her. This situation was further complicated for me as I had worked in the agency 14 years prior to the interview as a support worker and manager. I
was not connected personally or professionally to the agency when I conducted the interview, but my experience of working in the service positioned me in a distinct way when this woman talked about how she was constructed as uncooperative and difficult by the agency.

This was cause for critical reflexivity on my part as it challenged me not only as a researcher, but also as a social worker committed to addressing injustice and disadvantage. I was also challenged to think about how this woman's presentation would challenge me as a social worker, and how seemingly cooperative service users are constructed as 'good' clients (Marvasti, 2002). I did not resolve this matter, as the woman was given notice to leave the accommodation service and stopped responding to messages I left on her mobile phone, which was later disconnected. The recruitment of stakeholders is considered next.

Recruitment and access - other stakeholders

After the interviews with women were completed and initial analysis undertaken, the interview guide for the other stakeholders was modified. The changes made reflected themes that emerged from the women's comments about their experiences of service delivery practices and social, political, and cultural constructions of women experiencing homelessness. The revised interview guide was approved by RMIT University Ethics Committee on 2 April 2009, and can be found at Appendix 2. In order to avoid an evaluative stance that could potentially close down discussions (see Darlington & Scott, 2002), I opened the interview with a statement along the lines of:

It is my sense that no practitioner or agency sets out to be unhelpful or deliver inappropriate responses. However, women in this study have identified occasions where the response they received was far from helpful. Please have a look at the women's comments in the interview guide, and describe why you think these unhelpful practices occur.

The approach taken was intended to be open and inquisitive, aiming to explore the reasons why unhelpful practices occur, rather than evaluating or blaming
practitioners and agencies. This approach was also considered more likely to provide the necessary data to create a profile of helpful practices that could be triangulated across all participant types. A number of stakeholder participants commented on this approach, identifying it as a good practice research approach.

As mentioned earlier, I was committed to ensuring the project was culturally sensitive, inclusive, and respectful. I sought to engage Indigenous and culturally and linguistically diverse organisations and influential representatives from the outset of the project. I was also committed to obtaining input from a range of stakeholders who could supply diverse and challenging ideas and evidence about women’s homelessness. Despite my persistent requests for Indigenous, peak youth and disability organisations, generalist homelessness, and single women’s refuges to be involved they did not respond. This represents a limitation of the study in that it does not capture a representative sample of stakeholder views. The processes involved in interviewing and enacting accountability to participants are now considered.

**Interviews and accountability**

This project utilised in-depth, semi-structured one-to-one interviews and the women’s interview guide can be found at Appendix 1. Semi-structured and conversational interview approaches were chosen to provide the opportunity to enter into the world of participants, elicit in-depth information, provide a safe environment, situate discussions in relevant contexts, and link experiences and events (Critcher et al., 1999; Darlington & Scott, 2002; Fontana & Frey, 2005; J. Johnson, 2001; Liamputtong & Ezzy, 2005; Stringer & Dwyer, 2005).

I adopted a biographical approach to interviewing women in order to capture the breadth and depth of their homeless experiences. Biographical research focuses on the social construction of lives and worlds, facilitating "active, creative involvement" (Gubrium & Holstein, 1995, p. 46). Biographical approaches are favoured by many homelessness researchers as they capture meanings and intersections of events, factors and situations that mediate experiences of housing and homelessness (Clapham, 2005; G.
Johnson et al., 2008; Mallett et al., 2010; May, 2000; Robinson, 2003). The concept of turning points (R. Edwards, 2004; Patton, 2003; Riessman, 2001) was adopted as a way of understanding changes in the biographies of women, with women asked to consider events, other people, and themselves as actors in situations where turning points occurred. In a similar way, Stringer and Dwyer identify “epiphanies”; defining them as “transformational, turning point experiences” (2005, p. 90).

Thirty five women between the ages of 18 and 67 years participated in a one-to-one, in-depth interview which ranged from 30 minutes to three hours. The interviews occurred in locations chosen by the women, which included service delivery agencies, women’s homes, parks, and a cafe. In the case of the interview in the cafe, I spoke with the woman about confidentiality issues; however, she insisted that the interview take place in this location.

My approach was open and invitational and started by creating connections with the woman prior to commencing the interview questions. Taking an informal and conversational approach fits my practice style and covered topics like the woman's interests and activities (Fraser, 2008). I also spoke about my social work background, past and current work, motivations regarding the research project, and hoped for outcomes. I provided copies of the interview guide, project information, and if the consent form had not previously been signed, requested that the woman complete it. The interview started with me inviting the women to talk about their first ever homeless experience. I then asked the women to talk through all of their other experiences of homelessness. Interwoven in these stories of homelessness were life events, emotions, meanings made, the role of others (family, friends, partners, and children), and anything else the women considered relevant.

My interpersonal communication skills such as paraphrasing, reframing, and using the woman's preferred language underpinned the interviews. On the surface, the flow of the interviews was often circular; however, I viewed this as the process of telling a story about experience and associated meanings. I was able to return to themes contained in the interview guide when needed; yet I took the stance that the woman's telling of the story would go where it needed to and the information was important and
relevant. Basic demographic data, such as date of birth, number and age of children, care arrangements of children, housing type, languages spoken, and income source, were also collected.

The women were asked if they preferred to have the interview recorded or to have handwritten notes taken, with 27 women choosing to have the interview recorded. Recorded interviews were transcribed verbatim, with half completed by myself and the remainder by a professional transcription agency. I checked the transcripts against the audio-recording and made alterations where required. Pauses, sighs, and expressed emotions such as happiness or sadness were included in the transcripts. Safety and privacy issues were checked with women at the end of the interview in terms of risks and issues associated with me making follow-up phone calls, posting material to home addresses, and ongoing involvement in the study with alternative arrangements put in place if women so requested.

Transcripts of recorded interviews were sent to women within a few weeks of the interview, and where notes were taken, reconstructed narratives of the woman's experience were sent. A follow-up phone call was made to all women within a few days of the interview to debrief and check on feelings that had arisen. The majority of women commented on the healing nature of the encounter, referring to my reframing and validating responses which helped them construct a different set of meanings about their experiences.

Reading the transcripts sensitised me to the differences between verbal and written expression, and I discussed this with the women when I called them a few days after the interview, referring to how surprised I continue to be about how much I say 'okay' and 'umm', despite reading my comments in the transcripts many times. My intention was to normalise these verbal devices. This phone contact also gave me an opportunity to affirm and validate the woman on her willingness to share her story with me and reiterate the next steps in the project.

There was one exception to this arrangement and that involved a woman who was living rough and did not have a mobile phone. I arranged to deliver the transcript in a sealed envelope to the day centre which had referred her. I notified my contact person
at the day centre of this arrangement in advance and this member of staff handed the envelope to the woman the next time she visited the agency. I recontacted the centre a number of times after the woman collected the envelope and was advised the woman had not left any messages for me.

Approximately one month after transcripts were sent, I called each woman and invited comment on the transcript. Not all women read the transcript, and those that did accepted this record. Following this, a reconstructed narrative derived from transcripts was developed and sent to each woman. Women were followed up two weeks after the reconstructed story was sent to them, inviting feedback and enquiring about the experience of reading the reconstruction. Two women requested changes; one to strengthen her anonymity and the other provided more information, which led to a fuller picture of her experiences. The changes made in relation to anonymity involved altering children's details and other key psychosocial and demographic matters.

Responses from women to the reconstructed narratives varied from a sense of celebration on their progress to heightened emotions which were framed as mostly positive, and in the case of one woman an inability to fully read the reconstructed narrative because she found it too emotionally painful to re-engage with her past. With this woman, I offered to visit to discuss her responses and link her into support services, but she refused these offers, advising that she was well supported. She reported that it had disturbed her to read a small part of her story, but she was able to undertake her usual activities and roles. I followed up with another phone call two weeks later and the woman reported that she was "travelling well", and did not intend to read the reconstructed narrative in the near future, although she had asked her mother to read it, as she felt it would strengthen their relationship.

A number of women reported sharing the reconstructed narrative with key people in their lives as a testament to their experiences and capacity to grow from adversity. Based on the feedback from the women I was left with a sense that providing the reconstructed narrative was a solid step in terms of accountability as well as giving something back to the women that was meaningful.
Contact has been maintained with 14 of the 35 women throughout the life of the project, which has consisted of providing updates on the progress of the study and maintaining relational contact with the women. Of the remaining 21 women, contact was broken at some stage due to address and phone number changes and a small number of women advising they did not wish to have ongoing contact (for example, one woman was moving to a drug rehabilitation program and was not allowed to have contact with anyone outside the facility for 12 months, and another woman had started a new relationship and wanted to leave her past behind). Children were not interviewed in this project. I acknowledge that homelessness has significant impacts on children’s wellbeing. Women with children were invited to talk about homelessness impacts on their children and this is discussed in the findings chapters. I now explore the interviews and accountability processes I enacted with the other stakeholder participants.

My initial plan with stakeholders was to conduct one-to-one interviews; however, five stakeholders requested colleagues join the interview when I arrived at the agency. I agreed to the request, as I assessed there were benefits in having extra input and I detected no risks in this approach. Copies of the interview guide, information sheet, and consent form were emailed to stakeholders prior to the interview, to give them time to prepare their responses. Interviews with stakeholders lasted on average one hour, and participants were asked to decide on the use of a pseudonym or their actual name. All elected to have their name used, however, after reflection and discussion with my supervisors I allocated codes based on the role of the participant. The terminology adopted to describe these groups includes policy makers, policy influencers (peak body representatives and sector activists), and service providers. Where quotes from stakeholder participants are used, they are identified in the following ways, with a number attached:
FIGURE 3 – STAKEHOLDER PARTICIPANT CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Type of stakeholder</th>
</tr>
</thead>
<tbody>
<tr>
<td>PI</td>
<td>Policy influencer</td>
</tr>
<tr>
<td>PM</td>
<td>Policy maker</td>
</tr>
<tr>
<td>SPY</td>
<td>Service provider youth</td>
</tr>
<tr>
<td>SPDFV</td>
<td>Service provider domestic and family violence</td>
</tr>
<tr>
<td>SPG</td>
<td>Service provider generalist</td>
</tr>
</tbody>
</table>

All interviews were recorded and a transcript sent back to each stakeholder participant (i.e., in one case three service provider practitioners participated in an interview and each person was sent a transcript). Participants were invited to check the transcript for accuracy and provide further information or clarification if necessary, with none received. Reconstructed narratives were not developed for these stakeholders for two reasons. Firstly, the positionality of the stakeholders was assessed as one of greater privilege and authority, whereas for the women participants their individual contributions were personal, often containing sensitive information and the women occupied different positions of power. Secondly, the input from the stakeholders complemented, challenged, and provided a different perspective to the women’s lived experiences. I now consider the interpretive methods and strategies I applied.

Interpretation

The world of our lived experience ... is the very ground from which all understanding grows; what we know is always negotiated within the culturally informed relationships and experiences, the talk and text, of our everyday lives. Our values and beliefs will show themselves in our actions whether we stop to talk about them or not. (Angen, 2000, p. 384)

As Angen identifies, acts of interpretation or analysis are not value neutral and are representative of the researcher’s positionality. A number of principles and areas of
focus have underpinned the interpretive activities in this project including providing spaces for poly-vocality. This meant aiming to privilege the women's voices, inviting and encouraging the women's input at different stages of the project, and using verbatim quotes. In using verbatim quotes I have imposed minimal editorial interference and focussed on the meaning or emphasis the participant expressed (accepting this is my interpretation of the emphasis). Each woman is represented in different parts of this thesis through verbatim quotes or descriptions of experience and context.

My commitment to poly-vocality was enacted by reconstructing the women's narratives from transcripts and notes taken during interviews. Even though transcripts were provided to all women, this in itself did not indicate how I would represent a woman, or the ways I made sense of her story. Reconstructing 35 women's stories was time consuming, yet it provided meaningful opportunities for the women to get a better sense of my interpretations and representations of them and their stories, it also helped me to make sense of the empirical materials. This approach invited a re-presentational stance, and ensured greater accountability on my part as it made my analytic strategies and interpretive conclusions more obvious to the women. It told the women something about me, as much as it said something about them.

Another way poly-vocality has been encouraged is by inviting women to be involved in disseminating the findings of the project. This invitation was issued when interviews were undertaken and a small number of women expressed an interest in this. One woman said she would like the opportunity to perform a song she has written about her experiences of domestic and family violence to homelessness conference audiences. Another woman is keen to co-author articles about parts of the thesis findings. Others said they would like to tell their story to audiences comprising policy makers, academics, researchers, and service providers. These activities are planned after the examination of the thesis.

My commitment to centring the women's voices sits alongside my authorial control which I have managed through ongoing critical reflexivity. This is an overtly political project; meaning that my voice will differ from some participants in this regard. Fine and her colleagues point to this conundrum when they say: “How do we connect

~ 67 ~
theoretically, empirically and politically troubling social/familial patterns with macrostructural shifts when our informants expressly do not make, or even refuse to make, the connections?" (Fine, Weis, Weseen, & Wong, 2003, p. 182)

Re-presenting participants is not without tension as the potential exists to marginalise participants, of which I was particularly conscious in relation to substance misuse, mental illness, and parenting (Fine et al., 2003; Liamputtong, 2007; Naples, 2003; Yegidis & Weinbach, 2006). For example, Tracy, a 33 year old non-Indigenous mother of two, openly discussed her ongoing substance misuse and mental illness; which she identified had, and continued to, compromise her parenting skills and capacity. Sitting alongside this was her extensive, deep-rooted, and profound commitment to be "the best I can be as a parent". Tracy’s story invited me to see and represent the whole picture – a comprehensive and contextualised account of her multiple subjectivities related to homelessness, aspirations around parenting, and her strategies to avoid putting her children at risk.

Parts of Tracy's story make me uncomfortable when I consider my biography as a Child Protection Worker which focussed on the safety and wellbeing of vulnerable children. This was an important focus for critical reflexivity, where I asked myself questions about how I came to 'know' what constitutes 'good' parenting, leading me to return to theoretical and practical understandings of 'good enough parenting' developed through my work in community mental health. Good enough parenting may fall short of some community members’ standards, yet at the end of the day it meets most of a child’s needs and does not put her/him at undue risk (Winnicott, 1965).

Part of me wanted to "tidy up" (Letherby, 2003, p. 119) Tracy's story and re-present her in a more palatable light so she would not be judged. Yet to do so would erase and silence her multiple subjectivities, abilities, and the very real struggles she constantly navigates. I honour Tracy for teaching me about liminal spaces and my 'need' to present positive accounts of women, which stems from a protective stance. This stance inadvertently denies a woman her agency and right to dictate how she will be re-presented. I now expand these discussions by exploring how I interpreted and made sense of the empirical materials.
UNPICKING AND MAKING MEANING

A number of principles and conceptual framings influenced my interpretive activities. While I have alluded to these in earlier chapters I now map the specific ways in which they have informed my activities. The primary analytic method used in this process has been deconstruction, followed by reconstruction. In order to unpick and unpack the empirical materials I started by testing and then settling on homeless pathways as a suitable heuristic device to further understand women’s homelessness.

Before settling on pathways and eventually the specific pathway types, I examined the empirical materials from a variety of angles, including the reason for the first homeless experience, the age women were first homeless, and the impact of early life experiences such as abuse and trauma. After in-depth consideration of these patterns and events, I developed two ideal pathway types based on a life-stage framework of youth and adult pathways (also used by G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003). This led me to assign 21 women to youth pathways and 14 to adult pathways.

Whilst these two pathway types provided an indication of when the women first experienced homelessness, they did not invite a nuanced understanding of what led to the first experience of homelessness. These two ideal types were useful starting points but a more sophisticated framework was needed to capture the women's storied accounts of homelessness. Consequently, I developed six pathway categories that mirrored "diffuse, discrete, more or less present and occasionally absent" (Weber, 1949, p. 90) experiences and contexts of the 35 women. I did not start out with pre-conceived ideas about pathways and whether I would apply them; rather the women's lived experiences, filtered through my interpretive work, and the influence of other studies led to the development of the six pathway types.

Johnson, Gronda, and Coutts’ categories of youth pathways involving “dissenters” and “escapers” (2008, p. 54) orientied me to read the young women’s experiences in particular ways. This reading was accompanied by my commitment to examine the women's narratives in a way that provided gendered and nuanced
understandings of their lived experience and contexts. In line with this I wanted to avoid labelling and essentialising activities and aimed instead to highlight enactments of agency and trace the workings of structural and relational factors, as well as discursive practices (Naples, 2003; Zalewski, 2000). Similarly, my conceptualisation of homelessness as one element of a woman's experience and not the totality of her multiple subjectivities called me to resist ascribing a tag to the women based on their actions (Reeve et al., 2007; Tomas & Dittmar, 1995). The three youth pathway categories I have applied are escape, eviction, and ‘choice’ which capture the experiences as described by the women.

Two incoming adult pathways of domestic and family violence and substance misuse captured the experiences of the 14 adult women. Of the 21 women who came in on a youth pathway, 17 transitioned to adult homelessness and I categorised this as a youth to adult pathway. Figure 4 diagrammatically represents the pathways.

FIGURE 4 – PATHWAY TYPES

My approach also reflects David Clapham's arguments for the need to deconstruct the overall experience of housing and homelessness so that representations of lived experience, meanings made, similarities, and differences are brought to the surface:
In any analysis the basic unit is the pathway of the individual household, but it may be possible to discern general patterns and so to construct categories of pathways. Some pathways may be small tracks with little traffic while others may be motorways in the sense that the route is shared with many other households. (Clapham, 2005, p. 33, emphasis added)

My conceptualisation of temporal phases of women’s homeless experiences expanded understanding of homeless processes and their interconnections across the complete experience. These temporal phases focus on pre-homeless experiences, the first ever experience, living homeless, and getting out of homelessness. In deconstructing the women's experiences in this way, I have arbitrarily delineated phases of homelessness, whereas the women spoke of the overall experience of homelessness (Tomas & Dittmar, 1995). In this, I have imposed a set of temporal and experiential categories onto the women's stories.

Sorting the individual experiences of the women into these conceptual categories enabled me to examine the material from different perspectives, asking discursively informed questions of a critical nature like who or what was included or excluded, did the categories fit the women's lived experiences, and if they did not fit what might explain this? As Fontana and Frey argue: "It is the researcher who ultimately cuts and pastes together the narrative, choosing what will become a part of it and what will be cut" (2005, p. 697). My aim was to present a balanced and contextualised description of the women's lived experiences of homelessness (Duncan & Watson, 2010; Etherington, 2007; Smart, 2009; Wolf, 1996). These analytic activities were supported by enacting critical reflexivity as I engineered the interpretive work.

Another heuristic device I employed involved the examination of the effects of structural and individual agency impacts within the women's homelessness experiences. In homelessness literature, structural elements are variously defined yet tend to include tangible phenomena such as housing, income, employment, and political practices, systems, and structures (Fitzpatrick, 2005; Fopp, 2007; Layder, 1985; Mullaly, 2007). From my perspective these categories appear inter-related, but lack sufficient definitional and operational clarity.
As noted in the previous chapter, understanding of the relationships between structure and individual agency has not been sufficiently developed in homelessness research. This suggested to me that these two elements may only offer a partial picture of the experience of homelessness. I have expanded the dichotomous individual agency and structural framework to include relational elements. I have also examined discursive practices in the women's narratives and have drawn out examples of how these practices shaped the women’s experiences of homelessness. I now provide definitions for these elements.

**STRUCTURAL FACTORS**

Structural elements are operationalised in this project to include housing, labour market involvement, income, education, and training. Housing affordability and appropriateness are central structural influences in pathways into and out of homelessness (I. Anderson & Tulloch, 2000; Edgar & Doherty, 2001b; Greenhaigh, Miller, Mead, Jerome, & Minnery, 2004; B. Healy et al., 2004; LenMac Consulting Pty Ltd, 2005; MacKenzie & Chamberlain, 2003; McNaughton, 2005; Rosengard, Laing, Jackson, & Jones, 2001; Wong et al., 1997). Housing affordability is underscored by redevelopment and gentrification, rising housing costs, debt accumulation, reduction or loss of income, housing stress, and mortgage foreclosure (I. Anderson & Tulloch, 2000; Chamberlain et al., 2007).

Housing stress often culminates in homelessness and occurs when a household spends more than 30% of their income on housing costs. During the 2007/08 period in Australia, this affected 445,000 private renters and 300,000 home buyers (Commonwealth of Australia, 2010a). Households reliant on income support are particularly prone to housing stress as their relatively low and inflexible incomes mean they cannot compete in a tight and expensive rental market (Chamberlain et al., 2007). In Australia this sits in the context of the declining availability of affordable private rental accommodation (Commonwealth of Australia). Young people and women on low incomes are particularly susceptible to housing affordability problems (G. Johnson et al., 2010; Sharam, 2008).
Housing insecurity is characterised by numerous moves and changes, problematic tenure, limited privacy and control, being unsafe, poor physical conditions, and social disconnection (Hulse & Saugeres, 2009). It follows then, that housing which fails to meet the needs of the occupants, provides little or no security of tenure, in areas with limited community infrastructure, which is unsafe, and far from social supports will place a person at risk of recurrent homelessness (B. Healy et al., 2004; McNaughton, 2005). Johnson, Gronda, and Coutts note that some suburban environments have the potential to "perpetuate ... rather than disrupt" (2008, p. 87) behaviours that people are attempting to change. Similarly, adjusting to being housed after long periods of homelessness can be challenging for some people (Franklin, 1999). Housing histories involving tenancy arrears, problematic behaviours (often referred to as ‘anti-social’ behaviours), tenancy database listings, and outstanding debt are common barriers to securing affordable and appropriate housing (I. Anderson & Tulloch, 2000; G. Johnson et al., 2008; LenMac Consulting Pty Ltd, 2005; McNaughton, 2005).

Income, poverty, engagement in the labour market, and educational or vocational participation are also structural features influencing homelessness. If individuals face obstacles to engaging in paid employment like low levels of education and literacy, or limited experience of employment it is highly likely they will experience poverty. I acknowledge that poverty is a contested and relative concept, yet when people are unable to access "adequate health and dental care, housing, education, employment opportunities, food and recreation" (Australian Council of Social Services, 2010, n.p.) it is reasonable to assert that they are experiencing poverty.

Unemployed individuals and lone parents are the Australians most vulnerable to poverty (Australian Council of Social Services, 2010). Loss of employment, reduction in working hours and the impacts of a globalised economy that demands a flexible and mobile workforce, and in return offers casualised and insecure employment opportunities will also place people at risk of homelessness (Chamberlain et al., 2007; National Youth Commission, 2008). Households experiencing poverty have limited capacity to address a housing crisis as they have few financial resources to assist them in resolving the situation (Rosengard et al., 2001). Financial disincentives or benefit traps such as loss of access to free health care if employed are central to people's decision
making processes when it comes to income and housing. These decisions are based on assessments of financial advantages and disadvantages, gendered discourses which imply specific expectations, and the commitment to employment (Clapham, 2005 referencing Ford, 1996).

This range of structural factors have been described as central to housing and homelessness experiences, and I held these as analytic tools when making sense of the empirical materials. I now consider individual agency factors.

**INDIVIDUAL AGENCY FACTORS**

As with structural factors, the type and range of individual factors applied by different authors varies considerably (see Crane & Brannock, 1996; Mallett et al., 2010), yet more commonly they constitute demographic and behavioural factors. In this project, individual factors include age, gender, cultural identity and heritage, socio-economic status, psychological and emotional wellbeing, intrapersonal resources and abilities, mental and physical health status, disability, substance misuse, self-esteem, confidence, emotional resilience, the ability to make informed choices, and hopefulness (I. Anderson & Tulloch, 2000; Busch-Geertsema, 2005; Edgar & Doherty, 2001b; Heintjes, 2005; Jerome, Hefferman, Adkins, Greenhaigh, & Minnery, 2003; LenMac Consulting Pty Ltd, 2005; MacKenzie & Chamberlain, 2003; Rosengard et al., 2001; Wong et al., 1997).

The ways in which individual and agency factors wove through the women’s experiences and meaning making provided useful insights for my interpretive work. Commonly, the women described discursive practices related to individual features which framed their experience of homelessness. These are highlighted in the empirical chapters. Through my analysis of the women’s narratives and descriptions from other stakeholders, it also became clear that structural and individual agency elements fell short of representing the layers and complexities of women’s homeless experiences. This led me to establish and test a relational category which I now discuss.
RELATIONAL FACTORS

Thirty three women in this study described pathways into, and subsequent experiences of, homelessness which rested on the choices and behaviours of other people. This led me to examine other research reports on women's experiences of homelessness and these sources also identified that common to most women's journeys into homelessness is limited control and choice resulting from the behaviour of other people (Averitt, 2003; Chung et al., 2000; Doherty, 2001; Graham, 2005; Jones, 1999; Lindsay, 2000; McFerran, 2010; Novac et al., 2002; Reeve et al., 2006; Reid et al., 2005; Robinson & Searby, 2005; Tomas & Dittmar, 1995).

The following discussion is not intended to de-emphasise the agency that women enacted nor the influence of structural factors. However, enactments of agency were usually located in the context of relationships and other people's choices and behaviours. The types of relationships vary across the different pathways, yet the enduring theme of limited control over the choices and behaviours of others, which directly informed the reason for experiencing homelessness, are consistent.

The commonly reported drivers of both young and adult men's homelessness are substance misuse, gambling, enactment of violence, involvement in the criminal justice system, and problematic behaviours (Bridgman, 2002; Cramer & Carter, 2002; Dizdarevic, 2010; Gwadz et al., 2009; Mina-Coull & Tartinville, 2001; Novac et al., 2002; Reid et al., 2005; E. Riley et al., 2007; Roll et al., 1999; Zugazaga, 2004). While men's enactment of violence and other behavioural issues are located in the context of relationships and structural factors; I assert that choice, control, and agency drive these behaviours by men. I support this assertion of choice by arguing that if men who enact violence and abuse on their children or female partners have no self-control, they would also assault and abuse friends, neighbours, and strangers.

Comparatively, women have limited control over men's behaviour and choices in intimate relationships and familial settings. I have conceptualised homelessness which occurs because of the choices and behaviours of family and partners as relational elements. The majority of women in this study came into homelessness as a result of the interplay of a variety of factors that occurred within the context of relationships. A
relational analytic category covers all facets of personal, intimate, and familial relationships. It includes the behaviour and choices of others, felt and actual connections, relationship formation and breakdown, social networks, social support, trauma, domestic and family violence, and abuse that occur within relationships.

From my perspective, the choices and behaviours of others that mediate a woman's pathway into, within, and out of homelessness are not captured adequately through structural and individual agency analysis. This has created an expanded analytic framework that asks questions of how structural, individual agency, and relational elements mediate women's pathways in, within, and out of homelessness. I acknowledge that a relational category as applied in this project is a new way to understand homeless processes and will require further application to ascertain if it is relevant and useful. Figure 5 diagrammatically represents this component of my conceptual framework.

FIGURE 5 – ANALYTIC FRAMEWORK

As indicated earlier, I have positioned discursive practices as features of women's homeless experiences and I now explore these and describe how they have been used in my interpretive activities.
Discursive practices

Discourse transmits and produces power; it reinforces it, but also undermines and exposes it, renders it fragile and makes it possible to thwart it. (Foucault, 1978, p. 101)

Foucault's opening quote draws attention to the intersections of power, knowledge and resistance, inviting a critical stance towards inclusive and exclusive practices within discourse which I introduced earlier. A variety of dichotomous discourses can be traced about people who experience homelessness ranging from constructing people as 'helpless victims' of their circumstances to active agents who are responsible for their situation (Saleebey, 2006). Homelessness research has identified that discourses surrounding cultural and linguistic diversity influence and mediate homelessness pathways, particularly in relation to seeking professional assistance (LenMac Consulting Pty Ltd, 2005; Rosengard et al., 2001).

A discursive approach has been used in this project to provide examples of how discourses mediated and informed women's decisions, choices, and behaviours in the context of structural, individual agency, and relational factors. For example, discourses about young women who experience homelessness may be layered with other discourses such as neo-liberal views on the rights and responsibilities of parents and 'children', youth substance use, and the provision of welfare support and income support payments (to name a few). Despite being pervasive and containing taken-for-granted 'truths', discourses are subject to constant reworking through acts of resistance, rebuttal, interpretation, and redefinition (Danaher et al., 2000; Mullaly, 2007).

My interest in discursive practices includes dominant and populist discourses relevant to this research, the mediation and internalisation of discourses by women who experience homelessness, and service delivery and policy discursive practices as they construct, respond to, and (de)legitimise women who experience homelessness. My examination of discursive practices has focussed on the impact of dominant discourses on the women and the women's impact on, or negotiation of, discourses relevant to their experiences and hyphenated identities such as wife-lesbian; survivor of domestic and family violence-‘victim’; drug user-mother (Lazar, 2005).
I have been particularly curious about whom and what is included or excluded within the specific discursive practices (K. Healy, 2005). Knitting reflection on discursive practices into my framework of structural, individual agency, and relational elements has created spaces to consider the implied and articulated meanings and connections the women made between their individual experience, and their internalised norms, expectations, and constructions of self. Similarly, the ways in which service delivery and policy discourses mediated the women's experiences have been considered (Clapham, 2005; Marston, 2004). These discussions counter the idea that a single factor or event provides sufficient explanatory rigour; suggesting instead that a dynamic interplay of events, factors, and conditions may offer greater understanding (Neil & Fopp, 1992; Reeve et al., 2007). Significant and defining discursive practices are drawn out and discussed in the empirical chapters.

In order to apply the structural, individual agency, and relational framework with attention to discursive practices I undertook line-by-line examination of each transcript and reconstructed narrative. Computer assisted analysis was piloted but ultimately rejected as it did not provide the level and depth of nuanced meaning I was seeking. When a transcript was accepted by a woman, I undertook a first read with questions, comments, and emphasis added to areas that stood out based on my recollection of the interview and the woman's responses, repetition and, difference (Minichiello, Aroni, & Hays, 2008). I also referred to my research journal for responses, ideas, and questions I had documented after each interview and then added further questions and hunches that emerged. This was an exercise in becoming familiar with the material and identifying areas to pursue in further analysis (Darlington & Scott, 2002).

Thematic exploration (Dudley, 2005; Minichiello et al., 2008) was then undertaken based on issues like structural, individual agency, and relational factors, the impact of early life experiences, iterative homelessness, rough living, violence and abuse, mental health impacts, mental illness, substance misuse, children, service provision experiences, and women's expressed meanings. The codes and categories that emerged were summarised, compared, contrasted, expanded, and refined across all 35 transcripts until data saturation was reached (Darlington & Scott, 2002; Strauss & Corbin, 1990). The reconstructed narratives were presented to the women and organised around these...
emerging themes and categories. The women were invited to comment on the fit of these themes to their lived experiences. None rejected the themes, which partially validated my interpretative activities.

Similar analytical methods were applied to the service provider, policy influencer, and policy maker transcripts. Elements of good and unhelpful practice were deconstructed, compared, contrasted, and then reconstructed. Differences and similarities between service providers, policy influencers, and policy makers were compared and contrasted. For example, the term 'respect' is often aligned with good practice, but it can have multiple meanings, dependent on the stakeholder's context, positionality, and dominant cultural understandings. Such commonly used terms were subject to scrutiny. In line with this being a political project that seeks transformation, the interpretive gaze was also redirected from service delivery to policy processes that are helpful and unhelpful in women's sustainable pathways out of homelessness (for example, what does respect mean and look like in good practice policy?) I now discuss the limits and tensions in this project.

Limits and tensions

As discussed previously, post-structuralism destabilises concepts such as ‘woman, women, patriarchy, and sexism’ challenging essentialism and foundationalism. My choice to foreground gender weakens my claims to a post-structuralist framework. I believe that oppression and subjugation of women exist both within discourse and outside of it, a position that is supported by the experiences of the women participants detailed in the empirical chapters that follow. I have been attentive to the localised narratives of marginalised women, who perform a wide variety of accounts of ‘woman’, demonstrating similarities and differences. I am driven by the desire to represent the local and emphasise difference, and also produce findings that speak to multiple stakeholders, hopefully advancing and bringing about positive change to women's experiences of homelessness.
The size of the sample group in the project does not provide representative findings, yet the applicability of the pathways metaphor to women's experiences of homelessness can be drawn from this study, and there are implications for service delivery and policy practices. The study was based in the Perth metropolitan area, and does not represent remote, rural, or regional women's experiences of homelessness. One interview was conducted in a regional town 300 kilometres from Perth as the woman had moved to this area after experiencing homelessness in the Perth metropolitan area.

The involvement of Indigenous and culturally and linguistically diverse women with experiences of homelessness and other stakeholders is limited (despite repeated attempts to increase numbers of these groups in the study). Therefore, the relevance of the findings for Indigenous and culturally and linguistically diverse women's experiences of homelessness is limited.

This study represents a point-in-time snapshot of women's experiences of homelessness, recounted in most cases retrospectively. Given the dynamic and fluid nature of homelessness the study is limited in this regard. Additionally, while relationships between structural, individual agency, and relational factors have been drawn out in the findings chapters, no attempt has been made to give weight to these different factors, nor can causal relationships be identified as it is beyond the scope of the project.

This chapter has laid out the methodological framework which included critical reflexivity, ethical stances, attention to risk issues, recruitment and access, data collection, and my interpretive framework and activities. The study participants are introduced in the next chapter.
CHAPTER FOUR - THE STUDY PARTICIPANTS

This chapter introduces the women and stakeholder participants and explores the women's demographic details and key life experiences. Stakeholders are introduced through the types of organisations and sites of practice they represent, along with a comparison of referral sources and the number of interviews undertaken with women. I start with the women's profiles.

Women's profiles

The 35 women who participated in the study ranged in age from 18 to 67 years with Figure 6 showing that 14 women were aged 35 and 44 years. In contrast, Australian data covering the 2007/08 period shows that young women aged between 15 and 19 years are the most frequent users of specialist homelessness services (Australian Institute of Health and Welfare, 2010, p. 17 & 35). In relation to cultural identity, three women identified as Indigenous Australians, another seven said they were from culturally and linguistically diverse backgrounds and the remaining 25 women reported they were non-Indigenous Australians.

FIGURE 6 – AGE OF WOMEN PARTICIPANTS
The care arrangements for the women's children are shown in Figure 7 and this shows that 25 women are mothers. The six women experiencing statutory child protection involvement articulated feelings of loss, grief, frustration, and uncertainty. Five of these six women reported disrupted childhoods involving sexual abuse, domestic and family violence, chaotic environments, and neglect (also found by Carolan et al., 2010).

**FIGURE 7 – CARE ARRANGEMENTS OF THE WOMEN’S CHILDREN**

Both women who were being monitored by the Department for Child Protection said that they felt constrained and compromised when it came to enacting individual agency, choice, and control as a result of this statutory intervention. Chloe is a non-Indigenous mother of two, and came into homelessness on a domestic and family violence pathway. She reported that the Department for Child Protection arrived unannounced shortly after she gave birth to her son:

We've had ... DCD [previous name of the Department for Child Protection] investigating ... because of the way he [partner] was at the hospital. He ... wasn't the best person at the hospital ... we've still ... got them lingering around a bit, just to make sure. (Chloe)
Chloe moved house during the course of the study and advised at a follow-up contact that child protection workers had visited within weeks of moving into her new home. Chloe was perplexed as to how the Department for Child Protection were aware of her new address.

Jade is a 37 year old non-Indigenous mother of four, who came into homelessness on a domestic and family violence pathway. Jade’s situation varies from Chloe’s in that she was informed by the Department for Child Protection that if she returned to her abusive partner, her two youngest children would be removed from her care. Jade considers this a simultaneous challenge and opportunity as her previous pattern has been to return to her partner after respite in a women’s refuge. Jade reported feeling shame and personal responsibility for this situation, which reinforces her poor opinion of herself as a mother. The other four women whose children are permanently in the care of the Department for Child Protection discussed their experience of the coercive, restrictive, and inconsistent nature of responses from child protection workers, and expressed concern that formal State care was not the best option for their children.

Mothering and motherhood are social constructs informed by normative discourses which reflect white middle class values and expectations. Mothers and mothering practices are compared and considered against these normative frameworks (Carolan et al., 2010). Service providers in this study argued that the involuntary removal of children creates the conditions for homelessness, mental illness, and substance misuse; robbing women of their categorical identity of ‘mother’.

And when her children were taken away, she ended up in a mental institution … because she couldn’t cope but she was from … domestic violence. Now … she talks in a way where it’s that non-stop ranting and raving … she doesn’t know how to get heard. These women … would’ve been very capable women, had they had that support and intervention done in a different way. (SPG3)

All six women involved with the Department for Child Protection described the challenges they faced as mothers because of their limited exposure to positive parental role models, the impacts of lifetime trauma, and the imbalance of responsibility apportioned to them, with little regard to the actions and responsibilities of the
biological fathers of their children. The women were acutely conscious not only of the judgements made by others about them not being good enough parents, but also the difficulties and limitations in their own abilities to assess personal and relationship safety which often led to risk situations for themselves and their children (Carolan et al., 2010).

I did not ask specific questions about childhood abuse, domestic and family violence, mental illness or substance misuse, yet many women voluntarily described these experiences and emphasised the relationship between these events and their homeless experiences. Figure 8 indicates the number and type of abuse experiences the women reported which for some, involves multiple abuse experiences.

**FIGURE 8 – WOMEN’S REPORTED LIFETIME EXPERIENCES OF ABUSE**

Fourteen women reported serious and persistent mental illness. Diagnoses included schizophrenia, psychotic disorders, bi-polar affective disorder, major depressive disorders, complex post-traumatic stress disorder, anxiety, obsessive compulsive disorder, and attention deficit disorder. Another 12 women reported mental health impacts which compromised their functioning and were tied to their experiences of domestic and family violence, childhood abuse, and homelessness. These women were not engaged with psychiatric services and described situational depression and post-traumatic stress like symptoms such as flashbacks and dissociation.
Fourteen women openly discussed experiencing suicidal ideation at some time in their life over periods ranging between two and 21 years. All of these women reported that this had decreased over time, and none were actively suicidal at the time of interview. Substance misuse was described as a current and unmanageable issue for six women at the time of interview. Seven women were addressing problematic substance use with periods of abstinence ranging from three weeks to two years reported by the women. The types of substances used, in order of reported prevalence included cannabis, alcohol, amphetamines, heroin, and benzodiazepines obtained through both licit and illicit means.

The women were asked to identify their relationship status at the time of interview and 27 women said they were not in a relationship, with the other eight women reporting they were in relationships (two same sex attracted and six heterosexual).

The women were asked to estimate the amount of time they had experienced homelessness across their lifetime and this ranged from one month to 33 years. Iterative homelessness was experienced by 30 women involving frequent moves between, specialist homelessness services, couch surfing, primary homelessness, and psychiatric hospitals. Of these women, 23 were on the move for an average of 10.7 years (range of two to 33 years), and the remaining 12 women experienced iterative homelessness for an average of 3.5 years. Similar findings have been reported by Australian and International researchers in regard to both men and women (Catherine House Inc, 2003; Chamberlain et al., 2007; Robinson & Searby, 2005; Tomas & Dittmar, 1995; Vanneuville, 2010). Figure 9 shows periods of time the women experienced homelessness across their lifetimes.
Kayla is a non-Indigenous mother of two who had the second longest experience of iterative homelessness comprising 32 years of temporary housing, couch surfing, primary homelessness, and specialist homelessness services accommodation. In the following quote, Kayla talks about her experiences within her family, prior to becoming homeless at the age of 11:

My whole childhood … I went from family to family to family to family. If … I spent any time with my mum … it would never be more than … 12 weeks at a time … she would beat me … to oblivion and I would go somewhere else. (Kayla)

In addition to the constant moving from birth, Kayla’s mother told her that she had attempted to terminate the pregnancy when she was six months pregnant with Kayla. I now turn to consider the profile of the other stakeholders involved in the project.

**Stakeholder profiles**

When it came to recruiting stakeholders, I was keen to have participants who could offer a broad representation of views and experience from the housing, homelessness,
domestic and family violence, and related fields. Despite not being successful in my attempts to have Aboriginal and Torres Strait Islander input to the design and operations of this project, two Indigenous stakeholder participants contributed, and one culturally and linguistically diverse service provider was interviewed.

Four interviews with six policy makers from state and federal government agencies whose core business involved policy making and program administration in housing and homelessness were completed. Local and federal homelessness and domestic and family violence peak bodies participated in four interviews which involved five people. A further 16 interviews were conducted with 19 service provider representatives from the non-government sector, with 50% of these interviewees occupying senior, coordination, or management positions. A breakdown of service provider types is represented in Figure 10:

**FIGURE 10 – TYPES OF SERVICE PROVIDER PARTICIPANTS**

![Bar Chart]

In addition to the 35 women interviewed, another ten were referred but did not participate in interviews as nine were un-contactable (i.e. they did not answer their phones or return my call after I left a number of messages) and one women advised she had changed her mind and no longer wanted to participate.

To summarise this chapter, profiles of the women participants covering age, cultural background, parenting status, age and care arrangements for children,
relationship status, life experiences, and length of time homeless have been presented. An overview of the stakeholder participants has also been provided. The subsequent chapters examine the pathways into homelessness, experiences whilst homeless, and the pathways out. Most of the material is drawn from the women's narratives, and stakeholder data is included where it is relevant.
CHAPTER FIVE - YOUTH PATHWAYS INTO HOMELESSNESS

My father ... committed suicide when I was 12 ... my mum having another partner with three other kids just made it difficult. (Kylie)

This chapter explores what led 21 young women to experience homelessness for the first time before the age of 18. Research sub-question 1.1 on what created the conditions for women to enter homelessness is addressed in this chapter. In introducing the three youth pathways, I explore the reasons behind the first homeless experience, responses, and impacts. The descriptions of the experience of entering homelessness are considered using the structural, individual agency, and relational framework introduced in Chapter Three. Examples of the ways in which discursive practices and structural, individual agency, and relational factors intersected with the homeless experience are provided throughout the chapter. Before introducing the women I discuss two Australian non-gender specific studies on youth homelessness which influenced my approach and expanded my conceptual and analytic maps.

MacKenzie and Chamberlain’s work on homeless pathways discusses young people who leave home before the age of 18 due to family conflict. This career is marked by "tentative breaks" (MacKenzie & Chamberlain, 2003, p. 14) from home; which signal the early stages of an in and out (or iterative) pattern of homelessness. The authors note that for many young people a "permanent break" (MacKenzie & Chamberlain, 2003, p. 16) marks the emergence of an individuated subject position away from the family system. The youth career is framed in terms of phases and transitions, and different types of family conflict are considered through case example discussions.

MacKenzie and Chamberlain (2003) also explore whether substance misuse and mental illness are pathways into homelessness and conclude that these factors do not constitute specific careers or pathways. They argue that many young people instead become homeless as a result of parental substance misuse or mental illness and leave home to improve their safety and wellbeing. Additionally, the authors suggest that significant numbers of people experience mental illness and substance misuse after becoming homeless:
The argument that drug addiction, alcoholism and mental illness constitute a distinctive 'career path' into homelessness misses that some people are escaping from these issues, and that many develop these problems after they have become homeless. What is important is that the occurrence of these issues increases the likelihood that a person will make the transition to chronicity. (MacKenzie & Chamberlain, 2003, p. 57)

Adding to this body of knowledge on Australian homelessness pathways is Johnson, Gronda, and Coutts’ (2008), research which identifies two sets of experiences behind young people's entry into homelessness. This work reports on 32 young people who were categorised as “escapers” (G. Johnson et al., 2008, p. 54), whose experiences were characterised by abuse, neglect, and out-of-home-care. The remaining nine young people were classified as "dissenters" (G. Johnson et al., 2008, p. 54) who rejected the rules and norms set by their parents, within the context of strained family dynamics. Importantly, these authors unsettle the concept of family conflict within youth homelessness and present a detailed qualitative analysis of the types of conflicts that occur. Consequently, these findings disrupt discourses about young people who 'choose' homelessness as a way of life:

When choice is used to explain youth homelessness it implicitly supports the view that young homeless people do not deserve any assistance. Often when choice is used to explain youth homelessness these contextual factors are ignored. (G. Johnson et al., 2008, p. 57)

These studies and other sources (Alvi et al., 2010; Crane & Brannock, 1996; Ferguson, 2009; Gwadz et al., 2007; Hutson & Liddiard, 1994; Mallett et al., 2010) led me to develop a conceptual map for understanding the young women’s pathways into homelessness. While young women reported that their first homeless experience was triggered by multiple and co-occurring reasons, the primary factor they emphasised for entering homelessness was used to assign them to one of the three youth pathways. These youth pathways highlight different contexts and issues that the women were contending with, and which ultimately led to their first experience of homelessness.
One woman sits with the 'choice' pathway, which reflects her assertion that this was the primary reason she entered homelessness. As her story unfolds it becomes evident that 'choice' segued into a variety of adverse situations over an extended period of time. The notion of 'choice' in relation to homelessness is problematised in this project, as a challenge to dominant discourses which frame young people as willingly ‘choosing’ homelessness (Alvi et al., 2010). Figure 11 shows the number of women in each youth pathway and is followed by an exploration of the eviction pathway.

FIGURE 11 – YOUTH PATHWAYS

Eviction pathway

Me and my Mum didn’t really get along very well. She’s really religious and … she just didn’t … like my lifestyle. When I was … 14 or so Mum … tried to send me to counsellors. I was meant to be this like little Christian child. (Gertie)

Nine women reported being evicted, which occurred at a median age of 15.6 years. Eight women were evicted from their family homes, and one from share housing. All nine women are non-Indigenous Australians. The eight women evicted from their family homes had no source of income and seven were attending secondary school or TAFE. The women spoke of their commitment to remain engaged with their education but reported they found it increasingly difficult as they moved closer to homelessness (also
found by MacKenzie & Chamberlain, 2008). I now consider the events leading up to the first homeless experience, followed by an exploration of the reasons for the eviction, the young women's responses, and reported impacts.

**APPROACHING HOMELESSNESS**

All of the women reported lengthy periods of sustained tension, arguments, and conflict prior to being evicted (also reported by Alvi et al., 2010; Fitzpatrick & Clapham, 1999; Novac et al., 2002). Seven women had moved in and out of their family homes in response to the sustained tension (also reported in studies on young women by Jones, 1999; Novac et al., 2002; Reeve et al., 2006). The young women left home for periods of up to one month and stayed with extended family, friends, and friends’ families.

The types of conflict experienced by the young women included changes in parental relationship status for five women, the sexual orientation of two young women, and emergent mental illness which compounded conflict for the remaining two women (also identified by Cauce et al., 2000; Fitzpatrick & Clapham, 1999; Rosenthal et al., 2006). Kerry is an 18 year old non-Indigenous woman, and she highlights how ongoing conflict with her mother was a precursor to eviction:

> I got kicked out ... because [of] my mum's boyfriend. I don’t think he could put up with me. It sounds ... stupid but I used to get everything I wanted ... because it was me and my mum my whole life. I didn't have my dad around and ... all of a sudden he came and it was like: You can’t do this, and you can’t have that. I was like: You’re not my dad ... don’t tell me what to do. And then my mum was just like: You can’t do this anymore. He'd take her away from me. She’d pay no attention to me. It would all be about him. So he’s had the biggest impact on my life. (Kerry)

Relational factors were the primary driver of Kerry's eviction due to the interpersonal conflict with her mother and her mother's new partner. Structural factors (no independent income with which to access housing) and individual issues (age and
developmental stage) are mediating influences on the primary driver of relational factors which led to Kerry entering homelessness.

Family conflict often sat alongside other issues like substance misuse and childhood sexual abuse, and Shannon’s story exemplifies this. Shannon, a 19 year old non-Indigenous woman, reported that prior to being evicted she had experienced long-term conflict with her mother over a variety of issues. A major source of the conflict was Shannon’s mother’s denial that Shannon was sexually abused by a family member when she was a child. At the time Shannon was evicted she was attempting to complete year 11 of secondary school.

I was 16 ... when Mum kicked me out. It's hard to explain. We just had lots of fights and stuff like that ‘cause I had quite a few issues - I was a teenager with issues. (Shannon)

Whilst the relational context is central to Shannon experiencing homelessness, the individual impacts of childhood sexual abuse sit within, and are compounded by, the relational context of her mother’s denial of the abuse and the resultant interpersonal conflict. Throughout this experience, Shannon maintained a focus on structural factors by keeping up her school attendance. Shannon’s description of herself as “a teenager with issues” draws attention to discursive constructions of young people, inferring that as she had “issues” she was to blame for the conflict.

Emily is a 32 year old non-Indigenous woman who was the only woman evicted from share housing. Prior to being evicted, Emily’s life was characterised by profound loss and grief as she experienced the deaths of her boyfriend from a drug overdose, and four close family members in a two year period. According to Emily, these events created the conditions for the development of psychosis. The only reason Emily could think of which led to her eviction was that her housemate’s expressed dissatisfaction with the amount of time Emily spent away from the house and in her bedroom, when home. I now explore the experience of entering homelessness within the eviction pathway.
ENTERING HOMELESSNESS

I had no idea where I was going to go or anything ... when I first got kicked out.

(Gertie)

Eviction for all of the women was unexpected and a shock. Some reacted angrily and others said there was a degree of relief and freedom in being away from constant conflict (Reid et al., 2005). All of the women reported feeling vulnerable, alone, and misunderstood. These young women did not know where to turn initially. Structural and individual factors can be traced in the women's stories, but the relational is emphasised and is the central driver of their pathways into homelessness.

As the only woman evicted from shared housing, Emily also described feeling confused and frightened when she was evicted, and consequently experienced a deepening and worsening of emergent psychotic symptoms. In Emily’s case, individual (emergent psychosis) and the relational (conflictual relationship with her housemate culminating in her eviction), sit side by side as factors in her pathway into homelessness. I now consider the woman who reported that she ‘chose’ to enter homelessness.

‘Choice’ pathway

I’d decided I didn’t want to finish year 11 six weeks before finals ... too stressful ... didn’t want to follow mum’s rules, so I left home and started being a punk, and ... lived on the street for about two and a half years. (Tracy)

Tracy stands apart from the eviction and escape pathways as she “chose a party and punk lifestyle” which involved drug taking and rough living at the age of 16. Tracy said she had lived with her mother in a safe and loving environment and reported no adverse childhood events. She emphasised her personal responsibility for “choosing” homelessness and reported that moving to the streets started out as an adventure.

Tracy’s decision to leave home and enter homelessness demonstrates her capacity to enact individual agency. Her ‘choice’ is situated within the context of her age
and ability to comprehensively assess and understand the potential implications of her decision. As Tracy's story unfolds in subsequent chapters, her 'choice' is shown to have serious and long-term consequences for her wellbeing and safety. The women who escaped into homelessness are now considered.

**Escape pathway**

My adoptive dad would hit me and different things ... like sexual abuse. You don’t punish someone by doing that. They said I was ... ADD [attention deficit disorder]. They ... sent me to psychiatrists and different things and put me on medication and ... I never really opened up to my adoptive mum [about] what's happen ... why I act the way I do. (Wai Ling)

Eleven young women escaped unpredictable, chaotic and unsafe family environments. They escaped at a median age of 14.1 years which is the lowest in the study and mirrors other research findings (Collins, 2010; Cramer & Carter, 2002; G. Johnson et al., 2008). Three women reported out-of-home-care experiences prior to escaping into homelessness.

Seven of the 11 women were attending secondary school and one woman remained at school after she entered homelessness (also found in youth homelessness studies by Collins, 2010; MacKenzie & Chamberlain, 2008). In terms of cultural identity, one woman identified as 'African' (asking not to have her specific cultural identity disclosed for fear of reprisal), another two women identified as Indigenous Australians, and the remaining eight are non-Indigenous Australians. I now examine these women’s experiences by considering the contexts and conditions surrounding their approach towards homelessness and then what led them to escape and make a final break away from abuse.
**APPROACHING HOMELESSNESS**

The family environments from which the women escaped were characterised by violence, sexual abuse, intimidation, threat, neglect, few opportunities for attachment with caregivers, unmanageable conflict, and an absence of felt and actual safety (see also Ferguson, 2009). Kayla’s description below highlights the relational vulnerability experienced by young women when they are subject to abuse and invalidation. This underscored Kayla’s enactments of individual agency and minimal experience of safety from the age of 11 when she started living on the streets:

I was left with my sisters’ father and my sisters lived next door with their grandparents. I was experiencing extreme sexual abuse, and ... I had asked the question: Are you my dad? I knew in myself that I didn’t belong. And he said: No I’m not. He took me to the middle of a dam and he put me in the water and he kept holding me under and lifting me up and he would say if I told anybody about anything, that would be it ... I would never see my sisters again. I *never* belonged. I loved being on the farm, and I loved my sisters ... but ... in every home I was always separated. There was always this ... sense of people always masking everything. Then I went to stay with my mum again in Perth. The cemetery became my home. There was ... nobody there, except for one old guy that ... used to talk to me all the time and he was probably one of the few men that I came across that ... never did anything, but just protected me. It was safer on the streets. (Kayla)

It was unusual for these young women to experience a singular form of abuse within their environments. Nevertheless, the women invariably pinpointed a primary type of abuse they escaped from and this is shown in Figure 12. The women’s experiences of entering homelessness are then detailed.

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All of the women who escaped said they could not identify any other options available to them. They felt they had no choice but to flee to an unknown destination, which the women hoped would be safer. The enactment of individual agency in deciding to flee was situated within the context of relational factors. The young women had limited capacity and opportunity to assess the safety of the places to which they fled; they simply escaped and hoped for the best. As Willow, a 45 year old non-Indigenous mother of three, notes, her need to escape precluded an assessment of risk:

It goes back to when I was 10 years old actually. I was molested, but ... at that time I didn't realise that's ... why I kept running away from home. I slept down the Esplanade toilets; ... that was my shelter [for] a month. I just lived day by day. I'd go in the shops and help myself to ... food ... just to keep me going. And I used to shower in the cold water shower and I ... had an Aboriginal girl that was with me. We met up in the park and she was homeless too ... so it went from one extreme to another. But it made me grow up quick. They put me in [name of juvenile detention centre], but I ran away from there as well. They took me to the police station and that's when they decided to keep me in custody and I went to a Children’s Court and that’s when they put me on State Ward. (Willow)
The 10 women who escaped family homes described how they were blamed, disbelieved, invalidated, and problematised before leaving (also reported in studies undertaken by Bassuk et al., 2001; Collins, 2010; Crane & Brannock, 1996; Doyle, 2000; Fitzpatrick & Clapham, 1999; Graham, 2005; Lindsay, 2000; Reid et al., 2005). These discursive constructions and experiences of abuse occurred in the relational domain and located the ‘problem’ in the young women. These practices redirected attention from the perpetrators of abuse to the young women, as also noted by other researchers: "Common throughout the narratives are a victim-blaming mentality that shook an already fragile sense of personal efficacy for these women" (Wesely & Wright, 2009, pp. 224-225).

Many women reported that they were labelled mentally ill by perpetrators of abuse and other family members. This invalidated and pathologised the women and led to medicalised constructions of their distress and suffering:

If all symptoms are seen as the consequence of disease, it rules out the possibility that illness may be a consequence of not being able to cope with a specific problem. All too easily, the person disappears behind the illness label.

(Romme & Escher, 2000, p. 23)

The women argued that being positioned as mentally ill allowed perpetrators of the abuse to be abrogated of responsibility for their actions. The women’s experiences demonstrate how relational factors created the conditions for the women to flee into homelessness, yet the gaze was redirected towards the women, constructing individual, behavioural, and dispositional features as ‘the problem’ and inferring psychopathology. Consequently, the women were considered responsible for experiencing homelessness, which is discussed by Herman:

It is very tempting to take the side of the perpetrator. All the perpetrator asks is that the bystander do nothing. He appeals to the universal desire to see, hear, and speak no evil. The victim, on the contrary, asks the bystander to share the burden of pain. The victim demands action, engagement and remembering. (Herman, 1992, pp. 7-8)
I now explore the women's experiences of entering homelessness.

**ENTERING HOMELESSNESS**

The experience of entering homelessness varied across the 11 women with the two women who escaped domestic and family violence reporting significantly different situations. One young woman escaped her step-father’s violence and she accompanied her mother to a refuge. In contrast, Maria, a 24 year old Indigenous mother of three, fled a domestic and family violence relationship when she was 16. Her childhood was characterised by insecurity, violence, neglect, and emotional abuse as a result of her mother’s mental illness and substance misuse. Prior to making a final break and entering homelessness, Maria frequently left the relationship for respite and safety:

> I was always running off from the house going into the refuges and stuff. It's not a very good life to live. (Maria)

Maria’s experiences and the specific structural, individual agency, and relational factors in her narrative are considered in more detail in subsequent chapters.

Fatima is a 26 year old mother of two and her situation is unique as she was orphaned at the age of 10 due to civil war in her country of origin. Of Fatima's seven siblings, five died and she does not know if the other two survived. Fatima was sponsored by an older woman whom she met while in transit to a refugee camp. Aged 13, and after arriving in a refugee camp, Fatima was "forced to marry" her sponsor's 18 year old son. Fatima’s husband began physically abusing her shortly after they were married. Fatima spent the next nine years in refugee camps, giving birth to her son at the age of 14, followed by her daughter at 16.

Fatima elected to not have our interview recorded, so limited verbatim quotes are available to share. However, Pittaway and Rees echo Fatima’s description of the risks associated with life in a refugee camp while also experiencing domestic and family violence:
The concept of cumulative risk factors is useful in examining the dynamics of domestic violence as it impacts on women in refugee camps. While domestic violence in general results from several factors that interact to create the climate for abuse, in the refugee context there is an abnormal or extraordinary accumulation of risk factors that may result in a greater propensity for, and risks associated with, violence. (Pittaway & Rees, 2005-2006, p. 21)

Life in the refugee camp was compounded by material deprivation, grief, unresolved trauma, cultural and religious expectations, and domestic and family violence. This included Fatima’s husband paying people to burn Fatima’s tent and assault her, as well as attempt to kidnap their children after he had been granted asylum in the United States of America.

Further social and emotional isolation were reported by the women once they entered homelessness (Gwadz et al., 2009), and Wai Ling’s experiences graphically demonstrate this marginalisation. Wai Ling is a 28 year old Chinese mother of one. She narrated her experience of social and emotional isolation starting with her placement in an orphanage at the age of four because she was sexually abused within her family.

I was diagnosed with Hepatitis B. So it was complete isolation for me. I had to ... cook my own food at the age of four ... do my own dishes and everything. Because ... you’ve got nobody I think I’m used to homelessness, being an orphan you can’t be any worse than that. (Wai Ling)

Wai Ling was adopted at the age of 10 and shortly after arriving in Australia her adoptive father started sexually abusing her. She did not disclose the abuse to her adoptive mother, as she doubted she would be believed and was certain she would be accused of fabricating stories about her adoptive father (invalidation and disbelief are also discussed in detail by Herman, 1992).

Wai Ling and other women’s narratives of their experiences of sexual abuse highlight power relations, secrecy, threat, and invalidation of their lived experiences of exploitation (Chenoweth & McAuliffe, 2012; Harms, 2010). Relational elements (sexual abuse) led to Wai Ling entering the orphanage where she was marginalised and isolated.
Wai Ling’s statement: “I think I’m used to homelessness, being an orphan you can’t be any worse than that” highlights how relational experiences created the conditions for Wai Ling to adopt a homeless subject identity as an individual characteristic. I now offer some concluding comments on the experiences of these young women.

Conclusion

Clapham’s notions of "push" and "pull" factors (2005, p. 196) at play when young people leave home are useful conceptual tools in understanding the young women’s experiences of entering homelessness. Pull factors are "positive and socially sanctioned" (Clapham, 2005, p. 196) and refer to situations where young people choose to leave home for work, study, or independent living arrangements. In contrast, push factors occur in problematic situations such as domestic and family violence, conflict, and abuse. Push factors create a premature, unplanned departure which increases the likelihood of homelessness. Twenty of the 21 women were pushed; meaning they had no opportunity to prepare for their departure and develop plans that would allow them to find or afford safe accommodation. Being pushed through escape or eviction left the young women vulnerable, isolated, and excluded from social and civic domains of life (Ferguson, 2009).

These women’s experiences unsettle dominant discourses about young people who ‘choose’ homelessness in order to receive income support (Crane & Brannock, 1996). The women who escaped were deeply affected by the behaviours and choices of others and they assessed homelessness as a better option than remaining in the abusive environment. In contrast, the young women who were evicted spoke of the shock of being kicked out. The reasons for entering homelessness vary across the eviction and escape pathway, yet homelessness occurred due to relational factors for 19 of the 20 women in these pathways. The majority of the women were problematised and blamed for the reasons which caused them to enter homelessness.

Enactments of agency can be traced across all three categories with the young women who escaped enacting agency in deciding to get away from abuse, violence, threats, and fear. Even though the young women who were evicted were surprised to
enter homelessness, they emphasised their personal responsibility for the behaviour that contributed to, or exacerbated conflict which led to them being ‘kicked out’. Similarly, Tracy strongly asserted her responsibility in ‘choosing’ homelessness.

In entering homelessness, the women faced significant structural disadvantage, with only one woman having an independent income source. Given their age, none of the women qualified for public housing or private rental, and obtaining income support depended on parental input which was often not forthcoming. Those women undertaking education and training put considerable effort into continuing these activities, but few succeeded in the face of chaos, uncertainty, and the crisis of homelessness. The experiences of the women in the adult pathways are now considered.
CHAPTER SIX - ADULT PATHWAYS INTO HOMELESSNESS

I walked from 9am to 9pm thinking about how to get my kids back. (Jade)

This chapter considers the experiences of the 14 women who became homeless as adults. As with the previous chapter, research question 1.1 about the factors, conditions, and contexts which created a pathway into homelessness is addressed here. In introducing the two adult pathways I explore the events leading up to the first homeless experience, the women’s responses to those events, and the associated impacts. This first experience of homelessness is discussed using the structural, individual agency, and relational framework and is accompanied by a drawing out of the relevant discursive practices.

I start by exploring literature on adult pathways to foreground my examination of the women’s narratives. MacKenzie and Chamberlain (2003, p. 29) identify three adult pathways into homelessness of “housing crisis”, “family breakdown”, and “youth to adult”. Housing crises occur because of situational economic problems, lengthy exposure to poverty, and accumulation of debt. Other drivers include neighbourhood renewal or conflict in the neighbourhood. The family breakdown pathway involves domestic and family violence and other forms of family conflict. Importantly, MacKenzie and Chamberlain draw attention to post-separation stalking and harassment which can mean women re-experience homelessness as they flee from their new accommodation when ex-partners locate them.

The "youth to adult career" (MacKenzie & Chamberlain, 2003, pp. 45-51) represents a smooth or disjointed transition from youth to adult homelessness. People on this pathway are often marginalised, exhibit problematic behaviours, and experience a wide range of complex and inter-related issues. MacKenzie and Chamberlain assert that the transition to adult homelessness indicates the likelihood of entrenched or “chronic” (2003, p. 45) homelessness and they utilise a homeless career typology in their discussions. This is discussed further in Chapter Eight where I consider the women who transitioned from youth to adult homelessness.

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Johnson, Gronda, and Coutts’ (2008) recent Australian research was discussed in the previous chapter and in addition to presenting youth experiences they explore four other pathway types which include mental illness, domestic and family violence, housing crisis, and substance use. Across all pathways, they argue that coming into homelessness can be a sudden experience or incremental process. This work is discussed further throughout the empirical chapters. Similarities can be detected in the work of MacKenzie and Chamberlain (2003) and G. Johnson et al., (2008) and I note their influence on my frameworks, approach, and findings. The domestic and family violence pathway is now explored.

**Domestic and family violence pathway**

I walked out with a pair of G strings on at 4.30 in the morning and my babies under my arm, and he’d been kicking me in the back and slapping my face while I was trying to breastfeed. (Bronte)

Bringing domestic and family violence to the attention of the community in the 1970s, second wave Australian feminists sought to raise awareness about the political nature of, and public responsibility for, domestic and family violence (Fraser, 2008; S. Murray, 2009). These activities led to the opening of unfunded voluntarily staffed women's refuges that were later supported by ad hoc government funding arrangements. In 1985, women's refuges became part of the Supported Accommodation Assistance Program (McFerran, 2009). Feminist authors and practitioners continue to insist that domestic and family violence is a contested, politicised and nuanced homeless pathway which results from men's choices to enact violence against women and children (Bullen, 2009; Nunan, 2009). From my perspective, these arguments reinforce the importance of analysing women’s homelessness from a relational perspective.

As noted in Chapter Two, women subject to domestic and family violence experience homelessness because they cannot remain safely in their homes (Chung et al., 2000). Their options are limited and include remaining in the relationship, having the perpetrator removed (and hoping that he abides by such a requirement), seeking respite...
from the relationship, or leaving permanently and becoming homeless (Spinney & Blandy, 2011). A critical examination of these ‘options’ indicates they are mediated by the actions of the perpetrator which is captured well by Chung and her colleagues: "In order to live without violence from intimate partners women are forced or encouraged to leave their home and seek other accommodation" (2000, p. 46).

Domestic and family violence homeless pathways are conceptualised in a variety of ways and reflect intersections of structural factors, individual agency and relational experiences:

Just as there is no one pathway into homelessness for women (and children) affected by domestic and family violence, there is also no ‘typical’ woman who becomes homeless because of domestic and family violence. Poverty and a lack of an independent income for women affected by domestic and family violence is a major cause of homelessness. Women do not become homeless if they can afford not to. (Tually et al., 2008, p. 18)

Despite the uniqueness of domestic and family violence pathways they are frequently conceptualised in terms of women's experiences prior to becoming homeless, psychological reactions, adverse impacts, material circumstances, and service delivery responses (see Cramer & Carter, 2002; Jones, 1999; Metraux & Culhane, 1999; Reeve et al., 2006). Patton (2003) adopted a different approach by conceptualising pathways as factors that enable or obstruct women's decision making processes when leaving abusive relationships.

Johnson, Gronda, and Coutts (2008) describe three characteristics common to a domestic and family violence pathway. These include the experience and impact of violence, the shame attached to the experience, and women's unequal economic positioning and its relationship to homelessness. My reading of this work draws attention to individual factors such as shame associated with violence; structural factors related to women's economic positioning; and relational experiences involving the impact of violence. Experiences prior to becoming homeless, the types of abuse and violence experienced, psychological and cognitive responses to violence and
homelessness, and the strategies employed to reduce the stigma associated with domestic and family violence were also analysed by Johnson, Gronda, and Coutts.

Women’s pathways into homelessness draw attention to the gendered meanings associated with home (R. Edwards, 2004; Malos & Hague, 1997; Tomas & Dittmar, 1995; Tually et al., 2007; Watson & Austerberry, 1986). Home, for women, can be a place of safety or risk: "The meanings that many of us attribute to home (for example a sense of belonging, security, control and ... personal identity) are immediately negated once violence occurs" (Nunan, 2009, p. 9).

Reflective of my conceptual framework, as described in Chapter Two it has been important for me to consider the ways in which culture intersected with the women’s experiences of domestic and family violence and this stance was affirmed by Indigenous and non-Indigenous stakeholders in their interviews. These stakeholders argued that cultural expectations and practices, discrimination, the pervasive impacts of colonisation, exclusion, loss and grief, and institutionalised racism inscribe Indigenous experiences and understanding of violence (Bagshaw, Chung, Couch, Lilburn, & Wadham, 2000; Commonwealth of Australia, 2009b; Crenshaw, 1995).

The one Indigenous woman who came in on the domestic and family violence pathway did not speak of these discriminatory experiences in the context of domestic and family violence, but did report such occurrences in later homeless experiences and these are explored in Chapter Eight. An Indigenous service provider drew attention to these issues within a service delivery context:

Our policy is that ... if this person ... was a problem before, we will not take them again. With Indigenous women it’s **harder** because ... the workers most likely say: Oh, they got family they can go to. But the thing is family violence comes into it then and they just can’t go to other family. So they are homeless. I know a lot of Indigenous women that are homeless. Anyway, see, because the Indigenous families are the 'hard cases' ... no-one wants to have a bar of it, they pass the buck. (SPDFV4)
Eleven women had children in their care when they made their final break from the abusive relationship. The women occupied a variety of housing types before experiencing homelessness, including: five women who left privately rented accommodation; three who escaped from their owner-occupied homes; two that left public housing, with the housing type unknown for two women. The median age for the first homelessness experience in the domestic and family violence pathway was 29 years.

Two women were working, with one reporting that she managed to keep her job after experiencing homelessness. One woman was undertaking tertiary study and she organised a leave of absence when she entered homelessness. The women spoke of the difficulties they faced in trying to balance the emotions attached to ending the relationship, the threats and violence enacted by ex-partners, legal matters, poverty, their children’s needs, homelessness, disruption, employment, and study. These descriptions highlight the relational and individual challenges to structural factors such as maintaining employment and education when women contend with domestic and family violence.

Women lived with violence, fear, risk, and hidden homelessness (Enders-Dragassser, 2010; Tually et al., 2008; Watson & Austerberry, 1986), and Figure 13 highlights how long the women were in the domestic and family violence before leaving permanently.
I turn now to consider the experience of approaching the first ever experience of homelessness.

**APPROACHING HOMELESSNESS**

If you are brought up and not treated right you never realise that you are supposed to be treated right. (Joanne)

Six women reported problematic early life experiences which they said contributed to their pathway into homelessness. This involved two women who witnessed domestic and family violence as children, two women who reported childhood sexual abuse, and another two who described chaotic childhoods which precluded the opportunity to develop secure attachments with caregivers (Perry, 2001).

As reported in Chapter Four, I did not ask questions about early life experiences. However, these six women chose to contextualise their adult experiences of homelessness by discussing these events. The women said that their childhood experiences provided a particular orientation to adult relationships which led them to believe that their experience of domestic and family violence was expected and "normal” as reported by Joanne, a non-Indigenous mother of three. Michelle, a 44 year old...
old non-Indigenous mother of four, represented other women's comments by pointing to the influence of key role models who enacted, or were subject to violence:

I thought that was part of life, I thought that was how men were supposed to treat women. You know, that's how my step father treats my mother.

(Michelle)

The women also reported that these experiences made it difficult for them to distinguish between acceptable or unacceptable behaviours within their adult relationships and assert their right to personal safety. These factors undermined the women's belief in their right to resist violence, and their capacity to end abusive relationships.

Social learning theories on the intergenerational transmission of violence assert that witnessing violence constructs perpetrating or submitting to violence as 'normal' (Bandura, 1986). However, contemporary research suggests that the evidence is not conclusive and a "weak-to-moderate relationship between growing up in an abusive family and becoming involved in a violent marital relationship" exists (Stith et al., 2000, p. 640). These women's narratives pointed to the instructional impact of populist discourses which stem from intergenerational theories of violence. Women spoke about their relationships before the violence started and I now consider this.

Six women reported that their relationships were mostly satisfactory before the violence commenced. Many women identified with Sarah's description of "the lure of the white dress" which involved popularly endorsed discourses about what girls and women 'should' do, and gendered behavioural expectations within heterosexual relationships. The women's narratives indicated that performing womanhood in these ways involved degrees of subservience even before the violence started. Fraser traces the sources, workings, and contradictions of such discourses:

Discourses about love, sex, and romance come from family members, alternative caregivers, peers, religious authorities, the mass media, teachers, neighbours, coaches, and the state, just to mention a few. From this jumble of stories girls are usually given and frequently look for specific instructions about how to 'do' womanhood. Navigating one's way through the mosaic of
instructions is part of the process of growing up, yet these instructions are often inconsistent or contradictory. While they can often feel individual or interpersonal, they are part of the much wider realms we refer to as social and cultural. (Fraser, 2008, p. 122)

Two women reported that the early stages of their relationships were characterised by a shared enjoyment of drugs. Lucia's story highlights how she managed her social isolation and lack of emotional support by connecting with her partner's family through recreational substance use. Her comments invite reflection on the differences between substance use, misuse, and 'abuse' which I will discuss shortly:

And then I met this family and I thought: Right I'll make them my project. I had my family back and I had that support and even though it was very dysfunctional, we were a family and we did have some really good times. That’s what a lot of people don’t understand. So even though we were incredibly dysfunctional, there was almost ... like a 1950s thread running through it. The children had four parents. It was the sort of thing where ... we might drop an Eccy [Ecstasy pill] at three o’clock in the afternoon, and ... decide ... we’re taking the children to the beach. So, there’d be picnic hampers made up ... with beautiful meals prepared. And things were done properly ... it didn’t matter how wasted everyone was, the children were always buckled into the car. There were ... certain things that were done. And it cracked me up. Even ... at that time it wasn’t lost on me. And I enjoyed that ... bizarreness. I’d be a liar to say that I didn’t. And we had some tremendously, fabulously funny times. (Lucia)

Fear, abuse, and violence came to settle in the women’s lives at some point and the women reported experiencing physical, sexual, emotional, financial, religious, and verbal abuse. Prior to the violence starting, perpetrators enacted controlling and censorial behaviours through emotional, financial, and psychological abuse. Women did not categorise these experiences as abuse until physical violence started, and then retrospectively framed the relationship as abusive. Bronte is a 36 year old non-Indigenous mother of three who experienced two domestic and family violence
relationships. Her narrative draws out how this retrospective re-framing happened in her second violent relationship:

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\text{He was the nice male syndrome ... worked and ... got on really good with [son], but as soon I had a baby to him ... [son] was just wiped off the face of the earth. He treated him like a prisoner ... in our home and ... used to bash the living crap out of him. (Bronte)}
\]

For a number of women, perpetrators enacted emotional abuse by constantly raising issues from the women's past and using these events to discredit and undermine. For those women living away from family and friends, perpetrators harnessed the woman's isolation to reinforce that she was unworthy and unlovable. A common theme reported was the unrelenting destabilisation of the women's sense of reality. All of the women spoke about the devastating and long-term impacts of emotional and psychological abuse (also discussed by Bagshaw et al., 2000; Commonwealth of Australia, 2009b; Morgan & Chadwick, 2009; O'Leary, 1999).

Women reported that perpetrators continually misrepresented situations which led them to question their capacity to distinguish between ‘reality’ and illusion. This constant derision, invalidation, and erosion of the women's sense of reality impacted on their ability to assess their situations and make informed decisions (Patton, 2003). Sandy is a 45 year old non-Indigenous mother of two, who spoke in detail about consistently losing perspective and questioning her mental state as a result of her husband’s abuse. She contrasts physical and emotional abuse and recognises that domains of personal safety extend beyond the physical and are often deeply embedded in the psychological realm:

\[
\text{It’s very, very confusing. I know this probably doesn’t make sense ... I think I would rather have had a slap across the face, than that ... constant mental ... torment ... manipulation and abuse. (Sandy)}
\]

All 12 women experienced physical violence and this included pushing, shoving, stabbing, punching, hair pulling, and broken limbs and bones. Most women required medical treatment for their injuries and a small number were hospitalised. Perpetrators
used their fists, feet, heads, bodies, and weapons to assault the women. Two women reported the violence commenced when they were pregnant and others noted that the violence intensified when they became pregnant, often involving attempts to injure or kill the unborn baby (similar changes in relation to violence and pregnancy are noted by the Australian Bureau of Statistics, 2006; Bagshaw et al., 2000).

Women said that the violence was perpetrated strategically which meant that injuries were rarely visible. Jo, a 35 year old Maori woman, summarises the views of the majority of women who felt compelled to conceal the abuse (also noted by G. Johnson, Gronda, and Coutts, 2008 in their discussions on domestic and family violence pathways):

I started lying and covering up from the very beginning. I was so scared ... that when it came to it, they’d rather have their ... director, rather than their sound girl. I didn’t want people to make a choice by telling them what was happening to me, because I knew that I’d be on the losing end of that choice; which proved to be true when we did finally split up. (Jo)

Two women in this pathway (and another in the youth to adult pathway who experienced domestic and family violence as an adult) reported that their partners used professional privilege to enact domestic and family violence. These women were extremely cautious about their confidentiality and requested that non-specific details were included in the final write up to ensure they could not be identified and subject to further instances of abuse, threat, and intimidation. The senior positions held by these men were in education, law and health, and the institutional systems in which the men worked implicitly supported their abusive tactics.

In these cases, perpetrators used their professional privilege and standing to discredit the women when they disclosed the abuse to others. The women were framed as mentally ill, unstable, and dangerous by their partners and in time, colleagues, family, friends, and neighbours (Herman, 1992). The perpetrators developed and implemented complex strategies to convince work colleagues (who were also work colleagues for two women), police, family members, friends, and neighbours that the women were untrustworthy and psychiatrically impaired. This led to further social isolation and reinforced the women's uncertainty about what was ‘real’. 

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These women's experiences highlight the workings of professional male privilege (Douglas, Bathrick, & Perry, 2008) and the ways in which historical discourses about women, hysteria, and 'madness' reinforce women's oppression (Foucault, 1978). These accounts also show how relational factors (men enacting abuse against women) are transformed through discursive practices, gendered relationships, and professional privilege to become individual dispositional features of – ‘unstable, mentally ill women’ who fabricate or imagine the abuse.

Two women reported that they enacted violence against their partners in self-defence, with one woman convicted for assault when she bit her partner's finger off as he strangled her. In her narrative, Lucia describes responding with violence to her partner:

> And then one night [partner] took a crack at me ... and that was a really bad move because I stabbed him through the hand. I had a toasted sandwich and he knocked it out of my hand and ... he put his hand down and I ... stabbed him. I remember thinking: *What am I turning into* ... but still that nothingness. And my sister walked in the door ... and ... I was getting ready to kill him ... and ... it took her ... five minutes to talk ... me down. And I don't remember much. I remember him bleeding and screaming and carrying on like a stuffed pig. (Lucia)

A number of women spoke about the impact of their partner's mental illness and substance misuse, arguing that these factors triggered and exacerbated the abuse. Lenore, a 42 year old non-Indigenous mother of three, spoke about her experiences of psychiatric services and the compartmentalisation of interconnected factors which constituted her lived experience:

> He was diagnosed with depression ... and yes, it was a relationship issue, but the depression wasn’t helping. He had two people from ... mental health [services] in the house and ... he scared them out of the house ... they were scared off. It’s a failure of services to recognise that there’s links between things and that there needs to be some coordination and overlap of provision of service. (Lenore)
Jade's experience of her partner's co-occurring mental illness and substance misuse being disaggregated from his use of violence are similarly troubling. Jade's actively psychotic partner who was also misusing amphetamines was able to convince the police that Jade should be removed from the house, saying she was sexually abusing their children. This allegation was a psychotic delusion, but Jade was required to leave the house, go to a single women's refuge, and leave her young children with her partner. Jade subsequently convinced the Department for Child Protection to assess her partner and the children were immediately removed and reunited with Jade. These events signalled the beginning of ongoing statutory child protection involvement for Jade and her children which was discussed in Chapter Four.

The women in this pathway were continuously unsafe and nine women fled and returned to the relationship numerous times before making a final break. They sought respite in specialist homelessness services, with family, friends, and in one woman's case, psychiatric hospitals. Women returned because of financial difficulties, having no other accommodation options, feelings of love for their partner, believing and hoping that their partner's promises of change would materialise, threats of harm to the woman or her children, harm to pets, impaired self-esteem and confidence about managing alone, cultural factors, and the influence of familial discourses in emphasising that children 'should' be raised by both parents (Benevolent Society, 2009; Enander, 2010; Tually et al., 2008).

Discourses about families, successful relationships, and children's developmental needs were highly influential in the women's decisions to remain in, and return to, the abusive relationships (Bagshaw et al., 2000). The women's discussions on why they returned demonstrate the interchange between structural factors (no housing options, financial issues), relational factors (threats of harm, children 'needing' to be raised by both parents, and love for partners), and individual matters such as impaired self esteem and limited confidence about being able to cope outside of the relationship. Cultural standpoints and values intersected with these factors for four women and I explore this further shortly.

In relation to children, a number of women spoke about the influence of discourses about children 'needing' both male and female parental input. These
discourses do not reflect the evidence base on optimal conditions for children’s development, yet they mirror dominant heteronormative assumptions (Bagshaw et al., 2000; Harms & Connolly, 2009). These discourses were highly influential in the women’s lives and underscored their decision making processes. Bronte points to the impact of these discourses:

I had it in my head that ... this is going to work or I’m gonna give it all that I can ... it comes ... from the family things where you ... think ... that’s the father, I’m the mother; we should be giving it a go for the kids’ sake. (Bronte)

Bagshaw et al., (2000) and Fraser (2008) draw attention to how much effort women invest in making these relationships work and the internalised sense of being unsuccessful when the relationship ends. This sense of “failure” as described by Sophia, a 50 year old South East Asian woman, was identified by most women as a key feature in the decision to return to the violent relationship after leaving. After returning, some women agreed to attend couple’s counselling. This was unsatisfactory and unsafe for the women when counsellors did not implement minimum practice standards for couple’s counselling which hold women’s safety as the primary focus (Breckenridge & James, 2010; Grealy, Humphreys, Milward, & Power, 2008). These counselling sessions invariably blamed and problematised the women for the state of the relationship as Liz, a 36 year old non-Indigenous mother of two notes:

We were meant to be there to sort our problems out and listen to one another, but ... it was all about what I’d done wrong in our relationship. (Liz)

Women pointed to discursive practices which focus on why women remain in abusive relationships. Additionally, as one service provider noted, asking why women do not leave reorientates the gaze and blames women for men's violence. Chloe echoed the views of other women when she talked about judgemental attitudes and discursive practices directed at women who remain in domestic and family violence relationships:

People say: Why don’t you leave ... if he treats you like that, why do you stay? If it’s that bad, just leave. And it’s just not that easy. I want him to ... change. It’s just that hopefulness and wishing he will. They have no understanding of
what it means to be in the relationship that’s abusive. They don’t get it at all. (Chloe)

As Chloe observes, ending a domestic and family violence relationship involves emotions, attachment, material realities, and much more than packing a bag and leaving (also discussed by Patton, 2003).

These discussions on the impact and workings of discursive practices highlight how the responsibility for relational violence shifts to focus on women’s apparent individual and dispositional shortcomings. This engineers the gaze away from men’s choices to enact violence and instead problematises women who remain in the relationship. This means that the relational features (men’s violence and privilege) which lead women to flee and experience homelessness are lost in the mosaic of privilege, gendered relationships, normative expectations, and discourses.

Before entering homelessness most women sought assistance from police, crisis help-lines, health, and medical services. The majority reported unhelpful responses as they were judged for seeking respite rather than ending the relationship (Benevolent Society, 2009). Women also spoke of racist and judgemental attitudes from service providers. Other women discussed experiences of having their credibility diminished by articulate perpetrators who often occupied privileged community positions. Some women spoke of understanding the frustration experienced by police who had been attending domestic and family violence incidents over many years, and who could trace no apparent changes, including women’s unwillingness to lay charges or later withdrawing their complaint. These descriptions point to the mediating influence of service delivery practices in a women’s pathway into homelessness and this is discussed further in Chapter Eight. I now examine the conditions under which women made a final break from the abuse and entered homelessness.

**ENTERING HOMELESSNESS**

When it came to making a final break some women had engaged in long-term, methodical planning, while others escaped spontaneously (Bagshaw et al., 2000; R.
In their narratives, women traced the multiple factors and turning points which resulted in ending the relationship. Eroded confidence and capacity to make decisions after being constantly told they were incapable, “useless” (Joanne), and responsible for the abuse mediated the women’s decisions (R. Edwards, 2004; LenMac Consulting Pty Ltd, 2005; Patton, 2003; Women’s Health Goulburn North East, 2005).

Chloe had made a final break when we first met, but later advised she had returned to her partner and that the abuse had recommenced. Chloe had given birth to her second child and built a house with her partner since returning. She said it was unlikely that she would make a further final break from the relationship in the foreseeable future. Given that Chloe had returned after making what she considered a final break, she has been included in the sample. Importantly, her reported sense of “failing” herself, her children, and the relationship is instructive in understanding the complexities of a domestic and family violence pathway.

Giving up hope that the violence would cease was the central reason women made a final break (Bagshaw et al., 2000; Benevolent Society, 2009; Fraser, 2008). Women reported that these realisations were significantly different from the previous occasions of leaving for respite as it became clear that despite perpetrator promises to cease controlling and abusive behaviours this was unlikely to occur. This awareness was accompanied by sadness, loss, and grief with women acknowledging that their hopes and dreams for the relationship, the future, and their family had become shards of despair (Fraser, 2008). Lenore encapsulated the feelings of the other women about this profound realisation:

You **have to** give up completely that there’s any hope of anything improving. There is no chance that things will ever change. Somewhere deep inside you there is something that’s always wanting it to work, because you would never be there in the first place ... and you have children and you want them to be able to be with their father ... and ... until ... that hope ... is gone ... you can’t walk away - not 100 per cent. (Lenore)
Situated alongside giving up hope was a sense of “enough is enough” (Sandy) when women realised that the relationship was not going to change and they became angry about the way they were treated. For many women, this anger surfaced when their partners threatened their children or acted in ways that placed the children at serious risk (Benevolent Society, 2009; R. Edwards, 2004; Patton, 2003; Women's Health Goulburn North East, 2005). Women reported a sense of empowerment (which was sometimes short lived) when they took a stand against the violence.

Culture was an intersecting factor for four women and Sophia's story embodies the themes described by other women in this pathway. Sophia described the ways in which culture and her Muslim faith informed her orientation to marriage. Consequently, Sophia endured extreme abuse and serious violence for 16 years. Ending the relationship was a last resort for Sophia and she is left with an enduring construction of herself as a “failure” as a wife. She carries deep sadness and shame. Other research notes that women from culturally and linguistically diverse backgrounds find that cultural constructs, fear, shame, migration, language, beliefs, and values mediate women's assessments of remaining in or leaving abusive relationships (Bagshaw et al., 2000; Benevolent Society, 2009; Commonwealth of Australia, 2009c; R. Edwards, 2004).

Ending the relationship did not mean the women's feelings for their partners disappeared, yet women were reluctant to give voice to these feelings which co-existed with violence and abuse. Lucia’s description of this is instructive. Shortly after making the final break, Lucia's ex-partner admitted to sexually abusing her daughter. In the following quote she describes how she turned to her ex-partner after a close family member died even though the relationship had ended 12 months before:

Stayed the night with him … made love … and I know for a lot of people that doesn’t make sense and it doesn’t make sense to me either. I just had too. And I know that he was very sorry … (crying) … the more I get to know, the less I know. (Lucia)

Lucia's statement invites engagement with the processes also reported by other women when it came to ending the relationship. Women spoke of needing to turn off their feelings for ex-partners because of violence while continuing to love and be
sexually attracted to them. In her role as a worker in the domestic and family violence area, Lucia shared her observations of colleagues who do not acknowledge that love and abuse co-exist, arguing that this closed stance minimises the possibility of a woman giving voice to, and making sense of, these contradictory feelings. The open stance advocated by Lucia reflects the type of approach I have sought to apply in this project, whereby feelings are not considered 'rational', 'logical' or sequential; rather they are messy, contradictory, and meaningful (Parker, 1992). These discussions encourage a respectful stance that frames the process of ending an abusive relationship as incremental (Bagshaw et al., 2000).

All women identified that an escalation or change to the type of abuse, violence, and threat contributed to the decision to leave permanently. These changes signalled to the women that their previous assessments of safety needed to be revised (also reported in research by Bagshaw et al., 2000; Benevolent Society, 2009; M. Edwards, 2004; LenMac Consulting Pty Ltd, 2005; Women's Health Goulburn North East, 2005). When these changes occurred, women felt less able to predict what their partners would do. This happened for Sarah, a 40 year old English woman, when her husband approached her holding a mandarin in one hand and a bread knife in the other. I asked Sarah to clarify the significance of this and she replied:

You don’t eat a mandarin with a bread knife. (Sarah)

Based on 16 years of abuse and violence, Sarah was highly attuned to the meanings and implications of changes in her husband's behaviour.

Making the final break was a combination of relational factors (framing violence as unacceptable, giving up hope that behavioural change would occur, and refusing to allow children to be threatened or harmed) and individual dispositional factors whereby women adopted an assertive stance of ‘enough is enough’. Structural factors common to all women when they entered homelessness were leaving their homes and for the majority of women, having no income. I now explore the experiences of the two women who came into homelessness on the substance misuse pathway.
Substance misuse pathway

I lost my mother. I lost my father ... both ... passed away. Then I started using drugs and then my ex-partner came along and took my children ... off me ... and that's when I became homeless and needed help. (Debra)

This section considers the experiences of the two women on the substance misuse pathway. I start by examining theoretical and discursive understandings of substance use before considering the women’s experiences before, and upon entering, homelessness.

Substance misuse and use is theorised in a range of ways, with longstanding and populist explanations of substance 'abuse' as a disease. This position represents biomedical discourses which incorporate interventions such as the twelve-step-model and abstinence (Lee, 2004). In line with my critical post modern orientation, I assert that language such as 'abuse' and 'addiction' conceptualise use and people who use substances in particular ways. These constructions reflect social, cultural, historical, and moral constructions which reflect particular arrangements of power (Kellehear & Cvetkovski, 2004). I have not adopted a bio-medical model in this project however I acknowledge that for many people, including the women in this pathway, abstinence can assist in the management of problematic substance use.

I frame substance use as functional within the socio-cultural context of a person's life. I also acknowledge that substance use can be highly problematic for some people. My personal and professional positionality in relation to substance use and misuse is reflected in Berkhout’s and Robinson’s discussions:

We have constantly experimented with substances which have the power to alter our mood and our perception of reality. Our attraction to, and enchantment with, mind-altering substances has been both exalted and damned. The type of substance, the quantity used, the frequency of use, the purpose of use, the method of ingestion and the intensity of the experience are all regulated by moral judgements, socially determined behaviours and laws. (1999, p. 6)
The theoretical and philosophical principles I brought to the project are that substance use is common and functional. Substance use is found across all socio-economic groups, ages, communities, cultures, and contexts (Marsh & Dale, 2006). Reflective of this stance, I aimed to create a safe space in the interviews for women to talk about substance use and misuse in a judgement free environment. I was conscious that research and practice evidence indicates that women's experience of using, reasons for using, and the type of substances used are gendered and different to men's substance use (Wenzel et al., 2009). Despite this, the amount of research undertaken on women's substance use is limited (Donath, 2004).

Women's substance use is commonly linked to trauma and abuse, domestic and family violence, the impact of gendered poverty, and caring for others with substance misuse issues (Donath, 2004; Humphreys, Regan, River, & Thiara, 2005). The literature on women's homelessness and substance misuse centres on connections between trauma, abuse, and violence (Bassuk et al., 1998; Jones, 1999; Milburn & D'Ercole, 1991; S. Murray, 2009; Reeve et al., 2007; Stein, Leslie, & Nyamathi, 2002). Substance use is commonly framed as a coping mechanism, while a small number of studies assert that women's substance misuse causes homelessness (Catherine House Inc, 2003; Jerome et al., 2003; Reeve et al., 2006). Whilst not specific to women, Australian studies have identified a bi-directional relationship between homelessness and substance misuse (Chamberlain et al., 2007; G. Johnson & Chamberlain, 2008b). It has also been argued that single women are more likely to experience substance misuse than women with children in their care (Averitt, 2003; Robinson & Searby, 2005; Roll et al., 1999).

Shiloh and Debra are non-Indigenous Australian women aged 32 and 35 respectively, who identified that substance misuse was the reason for their first homeless experience. Shiloh occupied a well-paid professional role prior to her substance use becoming problematic. Her substance misuse resulted in a three year period of homelessness. Debra reported no lifetime experience of education, employment, or training and stated that many years of escalating substance misuse culminated in her five year experience of homelessness.
APPROACHING HOMELESSNESS

Both Debra and Shiloh reported that intravenous amphetamine use was their method and drug of choice. Both women repeatedly emphasised the normalcy of their childhoods and families. These women distanced themselves from the subject position of 'victim' from a 'dysfunctional family' who uses substances to cope with trauma (Marsh & Dale, 2006). Shiloh reported that her mother had been extremely tolerant of her substance use over the years, whereas her father was more inclined to insist she take responsibility for her behaviour and choices. In thinking about her outbursts of aggression, unpredictable behaviour, and stealing, Shiloh said:

I reckon they should have kicked me out a long time ago. She [mother] is the last person in the world who deserved it. And neither does my dad, but his coping mechanisms were withdrawing from me, and I'm an only child as well. (Shiloh)

Debra emphasised the stability of her childhood, and reported that she “chose” a transient lifestyle from the age of 16. She clearly delineated her lifestyle choice of transience from homelessness as a result of substance misuse.

I moved a lot when things got too hard ... since I was 16. Six months would be the longest. Instead of dealing with something that was going wrong, I would leave it and ... let someone else have it (laughs). I didn't have to deal with what was going on or stand up to my responsibilities. It was easier to run. I think I knew ... I had a choice and ... my choice was to run. (Debra)

Both women emphatically claimed absolute personal responsibility for their substance use and entry into homelessness. In adopting this position of responsibility, Debra and Shiloh applied disparaging constructions to themselves as substance users. Throughout the interviews, both women continually emphasised that no specific traumatic incidents led to their substance use. In this, they constructed themselves as free and active agents in their substance misuse and subsequent homelessness. Shiloh's framing of her situation reflects her Christian beliefs yet Debra’s non-religious statements deployed similar discursive practices:
Everyone must seize responsibility for their own actions, despite ... their upbringing. You’ve really got to make your prison your platform ... just as Paul and Silas did in Chapter 12 of Acts. I’m not taking anything away at all from people who have been abused or beaten up or, or even those who’ve buried stuff from childhood that they don’t remember. Something triggered ‘em to go down that path. But the thing is two people can have a shot of heroin. One will never have it again. The other will become a full-on junkie. I don’t feel like I carry a grudge or anything.  **I don’t blame anybody, at all.** I think I’ll be repenting for the rest of my life. (Shiloh)

Shiloh said that she had tried a range of illicit drugs before her use became problematic. Shiloh’s turning point from experimentation to problematic use was marked by daily and intravenous amphetamine use. In the following statement, Shiloh draws on the concept of an “ordinary drug addict” who follows a normative and patterned trajectory of substance use:

> I think just like the ordinary drug addict, you try it, then it becomes a weekend thing; then Thursday to Sunday; then Wednesday to Sunday; then every day of the week. And after the first year, I started shooting up. (Shiloh)

Shiloh’s account reflects gateway theories of substance use which assert that people experiment with ‘soft’ drugs like Cannabis and incrementally move towards stronger substances, which ultimately leads to habituated and problematic use patterns (Hamilton, 2004).

Along with holding unfavourable views about themselves, Debra and Shiloh were acutely aware of being judged by others which Donath considers from a gendered perspective:

> While both men and women drug users are stigmatised, women are often regarded with particular abhorrence. (Donath, 2004, p. 106)

Prior to entering homelessness the women constantly moved between family, friends, substance-using associates, and drug rehabilitation centres. I now consider the experience of entering homelessness.
ENTERING HOMELESSNESS

I was a drug addict, I got kicked out of home ... stayed in my car ... about three
weeks. (Shiloh)

Two recent Australian studies report that between 66% and 75% of participants
developed substance misuse patterns after becoming homeless (Chamberlain et al.,
2007). Shiloh and Debra, however, strongly asserted that their drug use created the
conditions for homelessness. Distinct features of a substance misuse homeless pathway
have been well articulated by G. Johnson, Gronda and Coutts (2008) and include
becoming homeless after running out of options due to loss of employment and the
material and emotional support of family and friends. This fits Debra’s and Shiloh’s
accounts of their support options which atrophied the longer they misused substances.

Debra and Shiloh were left with few social supports outside of their substance-
using acquaintances. For both women, this created risky situations as they encountered
men who expected them to exchange sex for a room (Novac et al., 1996; Reeve et al.,
2006; Syngajewski et al., 2007; Tomas & Dittmar, 1995). Debra’s statement mirrors
Shiloh’s descriptions in that any risk to personal safety was minimised and normalised as
part of the substance misuse journey:

He ... had the hots for me ... but I was really heavily pregnant and it’s weird ...
interested in you while you’re like that. But I was staying with him and it got to
the point where I couldn’t stay with him any longer so that’s when I went to
the Salvation Army. (Debra)

Johnson, Gronda, and Coutts also draw attention to the "present orientation"
(2008, p. 73) of people in a substance misuse pathway where the immediate, primary,
and overriding focus is on obtaining and using substances. This is something that both
Debra and Shiloh spoke about, referring to the overwhelming focus to "get on" (Debra)
which usurped activities of daily living, including securing accommodation:

A junkie ... basically lives to make money to get drugs and it’s sort of like a
three step cycle, continually all day, every day. (Shiloh)
Both women were resigned to the inevitability of homelessness given their consuming focus on drugs, which Debra sums up here:

I ... had stuffed up to the point where I felt there was no return. (Debra)

Debra and Shiloh reported that their amphetamine use was high and unmanageable upon entering homelessness. They correlated their move away from normative and socially sanctioned activities with significant increases in the frequency and quantity of amphetamine consumption and their slide into homelessness.

In reflecting on structural, individual agency and relational factors, both women rejected relational and structural explanations and influences, instead arguing they were individually responsible for their choices and experiences. I now offer some concluding comments on the experiences of the 14 women who entered homelessness for the first time as adults and compare their experiences to the 21 women who came into homelessness on a youth pathway.

CONCLUSIONS

I start by summarising the experiences of the women in the adult pathways and then turn to broader comparisons across all pathways. The experiences prior to becoming homeless vary across the two adult pathways, yet both pathways reported constantly being on the move before entering homelessness.

Ending the domestic and family violence relationship and becoming homeless was a complex process for the women in this pathway and was guided by discourses about children 'needing' to be raised by both male and female parents and women's ‘responsibility’ for creating successful relationships. Making the final break happened when women came to see that there was no hope that their partners would make the promised changes to cease their violence and abuse. For these women, the primary focus once homeless was safety for themselves and their children. In contrast, Debra and Shiloh reported that as their substance use spiralled out of control they viewed homelessness as inevitable, particularly as their support networks and temporary accommodation options dwindled (G. Johnson et al., 2008).
This comparative discussion of the two adult pathways into homelessness draws attention to the differing emphasis on structural, relational, and individual factors. The women in the substance misuse pathway emphasised individual factors by claiming personal responsibility for their substance misuse and homelessness. The experiences of the women who experienced domestic and family violence emphasise relational factors driving their escape and decision to end the relationship. These relational factors were mediated by structural and individual factors unique to each woman’s context.

It is also useful at this point to compare the youth and adult pathways, in order to draw this and the previous chapter together. The median age varied significantly with the young women who escaped representing the lowest median age of 14.1 through to the women on the substance misuse pathway who had a median age for the first homeless experience of 33.5 years. Thirty four women left a family home to enter homelessness for the first time. Thirty one women reported an in and out trajectory before becoming homeless, which involved accessing temporary accommodation with friends and family, sleeping rough, psychiatric hospitals, and specialist homelessness accommodation.

The youth escape and adult domestic and family violence pathways involved unsafe environments where the women were subject to various forms of violence and abuse. Women in these two pathways felt they had little control over their circumstances, as they were subject to the abusive behaviours of others. When it came to the first experience of homelessness, these women assessed that leaving was the only way to improve their personal safety. Across these two pathways, women were discredited, invalidated, and problematised.

Emotional and physical vulnerability were reported by women from all pathways when they first came into homelessness. However, the women in the eviction, 'choice', and substance misuse pathways asserted their responsibility for entering homelessness which mitigated their retrospective expressions of vulnerability.

The women in the youth escape and domestic and family violence pathways shared the experience of relational factors creating the conditions for their first homeless experience and being pushed into homelessness. These relational factors were
discursively reconstructed by perpetrators and their allies to blame, problematise and pathologise the women. This led to the women being positioned as responsible for entering homelessness. In contrast, the women in the ‘choice’ and substance misuse pathways explained and experienced homelessness as a consequence and function of their individual agency. While the women in the eviction pathway referred to the impact of relational factors in the form of interpersonal conflict which led to them being kicked out, they emphasised individual choice and agency in the homeless experience. Chapter Seven follows and examines the experiences of the young women living homeless.
CHAPTER SEVEN - YOUNG WOMEN LIVING HOMELESS

There but for the Grace of God go you because you could be homeless tomorrow ... it’s particularly insidious ... disempowering and ... a ... friendless environment. (PM2)

This section considers the young women’s experiences while homeless and responds to my research question 1.2 of what happens to women while homeless. Discussions in this chapter reflect the themes that emerged from my analysis of the women's narratives as well as topics reported in the literature (Alvi et al., 2010; Auerswald & Eyre, 2002; Fitzpatrick & Clapham, 1999; Hutson & Liddiard, 1994; G. Johnson & Chamberlain, 2008a; G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003; Mallett et al., 2010; National Youth Commission, 2008; Novac et al., 2002; Reid et al., 2005). These themes include navigating homelessness, social connections and relationships, violence and safety, substance misuse, mental illness and mental health impacts, and service delivery. The structural, individual agency, and relational analytic framework is applied and relevant discursive practices are illuminated.

The eviction and escape pathways are the foci of this chapter. Tracy’s experience of ‘choosing’ homelessness for a “party” lifestyle involving substance use and primary homelessness is not included because her experiences are significantly and qualitatively different from those of the other young women. However, as Tracy had long-term and recurrent adult experiences of homelessness resulting from domestic and family violence, substance misuse, and mental illness, her circumstances are considered in Chapters Eight and Nine. I start my discussion of the experience of living homeless by considering the narratives of the women in the eviction pathway.

Eviction pathway

She kicked me out ... one o’clock Sunday morning. I came back from my friend’s place and she said: Pack your bags and leave. It was like: What have I done wrong? Did I do something wrong? What had I done? I rang up my
friend ... she came back and picked me up and then the next day we ... got my stuff and I just stayed with her for a little while. (Emily)

Emily’s quote illuminates the experience of the women who were evicted, in that the transition to homelessness was unexpected (Jones, 1999). The experience of living homeless was characterised by disruption and uncertainty about where to go and who to turn to (also found by Novac et al., 2002 in their study on young women and homelessness). Gertie, an 18 year old non-Indigenous woman, captures these emotional reactions:

I was pretty stressed out. I was still trying to keep a job ... just the insecurity of ... not knowing where you’re going ... what it’s going to end up like. (Gertie)

In shock, the women started the process of navigating the experience of homelessness, which I now consider.

Navigating Homelessness

Upon entering homelessness, two women immediately experienced primary homelessness, another three were accepted into specialist youth homeless accommodation services, and the remaining four young women obtained temporary accommodation with friends. Figure 14 represents this:
One of the young women who moved directly into primary homelessness is Kate, a 28 year old non-Indigenous woman who stayed one night in her car before securing temporary accommodation with a friend. Amy’s experience of primary homelessness was significantly different as a result of being "dumped" on the streets of Perth by her adoptive parents at the age of 15. Amy, a 33 year old non-Indigenous mother of one, spent the next two years sleeping rough and like the women identified in May, Cloke, and Johnsen's study, she lived in the "shadows" (2007, p. 129), subsisting on the periphery of street life, accessing free food services and homeless day centres, and then retreating to unobtrusive locations in order to maximise her safety:

I didn’t know where to go, I didn’t know who to ask, I was scared ... I didn’t go to the danger zones or anything like that. (Amy)

While Amy avoided associating with other people experiencing homelessness during her first episode of primary homelessness, she drifted towards homeless sub-cultural groups over subsequent years and this is documented in Chapter Eight. The three young women’s experiences in the specialist homelessness service system are discussed later under the heading of Service Delivery. The four young women who moved into temporary accommodation reported iterative homelessness characterised by constant movement between different types of accommodation.
Iterative homelessness was experienced by all of the women in the eviction pathway for periods between six months and five years, for an average period of 2.3 years. This involved short stays with friends and their families before being asked to move on, youth homelessness accommodation services, couch surfing with other young people, and rough living. In addition to the two women who moved directly into primary homelessness, a further two women lived rough after first entering homelessness. The average time the four young women spent in primary homelessness was 6 months.

Kylie, a 26 year old mother of two, was evicted at the age of 12 when her mother told her to leave because her new partner was moving in with his children and there was insufficient room for Kylie and her brother. Kylie points to how iterative homelessness became a normative experience:

My mum having another partner with three other kids just made it difficult. Like even before I had the girls I was always moving around ... I haven’t actually been in a house longer than six months. (Kylie)

Shannon’s experience of iterative homelessness was over a period of two years, involving 10 different moves. The following statement from Shannon offers a glimpse into the lived experience of disruption and uncertainty which characterised iterative homelessness for these young women:

I got a place at [youth crisis refuge] ... I was there for three and a half months and then in one of their units for two and a half. I had to move out of there ‘cause ... one of the girls ... flipped out and became really violent - threw a rock through my front window; was threatening to kill my cat. I camped out in ... my mate's ... back yard ... ’cause I knew they were away. I had my dog ... at that time ... so I felt pretty secure. I also made sure I didn’t go into the back yard until after dark so that none of the neighbours would see me ‘cause I didn’t want to get the cops called onto me. I moved into another shared situation ... that didn’t last very long and then I ended up over at ... the woman’s refuge, and I was there for four months and one day. Then I moved in with a 19 year old girl, who was also a crazy! She smoked a lot of marijuana and was borderline personality and whatever and so I had to leave there and
went back to [youth crisis refuge] ... for three weeks and then moved here.

(Shannon)

Structural, individual agency, and relational factors are evident in Shannon’s discussion of iterative homelessness. As a 16 year old, Shannon did not have the financial means or legal right to access independent housing. This meant she was dependent on the specialist homelessness service system to provide accommodation or when this was not an option she slept rough. From a relational perspective, Shannon had no family support after being “kicked out” by her mother. She was refused assistance from the Department for Child Protection as she was “seen as too old” for their assistance at the age of 16. Shannon’s story highlights a number of enactments of individual agency and resourcefulness. Yet, the impacts on her mental health and self-esteem were negative as a result of the constant disruption and uncertainty she faced. A number of women reported that iterative homelessness featured associating with other people experiencing homelessness and this is considered next.

**Social Connections and Relationships**

The typical conceptualisation of homeless sub-cultures involves socialisation and identification with other people experiencing homelessness (G. Johnson et al., 2008; Snow & Anderson, 1993). This sub-cultural milieu provides a place to belong amongst similarly excluded people who find themselves on the margins of mainstream activities (Snow & Anderson, 1993). I identified in Chapter Two that I was curious to see if these ideas on homeless sub-cultural groups were reflected in the experiences of women in this study.

I approached the women’s engagement with homeless sub-cultural groups by exploring their expressed identities and associations with other people experiencing homelessness. The narratives of the women in the eviction pathway highlight that a range of subject positions were performed by these young women with some reporting that they identified as ‘homeless’. Others distanced themselves from an identity of homeless and from other people experiencing homelessness. A third space was
detected where the young women occupied liminal subjectivities by rejecting and moving between and around a homeless identity (Boydell, Goering, & Morrell-Bellai, 2000). These processes of othering and positioning the self as (dis)similar are reported by Jones:

Most women said they felt that people looked down on homeless people. They felt that people assumed that to be homeless you must have done something wrong. A number of women said that was how they used to think until they discovered how easy it was to find oneself homeless. They had always thought it was something that happened to other people. (1999, p. 47)

The lived experience and sense made of homelessness can fundamentally differ from individual and collective constructions of 'homeless women'. Foucault's "dividing practices" (Danaher et al., 2000, p. 60) illuminate these discussions by considering the ways in which diversity is constructed. Dividing practices mobilise distances between the self and others and can be engineered in two ways. Firstly, they can distance the self from those who ostensibly share similar experiences or characteristics (i.e., I am not like those people). Alternatively, discursive practices can be employed to distance the self from parts of one's lived experience - in this case homelessness (i.e., I slept behind a shop for a few weeks, but I was not really homeless).

Gertie enacted dividing practices towards other young people she encountered in a youth homelessness service. She positioned herself as highly motivated to address the factors which led to her living homeless. In contrast, she constructed the other young people in the agency as different and the ‘other’ because they did not appear to take the opportunities offered to them by support workers and disregarded service delivery expectations:

They were always really good to me. They will help you ... if they know that you want to help yourself. I think a lot of people abuse that. I know lots of girls who’ve been through that [youth homelessness service] house ... and they just ... fuck it around ... they just ... don’t respect the opportunity. Some people just have the wrong attitude. (Gertie)
Six women in this pathway socialised and identified with other people experiencing homelessness. They developed social networks with other young people who were part of the homeless service delivery system and primary homeless populations. Like other homeless sub-cultural associations, these groups provided a place to belong, socialised women into the practices and performances of homelessness, and in some cases, eased boredom. G. Johnson, Gronda, and Coutts (2008) found that the young people they categorised as dissenters (who share similar characteristics to the women in the eviction pathway) were acutely conscious of a homeless subjectivity and rejected it by attempting to pass as mainstream citizens. These findings by G. Johnson, Gronda and Coutts are in contrast to these six women who associated with other people experiencing homelessness.

Bella is a 22 year old non-Indigenous woman whose experience highlights the advantages and disadvantages of engaging with a homeless sub-cultural group. After being evicted from her family home and sent 800 kilometres to Perth where her mother had booked her a bed in a youth refuge, Bella found herself spending at least five hours each day with other residents as they were required to vacate the premises. Bella said that as the clients were not linked into activities such as education, employment, and training, they became bored and turned to substance use to fill their time. Bella was introduced to intravenous drug use within this homeless sub-cultural milieu. This signalled the beginning of problematic substance use over the next four years of Bella's life.

Bella was vulnerable and unsafe in these homeless and substance-using social networks. During her three years of living homeless she was sexually assaulted twice by men who belonged to these social networks. In addition, she exchanged sex for drugs with a member of a bikie gang over a one year period while living in externally supported youth homelessness accommodation. Bella initially blamed herself for these sexual assaults as she was intoxicated, but has retrospectively reframed this. Bella did not report the assaults to police, arguing that her experience and observations of the justice system left her with little confidence that she would be treated with respect. Bella felt that there was a high likelihood she would be re-victimised by the legal system as a result of her age, gender, substance use patterns, and homeless status. Bella’s descriptions
point to discursive constructions of ‘victims’ of assault and notions of personal responsibility for sexual assaults if women are intoxicated or associate with particular groups of men (Clark & Quadara, 2010).

Bella’s experience of engagement in homeless sub-cultures speaks of the relational void in her life after being evicted by her mother and step-father, and moving to Perth where she had no family or friends. Her homeless and substance-using social networks simultaneously provided a place to belong and a site of serious risk. These relational connections compromised Bella’s sexual, physical, and emotional wellbeing. Bella’s experiences invite a nuanced approach to understanding the role and impact of homeless sub-cultural associations.

The negative impacts of homeless sub-cultures were identified by a number of stakeholder participants without prompting. These participants expressed concern about the negative consequences for young people who find a place to belong with others also experiencing homelessness. They argued that this process of enculturation occurs in service delivery environments and when living rough:

Myself and another worker went to a day centre … there was a young guy sitting there, he looked about 16, but … he was in his early 20s, and both of us just went: Get out, get out, don’t come in here kid (chuckling) … someone get him and get him out of here and put him into another … service. It was just such a shock to see such a young person in that circumstance … and that’s not right. We don’t want young kids that are sleeping on a couch ending up in the crisis system and meeting up with all these kids who are going to … potentially spiral them down. (PM1)

These discussions highlight that violence and safety were issues for some young women and I now consider this.

**VIOLENCE AND SAFETY**

Living homeless was a dangerous and risky experience for five of the nine young women in this pathway. I have already discussed Amy’s first primary homelessness experience
and how she safeguarded herself by not socialising with other people experiencing homelessness. Associating with homeless sub-cultures exposed young women to physical, sexual, and emotional abuse, as well as financial exploitation. These experiences mostly occurred in specialist youth homeless accommodation services, which I discuss further shortly. I now explore the experience and role of substance use in the lives of these young women.

**SUBSTANCE USE**

It smoothed out the bumps from time to time. (Bella)

Three women reported that their substance use moved from recreational to problematic once homeless (also reported by Auerswald & Eyre, 2002; Ferguson, 2009). The women used benzodiazepines, alcohol, amphetamines, heroin, home-bake (an opiate like substance made from codeine), and cannabis. For these women, substance use was a central and entrenched feature of living homeless. The women drew explanatory and causal links between iterative homelessness, participating in homeless sub-cultures, and intensification of their substance using patterns. The mental health experiences of the women are now considered which was a key contextual factor for a number of women in their experience of living homeless.

**MENTAL HEALTH IMPACTS AND MENTAL ILLNESS**

Three women were diagnosed with mental illnesses after becoming homeless and another reported that her pre-existing mental illness worsened once homeless. Diagnoses included bi-polar affective disorder, major depression, eating disorders, anxiety, and schizophrenia. Two of these women were mentioned in the previous sections as having problematic substance use patterns and enduring associations with homeless sub-cultural groups.

The experience of iterative homelessness for these women extended to voluntary and involuntary psychiatric hospitalisations for periods ranging from a few nights up to
three months. Being hospitalised was not associated with improved mental wellbeing, as noted by Emily:

The staff treat you like crap. They didn’t connect with you at all. They just virtually left you there and ... you were treated like animals basically. I think the only support that you have was meeting the other people who were in there. I started cutting ... it just seemed to get worse every day. I used to count them and ... if I didn’t have that many, I used to cut more. If I started to heal, I would cut different places to make sure that I had a certain number. (Emily)

Four women were actively suicidal while living homeless and three of these women reported that their substance misuse patterns exacerbated suicidal ideation. The combination of individual factors like substance misuse and mental illness coupled with the relational association with other people experiencing homelessness made it virtually impossible for these women to focus on obtaining housing and strengthening the structural elements in their lives. Interspersed with living homeless were encounters with service delivery agencies which are considered next.

**SERVICE DELIVERY**

Perhaps more important than understanding how women arrive at a certain point in their homelessness journey, is recognising how far reaching the consequences of service providers' actions can be for their future. (Reeve et al., 2007, p. 30)

Eight of the nine women had experiences of homelessness agencies ranging from one contact through to multiple encounters with every youth homeless service in Perth. As noted earlier, entering homelessness agencies signalled engagement with youth homeless sub-cultures and as Reeve et al., found, service delivery significantly mediated the women’s experience of homelessness.

Four women were bullied and threatened by other residents about their sexuality or unwillingness to succumb to pressure from peers. Emily found herself bullied on the
basis of being diagnosed with a mental illness. This occurred after staff left her client file on a desk in an unsecured office and other young people read the documentation. Gertie spoke of both positive and detrimental experiences in youth accommodation agencies. The experience in one agency was particularly troubling and led to her leaving and moving into primary homelessness:

It was all right ... to begin with. I never ... used needles or anything ... I've taken lots of drugs ... but she [other resident] was ... a junkie. I stayed there for six months ... towards the end of it ... there was ... Coffin Cheaters in my house trying to ... kill people ... because they owed 'em money for drugs and stuff. (Gertie)

Gertie and three other women with similar experiences spoke to the importance of proactive service delivery based on clearly defined policies and expectations of service users. In the examples shared of these types of service delivery models, the women reported that they felt workers privileged client self-determination over safety and were unaware of drug use, drug dealing, exploitation, and bullying within the service. The women's stories led me to critically reflect on the strengths and limitations of non-interventionist models of service delivery. A non-interventionist approach advocates person-centred practice which privileges the individual's reference points and experiences (Rogers, 1951). Intervention is framed around what the individual identifies as their issues, problems, and goals (Chenoweth & McAuliffe, 2012; Connolly & Healy, 2009; Gronda, 2009).

My practice is grounded in person-centred approaches which reflect my commitment to have service user's lead and direct the work, enacting agency and capacity. However, unintended consequences as described by Gertie and other women can compromise safety and lead to iterative homelessness. These discussions are not intended to evaluate the practices of the agencies discussed by the women; rather my purpose is to highlight how service delivery models interact with the experience of homelessness. I acknowledge that I do not have the service providers' version of these events, which I am certain would provide another dimension to the women's narratives.
Karen is a 44-year-old non-Indigenous woman and her contrasting views about service delivery provided me with an important reminder about remaining open to individual experience and suspending judgements about models, practices, and policies:

No one could stop what was going on in my head, it was my journey and I had to do my journey, and obviously that’s where my journey went ... until I got sick of being on that journey. I think you have to want to change ... no one can change a situation for you, but you. You’ve got to be tired of not going anywhere. When you finally do get tired of not going anywhere, and you stop and you think: What am I doing? I don’t want to live this life anymore ... these people aren’t doing it for me. (Karen)

These discussions highlight the differing ways in which structural, individual agency, and relational factors intersect with service delivery practices. Gertie’s example drew attention to service delivery practices which can create the conditions for a woman to re-experience homelessness and further risk. On the other hand, Karen’s emphasis on her individual agency diminished the role of service delivery practices in mediating the experience of living homeless. The experiences of the women who escaped are now examined.

Escape pathway

The eleven young women who escaped unpredictable, chaotic, and unsafe family environments experienced a worsening of their situations in the short term, and for seven women, the long-term (G. Johnson et al., 2008). They all hoped that wherever they ended up would provide more safety and security, but this rarely eventuated. Kayla’s experience of expanded vulnerability after escaping sexual, physical, and emotional abuse mirrors the narratives of the other young women:

If I went to church ... the one predator that would be there ... would get me. If I was down the beach, the predator would find me. Those memories I have over and over and over. There was nowhere that I could go. (Kayla)

I now consider how the women navigated homelessness.

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NAVIGATING HOMELESSNESS

My mother was an alcoholic ... I ... had nowhere else to go ... so I lived on the streets. (Michelle)

Entering homelessness threw up a range of other challenges and increased the vulnerabilities already experienced by many of the young women. The young women escaped unsafe environments into a variety of types of homelessness as shown in Figure 15.

FIGURE 15 – FIRST HOMELESS EXPERIENCE AFTER ESCAPING

The six young women who escaped directly into primary homelessness lived in church grounds, graveyards, public toilets, disused buildings and squats, and in one woman's case, a refugee camp. The length of time the women experienced primary homelessness before the age of 18 ranged from three weeks to seven years, with a median period of 4.6 years. The following discussions focus on the five young women who lived in Australia, and who frequented urban or inner city locations. The women's narratives of being on the streets were characterised by fear, violence, vigilance, and uncertainty (also reported by Reeve et al., 2006; Robinson, 2010; Wesely & Wright, 2009).
Most of the women chose unobtrusive locations to avoid the attention of homeless or domiciled men (similar findings reported by Jones, 1999).

Women who sleep rough are not a homogenous group and adopt different subject positions and strategies to maximise their safety (May et al., 2007; Wardhaugh, 1999). The women who experienced primary homelessness said they adopted a range of practices to maximise their safety such as associating with other rough sleepers, adopting a territorial stance in public spaces, and presenting as aggressive and hostile. Four women who experienced primary homelessness discussed their use of violence and Willow spoke of this:

I was pretty violent before. I really regret a lot of what I’ve done, but also in the long-term ... it’s part of me. A lot of people used to test me to see if I would go off, and because I would go off ... they got satisfaction. (Willow)

Kayla’s situation exemplifies the multitude of dangers young women on the streets can face. She started living rough when she was 11 and joined a group of other young people who were sleeping rough. Not long afterwards she was diagnosed with bowel cancer and underwent major surgery and treatment. Despite being very sick, Kayla continued to return to the streets as she felt a greater sense of belonging and safety than with her abusive mother, stepfather, and other family members.

Kayla engaged in sex work while living on the streets and was recruited to participate in child pornography:

It was safer on the streets. I had been groomed for it my whole life, so I knew exactly what I had to do and how I would obtain money. When I was on the streets, I learnt to use it: Here you can pay for it. Once you hit 13 you’re too old for child pornography.

Kayla reported that she started "abusing" alcohol and benzodiazepines as a way of "numbing" herself to the sex work, child pornography, and her overall situation. She tried heroin but could not physically tolerate it. Kayla made her first suicide attempt at the age of 11:
I had ... my first suicide attempt ... at 11. I was ... seven stories up and ... I got **out** onto the ledge. All I remember was sitting down ... and thinking: I *don’t want to be here anymore*. That was ... my first touch of ... I don’t want to be here. (Kayla)

Kayla’s experiences demonstrate how extensive sexual abuse created the conditions for initial and ongoing homelessness. Sexual abuse compromised her sense of her right to be safe and treated respectfully. Kayla said she adopted substance misuse to cope, experienced constant suicidal ideation, and was diagnosed with a number of mental illnesses before the age of 18. The relational factors in the form of sexual and physical abuse which led Kayla into homelessness had a significant impact on her wellbeing.

After receiving information from a feminist youth agency about “incest”, Kayla reported increased awareness of men’s exploitation and abuse of her. She referred to enacting agency in deciding that men could pay for sex rather than exploit her, telling men: “Here you can pay for it”. In thinking about reflexivity as emphasised in Giddens’ theory of structuration (Giddens, 1984), I acknowledge Kayla’s sense and experience of individual agency in this decision. I am also drawn to reflect on the context of Kayla’s enactment of agency which was characterised by: systematic sexual abuse by her stepfather, which was denied by her mother and other family members; physical assaults and abuse by her mother; being groomed and targeted for sexual abuse by strangers; exploitation and violation through child pornography; emerging mental illness; substance misuse; and primary homelessness. This leads me to reflect upon the importance of context and the limits of structuration theory.

Fatima’s experience of primary homelessness over 13 years occurred in refugee camps. She is the only woman to be accompanied by her children in the primary homeless experience. She reported that her experience in the refugee camps was “very hard” and indicated she did not wish to discuss the experience further.

All eleven women experienced iterative homelessness for an average of 3.6 years and this comprised continual movement between specialist homelessness services, friends, family, and primary homelessness. Maria’s experience is presented as a case
study in iterative homelessness and while her circumstances are distinct, many elements are evident in the narratives of other women in this pathway. Maria’s experiences of homelessness constitute a connected set of events and contexts that began when she was 14 and were continuing 10 years later. The following examines Maria’s experiences under the age of 18 and her youth to adult homeless transition in order to provide a comprehensive picture of homelessness in her life.

Maria was introduced in Chapter Five when she escaped a two year domestic and family violence relationship at the age of 16. She was pregnant with her first child at the time and was assisted by a youth homelessness agency to obtain a public housing tenancy (the agency was named as the tenant as Maria was ineligible to be a tenant in her own right at the age of 16). Shortly afterwards, Maria’s ex-partner completed a prison sentence for assaulting her and was released. Within weeks, Maria was located by her ex-partner and he recommenced his violence which included putting their infant son at risk.

Maria was struggling to parent in the face of constant threat, violence, and intimidation from her ex-partner and his family. When her mother suggested she relinquish her accommodation and move in, Maria took the opportunity, as she believed her mother would support her in parenting her young son:

I give it up to go and stay with mum … and then mum used to kick me out lots with this newborn baby into refuges. I used to smoke a lot of drugs and my whole family do and if I didn’t have it … she’d kick me out. She’d chuck all my stuff out on the road … and I’d drive to this refuge. I’d stay there for a couple of weeks trying to get myself a house and it was really stressful ‘cause I’d ring mum back up and mum would say: Oh you come in, you’re my baby. She drinks as well so you know, it’s really sucking me in and then I’d go back there and things start up again. (Maria)

Maria’s description draws out the interplay of structural factors (giving up housing and attempting to secure other housing while in refuges); relational factors (the dynamics of the relationship with her mother; the unrelenting domestic and family violence; attempting to parent well despite having few role models and needing support
with this); and individual agency factors (assessing that the offer of support from her mother balanced out giving up her housing, and Maria’s substance use patterns). Intersectional analysis draws out Maria’s cultural responsibilities and obligations, which are reflected in her statement where she refers to expectations of reciprocity within her family (see also Birdsall-Jones et al., 2010).

Maria’s experiences with homelessness continued, but with the support of a youth homeless service she obtained a privately rented flat. However, she was evicted after her brother and mother damaged the property and broke her windows when she refused to give them money and food. The connections between structural, relational, and cultural factors are highlighted in Maria’s descriptions of being evicted because of cultural and kinship expectations regarding the provision of food and money to her mother and brother.

Maria moved into another refuge and obtained a public housing tenancy:

I was still under 20. I went into a refuge and then it didn’t take long, about six months later … I got a house in [suburb]… I had that there for about three years. Then [son’s] dad … burnt the house down … because I took him back. Oh, we were kind of together all that time. (Maria)

Maria and her infant son were assaulted by her ex-partner, followed by him setting fire to the house. She sustained a broken arm and other injuries, for which her ex-partner was later incarcerated. Maria’s attempt at maintaining housing which she obtained with the assistance of a woman’s refuge was sabotaged due to the relational component of her partner’s violence.

The Department for Child Protection supported Maria through non-statutory intervention and organised emergency housing. The condition of the property was substandard and the location exposed Maria to exploitation by extended family members. This housing set the blueprint for further iterative homelessness:

It was a crappy old house … right in the middle of [suburb] and … all my family in [suburb]. It’s like the Bronx of … Perth. People were coming over … breakin’ in the house; they were taking everything when I wasn’t there. If I go
down the road to the bank, go and get food, come back, there’d be a video missing. So I ended up with **nothing** in the house, not even a … washing machine. I had this little child with me and I got evicted. The Department of Housing told me to get out because people were just constantly in the house when I wasn’t there and … so I went to … my aunty. She was staying in [regional town] by then. So … that was beautiful … it was … different … it was a change. (Maria)

After a few peaceful months with her aunty, problems arose as family members demanded that Maria give them her income support payment so that they could purchase alcohol. Maria went to the local women’s refuge, was diagnosed with major depressive disorder and was prescribed anti-depressant medication. Maria spoke positively of the approach taken by refuge staff, identifying that they provided her with a raft of information, encouraged her to consider it, and then talked through her understanding which ultimately facilitated informed decision making. Maria noted that the service’s approach of respect for a woman’s agency was highly beneficial in assisting her to assess her situation with clarity.

Maria was unsuccessful in her attempts to secure private rental in the regional area where her aunt lives. Refuge workers provided Maria with contact details for a homelessness telephone referral service in Perth. This program referred Maria to a non-government agency which assists people with histories of homelessness and problematic tenancies. While Maria was allocated poor quality emergency housing, she reported that this was better than being homeless. Maria’s family, her ex-partner, and her ex-partner’s family continued to enact violence and problematic behaviours such as breaking into neighbouring properties and on one occasion assaulting a neighbour. Maria reported this to the police and had her car tyres slashed in retribution. Maria was evicted from this property. Maria enacted self-advocacy regarding her situation and the agency agreed to support her in another tenancy.

At the time of interview Maria had entered a new relationship and was living in another emergency accommodation property. She was awaiting a public housing allocation in a country area. Maria said she nominated a country area with low demand
for public housing, as she had been informed she was likely to be housed quickly. Maria also elected to apply for a country property as she felt she would have a better chance of keeping her location secret from her family, and her ex-partner and his family. Maria was keeping her current address secret from her family and kin, as she feared her accommodation would be jeopardised by their behaviour again. This represented a significant conflict of interest for Maria, as this choice was antithetical to cultural and kinship expectations and responsibilities:

See no-one knows where I live now ... we’ve got no trouble. I like making family dinners. I’m from a big family so we like having Easter with a big family. It’s just a traditional thing ... but I can’t have family here. I have to go and see them which makes it really hard because ... it’s always on the tip of my tongue to tell them where I live. But I know it’s wrong because if I tell one, they’re going to tell the other one and then they’re going to get back onto my in-laws and you know my kids will be back in a refuge. It’s not really fair, is it? They will never change. (Maria)

This synopsis of Maria’s experiences draws attention to some important themes starting with the young age at which she entered a domestic and family violence relationship. Violence and homelessness have continued throughout Maria’s life. To safeguard her housing, Maria finds herself in a culturally compromised position of not being able to disclose her address to family members whose behaviour is problematic and who have previously informed her ex-partner and his family of her location. This robs Maria and her children of social, cultural, and spiritual connections that are central to her identity as a Nyungar woman. Without these family connections, Maria’s cultural practices, values, and frameworks are destabilised and undermined.

The resounding theme in Maria’s story is her vulnerability to the consequences of other’s choices and behaviours – including those of her family of origin, her ex-partner, and his family. This highlights the relevance of including the concept of relational factors in understanding women’s homelessness. For Maria, relational factors created and perpetuated her ongoing experiences of iterative homelessness and limited lifetime experience of housing stability. These difficulties flow to Maria’s young children as they
are constantly on the move with her. Maria’s experiences show the impact of social connections and relationships which I now explore.

**SOCIAL CONNECTIONS AND RELATIONSHIPS**

I ran into ... my friends and ... then I ran in my other family and that there, they was on the streets, too, see? (Belinda)

Belinda is a 34-year old Indigenous mother of two who escaped abuse at the age of 13 and fled to the streets. While primary homelessness was initially frightening and disconcerting, she connected with family members and other Indigenous people who were living rough. These homeless sub-cultural and kinship groups provided Belinda with a place to belong, socialisation opportunities, and information on homelessness practices (see also Birdsall-Jones et al., 2010; Memmott et al., 2003).

The significant and multiple disadvantages experienced by Indigenous Australians are representative of the long lasting and insidious impacts of colonisation, the undermining of Indigenous culture, discrimination, exclusion, and structural disadvantage (Dudgeon, Wright, Paradies, Garvey, & Walker, 2010). A recent Australian study found that homelessness is a relatively common experience for many Indigenous Australians, with 90% of the Indigenous participants reporting an experience of homelessness before the age of 18, and 69% stating that they had accompanied their parents into homelessness as children (Flatau et al., 2010).

Associations with other people experiencing homelessness were reported by five other women, four of whom moved directly into primary homelessness. As with the young women in the eviction pathway, these associations enabled socialisation and belonging, but also exposed the women to exploitation, physical violence, and sexual assault (also found by G. Johnson & Chamberlain, 2008a; G. Johnson et al., 2008; May et al., 2007; Robinson, 2010; Snow & Anderson, 1993).

Three women became pregnant while living homeless which further reinforced their sense of isolation and abandonment as they had little family or other social support. The three women's experiences are different. Fatima’s situation of giving birth to her
children in a refugee camp was discussed previously. Willow became pregnant shortly after she was released from juvenile detention at the age of 17. The father of her child was a man she met "through the streets":

I rang my mum up and told her and she said: You made your bed, you lie in it. She wanted nothing to do with me. That was really hard. But, I thought: Well stuff you; you haven’t been there for me any other time. (Willow)

Kayla’s mother physically restrained and forced Kayla to terminate a pregnancy at the age of 16. Kayla compared this to her mother’s attempts to terminate her pregnancy with Kayla at 24 weeks. When this was unsuccessful, her mother took an overdose in a second attempt to terminate the pregnancy. These discussions point to the limited experiences of safety the young women encountered and I explore this next.

**VIOLENCE AND SAFETY**

These women escaped into homelessness because they were unsafe. However, living homeless was not a safe experience. Being isolated and socially disconnected, the young women were vulnerable to exploitation, violence, and abuse as the previous discussions have demonstrated. Associating with other people experiencing homelessness was particularly risky, yet these social connections also provided an inclusive space. Many of the young women said they internalised responsibility for their vulnerability and started to believe that they contributed to ongoing experiences of abuse. As a result of these experiences, substance use was adopted as a coping mechanism, and I now explore this.

**SUBSTANCE USE**

Five women developed problematic substance use after entering homelessness. These women were introduced to substance use by people in their homeless social networks. Substance use was a shared, central, and defining feature of these social networks (also found by Mallett et al., 2010; Robinson, 2010). The women said substance use helped them cope with unresolved trauma and assisted those who slept rough to adopt a tough
PJ, a 23-year old non-Indigenous woman, escaped her mother’s drug use, emotional abuse, and neglect at the age of 13. She has slept in the open, squatted, couch-surfed, been incarcerated in juvenile detention, and accessed numerous specialist homelessness services (from which she was frequently evicted and banned owing to her aggressive behaviour). PJ has diagnoses of complex post-traumatic stress disorder and attention deficit disorder. PJ said she was firmly embedded in homeless and substance using social networks and as a result of her lifetime exposure to substance misuse she had been unsuccessful in extricating herself from these networks. Reinforcing her desire to move away from these groups, she asserted that she: “didn’t want to hang around drug users anymore”, explaining that she has been “ripped off” many times and did not trust people in her networks (also reported by Robinson, 2010).

PJ said her long-term experiences of homelessness and substance misuse are a direct result of being exposed to her mother’s drug use and emotional abuse. Her experience demonstrates the influence of relational and individual factors in entering and living homelessness, as well as aspiring and struggling to get out of homelessness. From an individual agency perspective, PJ reported feeling hopeless about her situation and had little confidence that she could enact sufficient agency to change her circumstances. I now explore what happened for the women in relation to mental health and illness.

MENTAL HEALTH IMPACTS AND MENTAL ILLNESS
Two women were diagnosed with mental illnesses before the age of 18 and both escaped sexual abuse. Wai Ling rejected the psychiatric diagnoses ascribed to her, saying that her behaviour and psychological functioning were products of extensive and repeated childhood sexual abuse (similar themes reported by Read, Goodman, Morrison, Ross, & Aderhold, 2004). Kayla was diagnosed with obsessive compulsive disorder and said that her compulsive cleaning was welcomed by service providers. While no other women were diagnosed with mental illnesses under the age of 18, the transition to adult

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homelessness shows a different picture and this is discussed in Chapter Eight. One woman reported that she was actively suicidal while living homeless. I now explore the women’s encounters with service delivery practices.

**SERVICE DELIVERY**

Nine of the 11 women who escaped had contact with homeless service delivery agencies and systems. This ranged from day centres where women showered, washed their clothes, and had a meal when sleeping rough, through to information, accommodation, and support services. The experience of service delivery was variable and ranged from feeling accepted and cared for, to finding service expectations unhelpful and unrealistic (also reported by Jones, 1999; Reeve et al., 2007; Styron et al., 2000).

Kayla built life changing relationships with workers in a youth refuge and commented that some agency practices could be considered unprofessional (based on her current positionality as a human service worker), as she lived with two youth workers who were in an intimate relationship for three months. Nevertheless, Kayla reported that this experience was highly and positively influential as she witnessed a healthy, loving, and non abusive relationship for the first time in her life, aged 16:

> There was no abuse, they looked after me, they ... taught me ... to cook ... they taught me about ... the normal stuff. They were very powerful ... they were really gentle with me. I still believe that ... they truly cared ... for me. That was ... part of my healing. (Kayla)

In the orthodoxy of service delivery, a client living with workers is considered a conflict of interest and represents boundary transgressions (Chenoweth & McAuliffe, 2012). Yet, Kayla’s experiences destabilise these notions, particularly as they were pivotal in her healing journey. This experience gave Kayla her first ever positive relational experience. Kayla also commented on the significance of being provided with information about “incest” and said this knowledge changed her understanding of her lived experiences of sexual abuse and exploitation. She moved from believing she was
responsible for these acts to identifying that the behaviour of the men who exploited her was problematic and unacceptable.

Wai Ling's experience of service delivery is considerably different. She spent two years moving between various youth homelessness accommodation services and said that this period left her unprepared for independent living. Wai Ling's comments reflect her limited lifetime experiences of, and opportunities for, safe and secure attachment as a result of being placed in an orphanage at the age of four due to sexual abuse, and then escaping the sexual abuse of her adoptive father in Australia. As a result of her early life experiences, Wai Ling has had few opportunities to observe and learn about relationships, attachment, security, and independent living skills.

Wai Ling described her experience of unhelpful service delivery expectations which were underpinned by religious values that restricted the young people's activities (also discussed by Gronda, 2009). Additionally, Wai Ling criticised a professional model of service delivery, saying she wanted a friendship response where someone would be available to her at any time. Given the extent of Wai Ling’s needs, it is understandable that youth homelessness accommodation agencies did not meet her expectations. I now draw together the similarities and differences of living homeless in the eviction and escape pathways.

Conclusions

These discussions draw attention to the different experiences of living homeless across the eviction and escape pathways utilising themes presented in the chapter. Six women who came in on the escape pathway experienced primary homelessness for periods between three weeks and seven years. In contrast, four women who were evicted experienced primary homelessness for between one night and two years. These findings reflect Reeve, Rionach, and Goudie’s findings:

Any notion that women have a series of other options which they move through and exhaust before resorting to rough living ... is not borne out by this
research. This is unlikely to reflect an active choice amongst homeless women to sleep rough over other options. (Reeve et al., 2006, p. 34)

In this study, six women who escaped and two who were evicted moved directly into primary homelessness. This sits in contrast to findings from mixed gender studies where young people are reported to rarely move straight into rough living populations (Hutson & Liddiard, 1994; Joseph Rowntree Foundation, 2008; MacKenzie & Chamberlain, 2008; Mallett et al., 2010; National Youth Commission, 2008).

While iterative homelessness was common to both pathways, the length of time differs. The young women who were evicted experienced iterative homelessness for an average of 2.3 years, compared to 3.6 years for those who came in on the escape pathway. This reflects the fact that the young women who escaped did so an average of 1.4 years younger than those evicted. These findings are similar to G. Johnson, Gronda, and Coutt’s (2008) in that the dissenters were more likely to experience homelessness for periods of less than 12 months, whereas the group that escaped intolerable family situations experienced homelessness for periods of 12 months or longer.

Six young women from each pathway reported engaging with homeless social networks and for the women who transitioned to adult homelessness, the association with homeless sub-cultural groups has particular significance which is examined in Chapter Eight.

Five women reported that they developed problematic substance use patterns after escaping into homelessness, which compares with three women in the eviction pathway. Three women who were evicted and two who escaped were diagnosed with mental illnesses after they entered homelessness.

This summary highlights that young women who escaped were more likely to experience primary homelessness, have longer periods of iterative homelessness and develop problematic substance use once homeless (also reported by Ferguson, 2009; Shelton, Taylor, Bonner, & van den Bree, 2009). The experience of living homeless as an adult follows in the next chapter.
CHAPTER EIGHT - ADULT WOMAN LIVING HOMELESS

This chapter unpacks the living homeless experiences of adult women, drawing attention to question 1.2 about what happens to women while experiencing homelessness. Three pathway types are considered covering 12 women who came into homelessness on the domestic and family violence pathway, two who entered because of substance misuse, and the 17 women who transitioned from youth to adult homelessness. Discussion of the women’s experiences focus on themes that arose through analysis and which are also identified in other research (Bagshaw et al., 2000; Chung et al., 2000; G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003; Robinson, 2010; Tomas & Dittmar, 1995; Tually et al., 2008; Wesely & Wright, 2009). The structural, individual agency and relational framework is used to explore these components of living homeless as an adult and where relevant, discursive practices are considered. The first pathway discussed is domestic and family violence.

Domestic and family violence pathway

I went to a refuge, but they didn’t like me staying there ‘cause he knew where it was and I had the car there so they asked me to go to the Backpackers’ [hostel]. So I went there for the night, and the next day I had nowhere to go again and no refuge would take me because I was on drugs. (Joanne)

The discussions of adult domestic and family violence focus on navigating homelessness, social connections and relationships, violence and safety, substance misuse, mental illness and mental health, and service delivery. These themes are common to the majority of women. Across the 12 women, four reported having been in multiple violent relationships. Twenty nine children accompanied 11 women in living homeless.

The impacts of domestic and family violence were identified by the women as substantial, cumulative, and traceable across all areas of their lives. Women and children’s physical health was affected through injuries and stress (also discussed by Morgan & Chadwick, 2009), and financial impacts were far reaching, including financial abuse during the relationship and a slide into poverty once the relationship ended (also
found by Braaf & Barrett-Meyering, 2010). Engagement in employment, education, and training activities were compromised due to abusive tactics, social isolation, parenting responsibilities, the cost of childcare, and impaired self-confidence (see also Benevolent Society, 2009; Commonwealth of Australia, 2009b). As noted in Chapter Six, one woman kept her job after entering into homelessness.

A common emotional response reported by the women was shame at being in and ending, an abusive relationship which has also been observed by Bagshaw and her colleagues: "The social pressure to be in a long lasting and successful relationship is often internalised by women and reinforced through the responses of friends, family, work colleagues and the media" (2000, p. 38). This sense of shame commonly manifested in the women's internalised sense of self as ‘failures’ in their roles as mothers, wives, and partners. As discussed previously, constructions of self by the women were informed and mediated by dominant discourses about relationships, ‘wives’, mothers, and ‘happy couples’ (Lapierre, 2010). I now explore what it was like to navigate the first homeless experience.

**Navigating Homelessness**

The majority of women in this pathway turned to specialist homelessness service accommodation when they made a final break from the relationship. Iterative homelessness was experienced by seven women in this pathway. The average timeframe of iterative homelessness periods was 3.5 years. Iterative homelessness was an unfamiliar, unexpected, and uncomfortable experience, particularly as the women rejected a homeless subject identity and distanced themselves from other people experiencing homelessness. In adopting this positionality, the experience of iterative homelessness unsettled the women’s constructions of themselves (also reported by G. Johnson et al., 2008; Tually et al., 2008). The women moved between women’s refuges, friends, family, and for one woman, psychiatric hospitals. Figure 16 shows where the women went when they first experienced homelessness.
Jo’s story shows how disruptive and pervasive the experience of iterative homelessness can be. After leaving her ex-partner and couch surfing with friends for 12 months she accepted an offer of public housing in an unknown area far from her social support networks. She accepted the property as The Department of Housing told her she could expect to be moved to her preferred suburb within six months. She explains her decision making process and initial experience of the neighbourhood:

It didn’t involve having to ask for help from the guy who beat me up. We were in that house about two months, but in that time I was utterly terrified. I had ... a family of 30 next door constantly jumping the fences ... beating up my dog ... coming home ... to find four guys in the driveway, standing around the car and I had a baby under two. Before I could even open my door, they’re at the door going: Can you drive us to get some drugs, have you got a license we can borrow, have you got any money? I’d just sit there shaking in the car. It got to the point where I was barricading myself and my son into my room. (Jo)

Jo's parents paid for her to return to New Zealand a number of times during this period and each time she returned her house had been burgled. After the first break-in
everything except the refrigerator, washing machine, and dryer were stolen. She spent the next six months ringing The Department of Housing weekly, asking to be moved:

In this whole time I’d stopped staying at my house. I was actually just putting my son in the car, transporting him to friends’ houses, staying three nights at [friend], two nights at [another friend]; driving back to the house to get more stuff and then leaving. I was so depleted after being beaten. So, I was going back and forth between other people’s houses. (Jo)

Jo’s suburb was being redeveloped and she became the only occupant in the street, surrounded by derelict houses and vacant blocks. She described feeling like a "sitting duck". After another trip back to New Zealand, she returned to find every item of furniture, whitegoods, food, clothing, and her son’s toys stolen. After this disturbing breach of her safety, Jo called The Department of Housing who advised she still had years to wait until another property would be offered to her. Feeling fearful and desperate, Jo called her ex-partner and asked to stay with him and emphasised that she was not seeking to rekindle the relationship:

We were back there for three months ... and that ... was me ... living in the bedroom, not coming out, because I did not want to ... hang out with him in any way, shape, or form that might lead to him bashing me in front of my son. So we kept very much out of each other’s pockets ... until I got a new pair of glasses ... the first time since I was 17 years old. I finally got glasses and they cost me $450. That ... enraged him, because I was getting better. So ... he could see me rising above my station just by getting glasses. He ... chased me around the house in front of my son, got me down on the ground, and smashed me in the face a few times until my glasses broke. That really, really upset me. (Jo)

Jo fled the house with her son and went to The Department of Housing. She was offered housing in the area she had originally requested. Jo moved into the house that day, even though the toilet and stove were not working and the utilities were not connected. Jo’s new neighbours informed her that the property had been vacant for nine months, which is the same length of time Jo spent experiencing iterative
homelessness, significant disruption, and high levels of fear (also reported by LenMac Consulting Pty Ltd, 2005; NSW Women's Refuge Movement & University of Western Sydney Urban Research Centre, 2009; Wilcox, 2000). As Jo’s story shows, women's housing conditions can be far from ideal, and some women feel compelled to accept poor quality housing, which is geographically and socially isolating (highlighted by Averitt, 2003; Jones, 1999; Malone & Pullen, 2005; Metraux & Culhane, 1999; S. Murray, 2009; Walters & East, 2001).

Jo's experiences demonstrate the relationships between, and the influence of, structural, individual agency, and relational elements. Housing that further compromises safety is an example of how structural factors mediate and inform a homeless experience and in Jo's case, led her to experience iterative homelessness over an extended period of time. When the housing became untenable, Jo felt she had no option but to turn to her ex-partner, and while she enacted a number of strategies to promote her personal safety, he assaulted her. If Jo's housing (structural factor) had been safe and suitable, she would not have needed to ask her ex-partner to accommodate her and be subject to violence, nor would her son have re-witnessed violence (relational factors).

Jo enacted degrees of agency by choosing not to remain in her house and move between friends' houses. Yet this example demonstrates the limits I identified previously in Giddens’ (1984) emphasis on individual reflexivity. In this example it could be argued that Jo engaged with her circumstances reflexively and made distinct choices. The backdrop to these ‘choices’ involved: homelessness; return to an abusive partner; or stay in her house and be unsafe. Assessing Jo’s capacity for reflexivity in this contextualised way unsettles ideas about agency and ‘choice’ by unencumbered actors. The experience of iterative homelessness for the women on the domestic and family violence pathway shared many common characteristics, yet Monica's story shows some significant differences and I now explore this.

Monica is a 67-year old Indigenous grandmother who was the only woman in the domestic and family violence pathway who reported an experience of primary homelessness which occurred many years after she first experienced homelessness. Since ending the abusive relationship Monica reported she had many years of housing,
social, and emotional stability. This changed when family tragedy struck during a physical altercation between two of Monica’s sons. The violent incident resulted in one son sustaining fatal injuries and the other being convicted of murder and incarcerated. As a consequence of this incident and a series of complaints by owner-occupier neighbours about the behaviour of extended kin, Monica, her wheelchair-bound son, and other family members were evicted by The Department of Housing. Monica said she understood why the neighbours complained about the intoxicated and aggressive behaviour of visiting family members. However, she pointed out that as a Nyungar woman she has kinship responsibilities that obliged her to allow family to visit and stay for extended periods of time (also discussed by Birdsall-Jones & Christensen, 2007).

Monica provided a handwritten account of her life story and gave me permission to use sections of it in this project. The following is an excerpt from Monica's story about what she did after being evicted and rejecting The Department of Housing’s suggestion to "move in with family" (who were also occupying public housing tenancies, some of which were at risk due to “overcrowding”):

So I packed some things what I could take with me to the bush, where my son and one granddaughter, myself, my dogs we lived in a tent and one old van I used for my son’s room. He has been in a wheelchair since 1999. I built up a kitchen and a shower. It was a hard six months; the fear of being bitten by snakes, which there are a few different kinds. I tried to make it as homely as I could. The most difficult part was taking [son] to the toilet, because he cannot walk. A friend where we got our water from would come down and sit with him when I went shopping. It was a mile walk to the bus stop, and some taxis would not drive down to the camp. So I had to drag a little trolley I made to pick up the shopping from on top of the hill.

For my shower, I tied one of my water drums in a tree, and put a shower hose from a little camping shower bag, and put pavers for my son's bath chair to stand on, and this was my kitchen. All my cooking and eating gear are kept here. Washing up sink was just off the right of the little shed we ate all our meals in. I also built a little bough shed with mesh shade cloth for [son] to sit
or sleep in from the flies and heat. All these from bits and pieces I pick up. All what I did was for [son]. I never put myself before him. (Monica)

Monica took me to where she had camped on the outskirts of Perth. The site has scrubby thick bush and is surrounded by working, as well as disused market gardens. Monica said the surrounding land owners were aware she was squatting and allowed her to collect water from their properties. As Monica had no electricity and it was summer, she needed to buy food and other supplies regularly. On one occasion when she left her son alone, a large snake approached him and he managed to frighten it away. The bushy site would have been a haven for venomous snakes commonly found in such terrain.

Monica happened to meet a worker from an Aboriginal Deaths in Custody group who linked her in with housing support services and after spending a few unsafe and unsatisfactory months in an urban Indigenous camp she was assisted by a non-Indigenous tenancy support program to secure a privately rented property. Monica’s physical and emotional wellbeing were profoundly affected by the death of one son, the incarceration of another son, eviction, and rough living. During this period she underwent cardiovascular surgery and was hospitalised for three months.

Monica’s experiences demonstrate the intersection of culture with relational factors (kinship responsibilities and family conflict), and structural elements (eviction, inability to secure housing, and primary homelessness). Monica’s reflexive assessment of her situation and subsequent decision to camp out are mediated by structural, relational, and cultural contexts.

Monica and I continued to have monthly contact which involved me visiting on weekends and us going for a drive. Monica said she enjoyed our time together as it gave her a chance to get out and "away from the family". Approximately nine months after our first contact Monica informed me that her son with whom she had camped, had died suddenly. She was bereft and asked to suspend our contact. Before this, Monica had urged me to tell her story so that others would not have similar experiences. It is the story of a 67-year old grandmother who was forced to camp out and live rough with her wheelchair-bound son in Western Australia, in the year 2007. Monica’s experiences reinforce my commitment to transformative and reflexive practice. Each time I engage
with Monica’s story I am emotionally affected and I thank her for inviting me into her world and gifting me with her wisdom. I now consider the women’s experiences of social connections and relationships while living homeless.

**SOCIAL CONNECTIONS AND RELATIONSHIPS**

For 11 women in this pathway, living homeless was characterised by a primary relational focus on their children’s wellbeing. Sandy’s narrative invites consideration of the range of impacts on children who were exposed to abuse and who witnessed violence against their mothers. The women reported that these impacts were long lasting, particularly if children continued to have contact with the perpetrator, post-separation.

A huge part of their childhood has been taken ... it has affected their self-esteem, confidence ... who they can trust. I encourage them to have a relationship with him. Do I personally believe they’re better off if they didn’t? Yes, I do. I think they’d be better off not to have any relationship whatsoever with him, ever again. I’d never, ever, tell them that, or admit that to them. I respect their right to know him and as they get older, they’re going to have to make their own decisions about what’s right and what’s not right. (Sandy)

The women expressed deep-seated concerns for their children’s emotional wellbeing and potential orientation to future violence in our interviews. In response, I offered to share research evidence on the intergenerational transmission of violence and each woman welcomed this. My discussions referred to findings discussed earlier on the intergenerational transmission of violence (Bandura, 1986), and I pointed to contemporary evidence which debunks arguments that children exposed to violence are destined to either perpetrate or be subject to domestic and family violence (Richards, 2011). I also used these discussions to affirm the women for role modelling to their children that violence and abuse are unacceptable.

The impacts on their children were seen by the women as far reaching, with frequent reference to behavioural and psychological issues (Commonwealth of Australia, 2009b; Richards, 2011). Other women spoke of interrupted attachment patterns (see
Perry, 2001) which were difficult to manage. Lenore spoke about this in a way that resonated with other women’s comments:

You’re … reliving that cycle of abuse because ... the children become abusive. I know my own children manipulate me all the time. I’m always trying to work on that but sometimes you are just exhausted and you just can’t. And it’s hard because it’s day after day, after day, after day and it does wear you down. And when you don’t get a break and you don’t get any support ... that’s ... where it falls apart. (Lenore)

One woman reported that her teenage sons had assaulted her on a number of occasions and she attributed this to them witnessing their father’s extreme violence since they were babies. She had organised psycho-educational support for her sons and this had been helpful as the boys had come to understand and reject the use of violence. The woman was pleased to report at a later contact that her sons’ violence had ceased and more loving relationships were developing. A number of other women also spoke about the positive impact of domestic and family violence counselling and therapy on their children.

The women who stayed in women’s refuges noted the specific impacts on their children which included the problematic (yet reported as understandable by the women), behaviour of other children, which was compounded by children pining for familiar items, places, routines, and people (also reported by Averitt, 2003). Joanne found this a struggle each time she accessed a refuge:

It was hard for ‘em. There was a lot of aggressive kids there, and my kids are really gentle. (Joanne)

In the midst of escaping domestic and family violence and living homeless, women spoke of the desire to be the best possible parent they could, despite the ongoing abusive tactics employed by their ex-partners (also found by Wesely & Wright, 2009). Bronte provides an example of these tactics:

I had access visits going on ... with my 4-year old at the time and the first visit she came back and said: Daddy said [Bronte’s son] was a cunt. Now, I’d
done a lot of parenting classes ... and ... instead of like going on the same thing that he does, like putting the stuff on them I just said: *Well next time that ... daddy says something bad about your brother say that's your brother and you love him, and it upsets you when he says that stuff.* She'd come back saying things like: *Daddy said you took all his money.* (Bronte)

Despite ending the relationship, violence and abuse continued, often through contact with children, and I now consider this.

**VIOLENCE AND SAFETY**

Ending the abusive relationship did not signal the end of violence and abuse for the majority of women in this pathway. One quarter of women who leave an abusive partner experience post-separation abuse (Australian Bureau of Statistics, 2006), and two thirds of the women in this pathway reported this. Not only did perpetrators stalk the women, contact with children was used as a medium to enact further violence (also found by Bagshaw et al., 2000; Benevolent Society, 2009; Women's Health Goulburn North East, 2005). The post-separation abuse for the women in this study took many forms over periods between six months and 12 years.

It was noted by women and other stakeholders that the type and nature of the abuse changed over time, which undermined the women’s ability to assess the risk to themselves and their children. These changes included peaks and troughs of charming behaviour aimed at reconciliation, stalking, physical assaults, and damage to property. The following statement encapsulates the women’s comments that despite having left they felt more frightened than when they were in the relationship because they were unable to monitor their ex-partner’s behaviour:

*The woman would be concerned about ... not being able to monitor what he was doing. When ... he was there that was more easily monitored.* (SPDFV6)

The types of post-separation abuse women reported included abduction of children; contravention of Residency and Contact Orders; physical assaults; rape; ongoing intimidation and harassment in person, by telephone, email, and through short
message service (SMS or texting); withholding information; presenting the family home in the worst possible state when the sale was central to a property settlement; and fabricating information about the women to service providers, family, and friends. Involvement in Family Court proceedings provided further opportunities for perpetrators to enact abuse against women (also discussed by Laing, 2010). Sandy spoke of day-to-day activities being constrained and how the remnants of being constantly discredited by her ex-partner manifested in her assessments of safety:

It doesn’t sound like much, but to ... be sitting down watching telly at ... 9.30 at night and then have someone banging on your door ... and they won’t go away .... and they keep banging louder and louder. You open the door ... and it’s a complete stranger ... that knows your name and knows your children’s name and knows everything about you. I’m then too scared to walk outside the door once it was dark. I just couldn’t go outside, not to put rubbish in my bin, not to go outside to water plants ... nothing. I didn’t want to make a mountain out of a molehill, but at the same time I was very frightened. (Sandy)

Two women noted that their experiences of post-separation abuse had distinct cultural and religious reference points. They spoke of the social, cultural, and religious pressure directed at them to return to the abusive relationship (see also Benevolent Society, 2009). Leaving and then becoming homeless was seen by members of the women’s cultural and religious communities as shameful and women were held solely responsible for the breakdown of the marriage (Commonwealth of Australia, 2009b; Sikich, 2008). These women spoke of violence against women being normalised within their cultural milieu and this hindered their ability to challenge culturally informed discourses about women, and their rights and roles in relationships (also reported by Pittaway & Rees, 2005-2006; Sikich, 2008). The women’s experiences with substance misuse are now explored.
**Substance Use**

Substance misuse is directly linked to women's homelessness and family homelessness, because of the role that alcohol plays in male violence against women. There is also evidence from women experiencing domestic violence that substance misuse may be used as a coping mechanism. (Please, 2008, p. 12)

Four women who experienced domestic and family violence reported that problematic substance use patterns emerged while living homeless. As with the other pathways, women argued that substance use simultaneously anaesthetised them to their situations and complicated their circumstances (see also Humphreys et al., 2005; Reeve et al., 2006). The types of substances women used included alcohol, cannabis, methylenedioxymethamphetamine (MDMA or ecstasy), amphetamines, and heroin.

Lucia identified as a recreational user of alcohol, cannabis and MDMA while in a long-term domestic and family violence relationship, yet when she moved to a women's refuge she found that she could not drink alcohol and started using heroin after being introduced to it by another resident. Lucia was contending not only with ending a domestic and family violence relationship, but also her daughter's disclosure that Lucia’s ex-partner had sexually abused her:

Started using heroin (crying), ‘cause you weren’t allowed to drink. Oh, it was great. I’d never used it before. As far as stats go, most unusual person, but I never became a heroin addict, you need to know that. But … you use twice a week for three months, and you’ll start getting a habit. I could function. You don’t get hangovers, you can discuss things quite reasonably with anybody; you can deal with any situation as it arises … that’s how I’ve always used drugs. But alcohol, now that’s another story. I got into that world, and of course, you know, there’s always that part of me that’s the researcher, the counsellor, and the storyteller. You know, that’s a huge part of my personality and I thought: *Well I’ve never travelled in this world.* I had some very interesting adventures. So I was using heroin the whole time I was in the refuge. (Lucia)
Lucia reported that refuge staff was unaware of her substance use and after leaving the refuge she ceased using heroin. As she says, her pattern is unusual as the common trajectory for heroin use is commencement in early teen years and habitual use emerging in early adulthood (National Centre for Education and Training on Addiction, 2004). Lucia’s story is instructive in tracing the functionality of substance use in a woman’s life and her discussions reflect the connections between structural, relational, and individual elements which are illustrated in Figure 17.

**FIGURE 17 – APPLICATION OF ANALYTIC FRAMEWORK**

If one part of Lucia’s experience of living homeless such as her heroin use, was considered out of context and without due consideration of relational and structural factors, a partial and limited understanding of Lucia’s situation emerges. This reinforces for me the importance of mapping context in the lives of women who live homelessness. I now consider the women’s mental health and mental illness experiences.

**MENTAL HEALTH IMPACTS AND MENTAL ILLNESS**

Finding oneself homeless after enduring years of domestic and family violence induced a range of emotional and psychological responses. These women worked liminal spaces and subjectivities as they started to emotionally recover, explore their feelings towards
their ex-partners, and begin the process of re-establishing the practical and material components of their lives.

Mental health impacts from domestic and family violence have been linked with the development of psychosis, depression, complex post-traumatic stress disorder, compromised psychological functioning, poor self-esteem, and impaired cognitive functioning (also reported by Benevolent Society, 2009). Two women were diagnosed with mental illnesses prior to experiencing homelessness and noted that domestic and family violence exacerbated symptoms and diminished their capacity to self-manage the illness. The other 10 women reported compromised mental health as they struggled to cope with being homeless and parenting children who were affected by abusive environments (Commonwealth of Australia, 2009b). None of the women on this pathway were diagnosed with a mental illness after entering homelessness. One woman spoke of experiencing suicidal ideation whilst experiencing homelessness. These discussions point to experiences with service delivery which I now explore in detail.

**Service Delivery**

The initial experience of a women’s refuge for nine women was unfamiliar and alienating (see also Averitt, 2003). The women reported that it was challenging to contend with different approaches to parenting and the behaviour of women with mental illness and substance misuse issues (Bagshaw et al., 2000). This initial unsettling experience transformed to become positive as the women adapted to the environment, other clients, and service delivery expectations. Some of the women who found themselves in multiple domestic and family violence relationships were unwilling to re-access a refuge because of their previous experiences of living with other families, service guidelines, and the disruption to their children’s routines (Tually et al., 2008).

Sarah’s experience of service delivery is reflective of parts of other women’s narratives. As Sarah chose not to have our interview recorded, few verbatim quotes are available to share. Sarah’s first service delivery encounter was when the police referred her to a woman’s refuge after she ended a 16 year domestic and family violence relationship. This was the first time Sarah had left her husband.

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Sarah was welcomed by refuge staff, but became "scared" when refuge workers advised her the day after arriving that they had organised a police escort to collect her belongings from her home. Sarah said this was prescribed as urgent and essential. Her opinion and feelings about returning to her home and potentially seeing her ex-partner were not invited as part of this exchange. Having been a refuge worker, I identify with the worker’s actions; as practice wisdom indicates that quick retrieval of a woman’s belongings minimises the chance of an ex-partner destroying her possessions in retribution for leaving.

Sarah learnt during the early years of her marriage that if she asserted her rights or needs her husband would respond with violence and aggression. In order to maximise her safety, Sarah stopped asserting herself. The refuge’s approach of informing Sarah that she would be returning home to collect her possessions mirrored this dynamic in the domestic and family violence relationship. Given Sarah’s compromised assertiveness, she did not feel safe or that she had a right to express her reticence, commenting: "Saying yes is easier" (as she had done in the relationship).

Sarah’s experiences alerted me to how the routine tasks, practices, and day-to-day business of a refuge are alien concepts to women who have never been to a refuge. Yet, as a refuge worker I can trace occasions when I was not sensitive to the impact of refuge business on women. In hindsight, I can see that if an open, inquisitive, and conversational space is created with women like Sarah there is more likelihood they could speak about their concerns. This approach can also explain and explore why refuges prioritise a woman’s return to collect her belongings.

Sarah found the experience of returning to her home distressing and shameful. She said she was extremely disturbed about being a “mess” in front of two younger male police officers who appeared indifferent. Sarah’s account of her anguish is suggestive of the mediating impact of discursively created ideas about how a 40 year old woman 'should' perform womanhood, especially in front of younger male authority figures. These gendered discourses run deep and reinforce taken-for-granted assumptions about behaviours and roles and reinforced the messages Sarah’s ex-partner had constantly delivered about Sarah being unlovable, a "failure", and "stupid".

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After returning to the refuge Sarah immediately left, wanting to flee any reminder of the visit to her home. Refuge workers enquired where Sarah was going. She replied: “I have no idea” and quickly left. Sarah’s description reminds me of encounters I have had with frightened and unsettled women who needed to flee the refuge. I can visualise my experiences of similar situations where I was the only worker on duty and while I was acutely aware of women like Sarah and their distress I was often unable to stop them leaving because I was attending to a multitude of other issues in the refuge (such as the arrival of a new consumer or conflict between other women).

After leaving the refuge, Sarah walked around the city for many hours in a bewildered and distressed state, eventually going to a hotel. Sarah was sexually assaulted by a stranger at the hotel, and hotel staff contacted the police. The police organised for Sarah to have a medical examination and she was referred to a different women’s refuge. Sarah had been at this refuge for four weeks when we met and said she was emotionally fragile and vulnerable. She appeared to be in shock and traumatised. Sarah discussed needing to heal from the experience at the first refuge, the sexual assault, and 16 years of domestic and family violence.

This discussion is not intended as an evaluation of the refuge’s practices, which is why I have added my reflections and experiences of being a refuge worker and encountering similar situations. My intention in exploring Sarah’s experience is to emphasise how a task-focused orientation to practice can be mismatched to the emotional readiness of a woman to face her ex-partner and her previous living arrangements. Contextualised, collaborative, and ongoing assessments underpin good practice (Berman & Wilson, 2009), and Sarah’s story is a reminder about the impacts and unintended consequences of seemingly everyday practice tasks.

In assessing Sarah’s experiences using the structural, individual agency, and relational factors framework, it is clear that service delivery was an extra mediating influence. Sarah was without a safe place to stay (structural) as a result of relational factors (domestic and family violence). However, the events that occurred when she started living homeless highlight the dominating influence of individual factors such as impaired self-esteem, trauma in the form of sexual assault, an eroded capacity to
assertively communicate, the long-term psychological impacts of domestic and family violence, a reduced capacity to assess personal safety, and diminished cognitive functioning. The road out of homelessness emphasises the individual realm with a significant healing journey ahead of Sarah.

Sitting alongside Sarah’s experiences, women also spoke about many positive and affirming experiences within women’s refuges such as being validated for the first time and told that the ‘problem’ was their ex-partner’s choice to enact violence. This led women to describe the overall experience in a refuge as liberating, which Liz highlights:

At home it was very: Shush ... be quiet, daddy's having a sleep ... daddy's got a headache. That was very stressful trying to keep the children ... at this level. But since we've left, we're just free to go and do what we want. They're a lot happier, because ... it's like they've got a bit of freedom in their life. At home they weren’t allowed out the front to play on their bikes ... and now ... there’s just a bit more freedom. (Liz)

Women spoke of respectful, relational, and appropriately directive service delivery practices. Authentic, knowledgeable, and down to earth workers who admitted their mistakes and listened attentively were identified as embodying good practice. The women gave examples of workers who challenged their ideas or behaviours in clear and respectful ways, arguing this was helpful practice. Elsie spoke candidly in our interview about her misinformed and stereotypical ideas regarding the “type of woman” who accesses women’s refuges. Elsie enacted dividing practices, constructing herself as different to women who went to refuges. These beliefs and practices were put to the test when Elsie went to a refuge. Despite these challenges, Elsie directly links her healing from domestic and family violence to the approach of the refuge staff:

They ... knew that I was extremely capable even before I recognised it. They knew that I would get through it ... that’s what helped me. (Elsie)

Women also spoke about the need for engagement to be sensitive, yet assertive as they felt overwhelmed by their circumstances and found it hard to trust:
The thing you can't undervalue is the support that you need, and one of the hardest things is to ask for it ... so it's really important for service providers ... to provide it ... without being asked. Understand that position of feeling completely and utterly hopeless, not knowing who you are, where you’re going ... or how you’re going to get there. You need to be supported ... because if you don't then you're gonna fall apart. (Lenore)

Another component of quality service delivery involved workers believing in a woman's capacity to make the best possible choices relevant to her context and life history. Conveying this faith and belief to the woman was characterised as central to the professional relationship and was discussed by stakeholders in relation to women who move in and out of abusive relationships:

What women deserve ...is that if they return to that relationship ... 65 times they deserve the same response from the first time they left, because that’s your job ... and still ... she’ll go home because ... there’s so much we'll never know about her situation. (SPDFV6)

In addition to the experience of refuges, women encountered a variety of other service providers. Four of the women spoke of contact with police that was disinterested, racist, and judgemental. Women reported being invalidated and Joanne's experience exemplifies this as she discovered the credence given to her reports of violence diminished the longer the abuse went on (also noted by Berman & Wilson, 2009):

The police would ... treat me like I’m a bit of a joke. (Joanne)

The end result of this was Joanne’s unwillingness to re-apply for a Violence Restraining Order which was due to expire shortly after our interview. Joanne said she could not face being invalidated and discredited again. Joanne's responses sit in the context of her living with schizophrenia, being treated with high doses of Neuroleptics (with associated side-effects including impaired cognitive functioning), a history of substance misuse, and a diminished sense of self as a result of many years of abuse.
Bronte spoke of the debilitating impact of being discredited by a magistrate when she sought a Violence Restraining Order. This left Bronte and her children extremely unsafe as the magistrate rejected the application, arguing that Bronte did not provide sufficient evidence of being at risk from her ex-partner:

It got dropped and I was totally humiliated. He (partner) walked out and laughed at me. And I stood in that court and told them that he’s beat the crap out of my son, but they said: *What has he done to you, something relevant? Something recent that’s happened?* So, it’s like: *I’m sorry I don’t have ... a knife sticking out of my neck ... so that’s recent enough for you.* (Bronte)

Sadly, Bronte’s experience was articulated by many women, particularly in relation to ‘credible’ evidence demanded by police and courts. This then led the women to construct themselves, their situations and their reactions as the problem, rather than the violence to which they were subjected. These service delivery practices increased risk to the women and their children.

Women traced how the information they received from service providers mediated their constructions of themselves and their situations. Sandy had the experience of speaking with an officer from the Family Court about her situation and was validated and told she was experiencing domestic and family violence. This assisted Sandy to overhaul her cognitive schema about her experiences and move away from assuming responsibility for her ex-partner’s abusive behaviours. Conversely, Lenore was told by a Senior Social Worker at the Department for Child Protection that she was not experiencing domestic and family violence, yet later in the same day, a Social Worker from Centrelink showed her the Power and Control Wheel (*Domestic Abuse Intervention Programs, 2011*) and affirmed her experience as domestic and family violence:

When they got me to go to DCP on the Monday morning; I was told that I wasn’t a victim of domestic violence ... and ... therefore I wouldn’t be able to go to the refuge ... and that’s how I then continued to present myself until later that day when I sat down and spoke with the ... counsellor at Centrelink. You know, she put the cycle of abuse in front of me and I just fell apart. And it was just so obvious then. (Lenore)
These acts of (in)validation through the representation of professional knowledge as 'truth' expose the specific power relations which define and legitimate experiences of violence (Danaher et al., 2000). These examples reinforce the importance of keeping a critical eye on, and ear out for, dominant discourses that present 'natural' and 'obvious facts' that discredit women's experiences and situated knowledge (Baxter, 2003; Lazar, 2005; Ralston, 1996). I now consider the experience of the women in the substance misuse pathway.

**Substance misuse pathway**

Being on drugs and all of that ... I've missed my 20s. I still don't feel like a 33 year old. (Shiloh)

Shiloh and Debra's experiences of living homeless are characterised by iterative homelessness, diminishing support networks, a primary focus on sourcing and using illicit substances, increasing association with other substance using associates, and unwanted sexual advances from men who offered temporary accommodation (also reported by G. Johnson et al., 2008; Reeve et al., 2006; Robinson, 2010; Tomas & Dittmar, 1995). Both women referred to this time as lost years, as indicated in Shiloh's opening quote. I start by exploring how the women navigated homelessness.

**Navigating Homelessness**

Shiloh and Debra experienced homelessness for three and five years respectively. Iterative homelessness was constant for both women and involved moving between the homes of family and drug using associates, primary homelessness, specialist homelessness services, and drug rehabilitation centres (also reported by G. Johnson et al., 2008; Robinson, 2010). Prior to entering homelessness, the women's lives were characterised by constant moving between different forms of accommodation, but a turning point occurred when family refused to accommodate the women. This points to the interconnections between the lived experience of homelessness and relationships for this group and I now consider this.
SOCIAL CONNECTIONS AND RELATIONSHIPS

Both women reported that accommodation options atrophied the longer they used substances as the tolerance of friends and family dwindled (similar findings reported by D. Anderson & Rayens, 2004). This meant significant changes in the composition of their social and support networks. Debra and her two older children experienced iterative homelessness over a period of three years until her ex-partner removed the children from her care. Debra reported still feeling angry about this, saying her ex-partner and children were “disloyal” to her. Shortly after losing the care of her children, Debra became pregnant and her narrative draws out her discursive constructions of women and mothers who misuse substances:

I was homeless and I was about to give birth to a baby and I’d always judged people using drugs … while they were pregnant. To administer yourself drugs while you’re pregnant … I reckon that’d be one of the worst things you could do apart from abuse a baby or … murder someone but … you are more or less taking the risk of doing that anyway. I think that people who take drugs when they’re pregnant are pretty scummy people. I am something I don’t like. (Debra)

Pregnant, homeless, and finding her substance use unmanageable, Debra entered drug rehabilitation. However, this was interrupted:

I was actually offered it [amphetamines] … while I was in rehab by another patient. I … was really disappointed in that … because when you’re in … residential rehab, you don’t expect someone to be offering it to you. (Debra)

As a result of no longer having family and non-drug using friends to rely on for a few nights’ accommodation, the women turned to associates known through substance using social networks for somewhere to stay. This amplified risk to the women and I now explore this.
VIOLENCE AND SAFETY

Both women reported that when their families and non-drug using friends refused to accommodate them, they found accommodation through their substance using social network. For Debra, this accommodation was short-lived as she soon discovered that the offer of the room was accompanied by an expectation that she would also “pay” by providing sex to her male housemate. Shiloh also found that accommodation with male friends or associates was usually accompanied by unwanted sexual advances:

I got kicked out of home again and so I stayed at my friend’s house for three weeks, but he wanted more than just friendship and I didn’t, so that fizzled out. (Shiloh)

Shiloh reported being raped by a male substance using associate and her story depicts the vulnerability women face when they move in with friends or acquaintances, and an unstated expectation of sex in return for accommodation exists (also found by Reeve et al., 2007). Despite these experiences, both women reported being unaware of the risks to their safety, for as Shiloh says she "was pretty high most of the time" and personal safety was subjugated to the need to obtain and use amphetamines (Robinson, 2010). Shiloh reported that she enacted verbal abuse and aggression towards her parents on many occasions when intoxicated. I now consider the nature of the women’s substance use patterns while living homeless.

SUBSTANCE USE

Substance misuse was the driving factor in living homeless for both women. Shiloh recounts a significant experience that occurred in relation to her substance use:

I stopped taking drugs without intending to - without any effort and without any withdrawal symptoms as soon as I went to church for the first time with my parents. I was high. It was really quite amazing. I just stopped. It ... will continue to be a complete non-event in my life. Like you could wave a syringe in front of me, and I wouldn’t touch it. ‘cause now I make that analogy of ... shooting Satan straight into my bloodstream. I don’t take any credit for
getting off drugs, because it was so not me. It was something from above. (Shiloh)

Since this event which was six months prior to our interview, Shiloh had not used amphetamines. However she reported that since ceasing amphetamine use, problematic alcohol use had surfaced:

My only problem now is alcohol. I don’t crave it. I don’t like the taste of alcohol ... I’ll skull it and wash my mouth out. When I’ve been in that state ... I never remember but I’m very nasty towards my mum. This last binge which got me kicked out of home ... I was happy as Larry, was just on my way home and ... found myself driving to the bottle shop. (Shiloh)

Neither woman reported suicidal ideation or mental health or illness issues. Their experiences of service delivery were narrated in relation to being evicted from drug rehabilitation centres when found to be using substances. The women’s over-riding focus on obtaining and using substances (individual factor) re-oriented their gaze away from securing housing (structural), and as the support of family and friends (relational) was withdrawn, the women became entrenched in substance using sub-cultural groups and iterative homelessness. As the women's lives spiralled away from normative activities and expectations, their support networks stepped back, further reducing the women's accommodation and support options.

The experience of being homeless was narrated in a matter-of-fact manner by both Shiloh and Debra, with no references to their emotional responses or feelings while homeless. When I asked about their feelings, both women objectified and externalised the events while reiterating their personal responsibility for living homeless. I now consider the living homeless experiences of the 17 women who transitioned from youth to adult homelessness.

Youth to adult pathway

Other studies report that youth to adult homeless transitions are characterised by association with other people experiencing homelessness, accepting homelessness as a
way of life, mental illness, domestic and family violence, substance misuse, and unattended trauma (Collins, 2010; G. Johnson & Chamberlain, 2008a; G. Johnson et al., 2008; MacKenzie & Chamberlain, 2003). Of the 17 women who transitioned to adult homelessness, 14 reported experiences that tally with these research findings. Eleven women came in on the escape pathway, one ‘chose’ homelessness and the remaining five were evicted.

Two types of youth to adult homeless experiences are evident in the group of 17 women. Three women who entered on the youth escape pathway had many years securely housed before re-experiencing homelessness as a result of domestic and family violence. Two of these women escaped physical abuse and the other fled emotional abuse. These women did not experience mental illness or substance misuse and none engaged with homeless sub-cultures during either homeless event. Their mental health and wellbeing were compromised by their youth and adult experiences of abuse, but they did not develop serious mental illnesses. These women's experiences are starkly different to the 14 who demonstrated a relatively seamless transition to adult homelessness. The discussions that follow in this chapter examine the experiences of these 14 women, with the three women who transitioned in different circumstances discussed in Chapter Nine.

Factors common to the lived experiences of these 14 women include navigating primary and iterative homelessness, social connections and relationships with other people experiencing homelessness, substance misuse, diagnosed mental illness, and violence (also reported by Averitt, 2003; May et al., 2007; Radley et al., 2006; Reeve et al., 2006; Robinson & Searby, 2005; Tomas & Dittmar, 1995; Wesely & Wright, 2009). These factors intermingled to sustain the homeless experience. The women’s navigation and living of homelessness was driven by a combination of structural, individual agency, and relational factors and this is mapped in Figure 18:
I now explore these factors in detail, starting with consideration of how these 14 women navigated homelessness.

**Navigating Homelessness**

Even though things have been really fucked up for me, I always tried to get through. (PJ)

PJ’s statement demonstrates the unrelenting nature of iterative homelessness which carried through to adulthood. Iterative homelessness for this group of women involved moving between the specialist homelessness service system, primary homelessness, drug rehabilitation, psychiatric hospitals, and family accommodation. The median adult iterative homeless timeframe was 9.3 years, ranging from one to 26 years. Figure 19 shows the average iterative homeless periods across the three youth to adult pathways.
Nine women reported limited lifetime experiences of stable housing from childhood, arguing that homelessness had become a way of life by the time they reached adulthood. For these nine women, the following captures their relationships with housing and home:

'Home' for homeless women has hardly ever been a positively 'embracing' and 'situated' place of safety and security to which they could come and go. Home was abuse and relocation. (Tomas & Dittmar, 1995, pp. 509-510)

Reasons for re-experiencing homelessness included having few or none of the skills needed to live independently, insufficient income to meet housing costs, non-existent knowledge about tenancy obligations as a result of having no exposure to role models, and problematic behaviour from visitors (see also Franklin, 1999; B. Healy et al., 2004; McNaughton, 2005). Other studies have shown that young women who escape abuse into homelessness have poor housing outcomes (Enders-Dragasser, 2010; Reeve et al., 2007; Reid et al., 2005). The women reported that eviction was a common experience and Belinda's story exemplifies this:

I only had one house when I was pregnant with my oldest daughter. That was only once. I got kicked out of my house and all that ... after one month. The
person who lived next door smashed my house up ... and my cousins just come around with stolen cars. (Belinda)

Six women who escaped, one who was evicted, and Tracy who ‘chose’ homelessness experienced primary homelessness as adults for an average of 4.75 years. These experiences were mediated by social connections and relationships, which I now consider.

**Social Connections and Relationships**

The male romance of the open road contrasts sharply with female terror at the dangers inherent in the journey. (Wardhaugh, 1999, p. 94)

The relatively seamless youth to adult transition was characterised by associating with other people experiencing homelessness, engagement in homeless sub-cultural practices, and for the majority, an identity of 'homeless'. The composition of the women's homeless social networks changed from young people to adults as the women aged. For 10 women, involvement in homeless sub-cultures was an enduring occurrence, ranging from five to 32 years, and nine women were connected and active in homeless sub-cultures at the time of interview.

Three women from the escape pathway and one who was evicted formed intimate relationships with men they met through homeless sub-cultural groups and all of these relationships involved domestic and family violence and substance misuse (also reported by Robinson, 2010). In her narrative, Willow traces primary homelessness, a domestic and family violence relationship, service delivery practices and her use of violence in this period:

I met ... my oldest son’s father ... through ... the streets and we got together. He decided to get handy with his hands, so I took off and that’s when I first ended up in [name of Women’s Refuge]. I found it hard there ... because I was with other women ... and people telling me what to do with my child and all that. I had a lot of trouble there, ‘cause I couldn’t handle the people around me - being wild and woolly like I was. I just didn’t like people ... interfering in
my life, telling me: You shouldn’t be doing this, shouldn’t be doing that. So I rebelled and I used to take a lot of anger out by physical force. I ended up squattin’. (Willow)

Willow’s descriptions trace the centrality of relational factors through her associations with other people experiencing homelessness and the domestic and family violence relationship with a man from this network. Willow said that in response to being problematised for her reactions to sexual abuse perpetrated by her stepfather, she had been self-reliant from an early age. This individual dispositional characteristic has assisted Willow to survive much adversity, yet as this example shows it has created another set of conditions which shaped her experiences of homelessness.

Four women who came in on the escape pathway and one who was evicted lost the care of their children while experiencing iterative homelessness as adults. For three women, this involved children removed as a result of statutory intervention and for the other two, ex-partners took over the care of the children, despite having little involvement with the children previously. The women reported that removal of their children contributed to mental illness, substance misuse, acute and long-term grief responses, extreme despair, and hopelessness (see also Cooper, 2004; Enders-Dragasser, 2010; Reeve et al., 2006). Service provider stakeholders argued that in their experience, the removal of children was a reliable predictor of long-term iterative homelessness and high levels of emotional disturbance (also discussed by Carolan et al., 2010).

Amy’s experiences show how relational events can entrench iterative homelessness in a woman’s life. These events included Amy’s daughter being removed at birth by the Department for Child Protection and receiving a court order to undergo tubal ligation within days of the birth of her daughter. Amy also discovered shortly after these events that her partner (and father of her child) was having a sexual relationship with her biological mother, whom she herself had just met:

I just couldn’t handle seeing my mother and ... my ex fiancé ... I didn’t care ... I went on the streets for about two years and that’s when I met a guy who was alcoholic and ... we helped each other with money and all of that. We got off
the streets and started living somewhere, still drinking and all that, and we moved to another place and that’s when the domestic violence started. (Amy)

As indicated in these discussions, violence and risk were features of navigating homelessness, social connections and relationships, and this is now considered.

**Violence and Safety**

Five women who escaped abuse, one who was evicted, and Tracy who ‘chose’ homelessness, experienced domestic and family violence and other forms of violence as adult women. Four of these women had multiple abusive relationships, with Willow reporting that every significant intimate relationship had featured domestic and family violence. Four of the women with experiences of violence as adults were living with diagnosed mental illness and problematic substance use, and had ongoing associations with other people experiencing homelessness. Amy came in on the eviction pathway and was discussed above. Through her longstanding and ongoing associations with other people experiencing homelessness she was continuously subject to sexual and physical violence (also reported by Reeve et al., 2006; Robinson, 2010) and this further compromised her mental state and led to an increase in her substance use.

As with the women in the adult domestic and family violence pathway, post-separation abuse was common for these women. For the women who initially entered homelessness on the escape pathway, ideas about co-existent love and abuse manifested in feeling rejected and unlovable from childhood as they had received mixed messages about love, sex, and violence (Fraser, 2008). It meant that these women did not have a foundation from which to assess their personal safety and were perplexed by their ongoing experiences of abuse. Kayla spoke about her experience of being in an emotionally abusive relationship:

I’d never come across anyone who was passive aggressive. I didn’t understand. I’ve only ever dealt with violence ... all this trauma was coming back into play and I really couldn’t cope. (Kayla)
For Maria and Fatima who both escaped, the violence had direct links to cultural and religious standpoints. Moving away from violence meant isolation and alienation as contact with family or members of their cultural and religious communities seriously compromised their safety (Bagshaw et al., 2000). Fatima found that after leaving her second abusive relationship, she was repeatedly located by her ex-husband, and his friends and associates. Consequently, she made the choice to move interstate and have no contact with her cultural and religious communities (also found by Chantler, 2006). Fatima and Maria articulated the variety of ways in which this cultural and religious marginalisation contributed to their compromised social and emotional wellbeing.

The six women with children in their care reported that their children had been deeply affected by witnessing violence and iterative homelessness. The fear of children experiencing similar childhood events became a reality for Kayla who was extensively sexually abused as a child (Wesely & Wright, 2009). In contrast to her own mother’s denial, Kayla was proud of herself for believing her daughter and instigating legal action against her ex-partner, which led to his incarceration. In summary, experiences of personal safety across the lifetime were rare for the women who escaped (Dizdarevic, 2010; Wesely & Wright, 2009), and during adulthood for Amy and Tracy (Robinson & Searby, 2005).

These discussions demonstrate how relational experiences of an abusive nature can shape women's individual experiences of love, sex, belonging, attachment, and esteem. These early life experiences informed their adult relationships and played a part in the women’s use of substances, which is discussed next.

**Substance Use**

Nine women reported problematic substance use patterns throughout their adult experiences of homelessness. This comprised five women who escaped and reported that substance misuse was a coping mechanism and an antidote to unresolved trauma, with three specifically referring to childhood sexual abuse (Herman, 1992). These five women had enduring associations with other people experiencing homelessness. Three women reported current and frequent use of amphetamines, heroin, and alcohol; one
had stopped habitual use of amphetamines 12 months before the interview and reported the occasional "dabble"; and the other woman had stopped using illicit prescription medications two years prior. This invites consideration of the functionality of substance use which provides a "distraction from unresolved problems, including trauma" (Robinson, 2011, p. 71).

The three women who were evicted linked their substance misuse to their associations with other people experiencing homelessness and unresolved trauma. Two of these women were addressing their substance misuse issues and another reported ongoing problematic alcohol use. Tracy’s journey with substance use has been long-term and central to her experiences of homelessness, and I now explore this.

After two years living on the streets by ‘choice’ and then escaping a domestic and family violence relationship, Tracy experienced housing instability, transience, homelessness, substance misuse, and worsening mental illness over a 13 year period. Tracy gave birth to two children in this period and re-experienced domestic and family violence. She moved between alcohol and drug rehabilitation facilities, temporary share housing, her mother’s house, short term private rentals ending in eviction due to non-payment of rent, and homelessness accommodation services. Throughout this time Tracy’s substance misuse has played a major role in her ongoing homelessness:

The drugs were so huge in my life and ... every day ... my mission is to get on. You know ... my kids were always taken care of ... everything looked normal on the outside, but ... on the inside I’m chasing gear every day. (Tracy)

In an attempt to address her situation, Tracy returned to live with her mother interstate and had a short period of stability. She then came back to Western Australia to care for a friend with a terminal illness and secured a private rental property. However, after experiencing a drug debt related home invasion and a miscarriage, her substance use spiralled out of control:

After that I got Tenancy Tribunal notification. I was behind on my rent because of my agoraphobia. They wouldn’t give me Centrepay [or] ... B-pay option to pay ... rent over the phone. I asked them to come out and pick up the rent on
several occasions. They did on some, but didn’t on others. And of course I’m still smoking pot and ... if I’m down and I’ve got cash I’m getting a stick ... so a lot of the time ... money whittled down and ... I was quite behind. The owner was over it - fair enough really. So, I went to Tenancy Tribunal, the judge said: I will give you an extension of three weeks, you pay the money, every cent and I’ll let you stay.

I had my $500 loan coming up. I paid the $850 on the very day we had Tenancy Tribunal again. I knew my rent was up to date. I went in very confident. The Realo [Real Estate Agent] brought out a water bill I had no idea about - $68.50. Now because I still owed money, the judge said ... he would have to evict me, he was really sorry. So I was then evicted from my home with two children over a $68.50 water bill. They didn’t care about second chances anymore; the owner just wanted me out. I was given ... three days to find a house and move. I took three weeks ... packing. I went: Fuck you. Guess what, I’m moving when I can. (Tracy)

Tracy moved in with a friend who evicted her after three weeks. She was unsuccessful in securing another private rental property because of her tenancy history and the demand in the Perth property market at the time, saying it was common to join at least 30 other people to view a poor quality house. As a result, Tracy moved to a women’s refuge with her children.

This description is a fraction of Tracy’s iterative homeless experiences and shows that entering homelessness with a sense of adventure at the age of 16 turned into cyclical and repeated experiences of violence, substance misuse, homelessness, disruption, and significant day-to-day impacts from mental illness. Consideration of the structural, individual agency, and relational elements in Tracy’s experiences highlight the central push that problematic substance use and mental illness created (individual factors). Tracy reported that she developed mental illness in reaction to being held captive by her abusive boyfriend for two years:

I was locked in a ... metre by metre square wooden box ... on and off for two and a half years. I thought it was fine ... I was just a piece of shit anyway, so
what did it matter, that’s what I deserved, that’s normal, that’s okay. Schizophrenia was like a safety mechanism to justify why it was okay to be in the box and things like that. (Tracy)

Tracy’s substance use became problematic when it was her primary coping mechanism for responding to relational experiences of violence and abuse. Tracy’s descriptions identify how her immediate focus on sourcing and using substances along with the debilitating impacts of mental illness undermined her housing stability (structural issue). Tracy’s story invites a more detailed exploration of mental health and mental illness which I now consider.

MENTAL HEALTH IMPACTS AND MENTAL ILLNESS

Six women who escaped, one who was evicted, and Tracy reported that they were diagnosed with mental illnesses as adults (Auerswald & Eyre, 2002; Gwadz et al., 2007; Noll et al., 2003; Reid et al., 2005). The diagnoses included bipolar affective disorder, anxiety, panic disorder, major depressive disorder, and schizophrenia, with five women reporting multiple diagnoses. Five women were actively suicidal while homeless. All eight women linked mental illness to childhood experiences of trauma and abuse. For seven of these women, links were also drawn between long-term iterative homelessness, mental illness, and substance use. Additionally, these women reported enduring associations with other people experiencing homelessness (G. Johnson et al., 2008). The women reported that their mental states deteriorated the longer they were homeless (Cauce et al., 2000).

Belinda had been living homeless for 21 years at the time of our interview, but did not describe her mental health, substance use patterns, or experiences of violence. Given these 21 years have primarily involved rough living, I suggest that there is a high likelihood that violence, substance use, and impaired mental health are present in some form in her homeless experiences (May et al., 2007; Reeve et al., 2007; Robinson, 2010; Wardhaugh, 1999). The 14 women encountered different types of service delivery and I now consider this.
SERVICE DELIVERY

A variety of factors inform help seeking behaviours and women who do not present in ways that correlate with practitioners’ expectations (i.e., demonstrating passivity, femininity, and helplessness), will most likely receive limited, disinterested, and unhelpful responses (Benevolent Society, 2009; Cramer & Carter, 2002; Rosengard et al., 2001). Marvasti (2002, p. 616) discusses "the social construction of service-worthy” consumers and found that those who did not meet normative expectations of 'homeless people' received a different and inferior service to those considered 'worthy' of service.

The majority of women who transitioned to adult homelessness reported similar experiences, feeling they were not taken seriously because of their extensive experiences of homelessness and long-term involvement in service delivery systems. The message the women internalised was that because their circumstances appeared unchanged over many years, service providers gave up hope and became judgemental towards them:

I've had ... judgements and they don't accept what I've been through and they don't care as much. I just want someone who’ll accept me for me, no judgements and just understand more than anything. (Amy)

Judgemental practitioners and exclusionary practices (Reeve et al., 2006) were noted by the women as creating the conditions for ongoing homelessness. This was also discussed by stakeholders who spoke about women who are frequent users of homelessness and other services due to iterative homelessness:

Workers who ... have the attitude of: Oh, they're just using the system, they've been back so many times ... they don't deserve this or ... they got really aggro with me, or they turned up after they'd be sniffing all day. That's just what we have to learn to ... use ... as an opportunity to engage rather than ... use it to punish the women further. (SPG1)

Willow's experience of service delivery as a survivor of four domestic and family violence relationships was mediated by her experiences of abuse and institutionalisation
from a young age (also discussed by FEANSTA, 2009; Fowler et al., 2009). She considered her "independent self" (developed from looking after herself since she was 12) a barrier to accepting support. One manifestation of this was Willow’s unwillingness to engage in compulsory case management processes which were a requirement of the specialist homelessness service she was accommodated in at the time of our interview. Consequently, she was framed as 'difficult' and non-compliant by agencies. Willow was grateful for the support on offer, but was reluctant to accept help as she felt it would erode her ability and independence.

These discussions illuminate the types of issues and complexities that the women faced while homeless. The experiences of living homeless for all of the adult women are now considered, compared and contrasted in the concluding comments.

Conclusion

This chapter demonstrates distinctions in adult experiences of homelessness across the domestic and family violence, substance misuse, and youth to adult pathways. The differences in experiences of navigating homelessness, social connections and relationships, substance misuse, mental health and illness, violence and safety, and service delivery are explored in these concluding comments. Figure 20 provides a snapshot of iterative homeless experiences across the pathways for comparative purposes:
This comparison shows that the youth to adult pathway experienced iterative homelessness two to three times longer than the other two pathway types. While the women in the domestic and family violence pathway described iterative homelessness as a shock, women in the other two pathways were resigned to, and reasonably familiar with, the experience. The drivers of iterative homelessness are significantly different, with women in the domestic and family violence pathway on the move because of a lack of safety and limited housing options.
In contrast, the women with substance misuse issues kept moving because of the overriding emphasis on sourcing and using substances and their support networks eventually refusing to accommodate them. The women who transitioned to adult homelessness after escaping had limited lifetime experiences of secure housing. House or home was not experienced as a safe and secure place from which to venture into the world and consequently being housed was an unfamiliar challenge for this group of women (Tomas & Dittmar, 1995). This also meant that the women’s knowledge of, and exposure to, individuals who role modelled tenancy responsibilities was limited.

The association with other people experiencing homelessness differentiates the pathway types, with the women on the domestic and family violence pathway rejecting a subject position of ‘homeless’. These women did not socialise with homeless sub-cultural groups. The two women on the substance misuse pathway reported that their primary social networks comprised other substance users. While these women did not refer to their associates as experiencing homelessness, the research evidence suggests that their associates would most likely have histories of homelessness (G. Johnson et al., 2008).

Ten of the women who transitioned to adult homelessness engaged with other people experiencing homelessness. Nine of these women reported at the time of interview that their primary source of socialisation was with other people experiencing homelessness. As noted earlier, a homeless social network provides a place to belong and an opportunity to learn about how homelessness is performed. These social networks also presented significant risks to the women’s physical and sexual safety and were often associated with the shared practice of substance use.

Five of the women in the youth to adult pathway relinquished care of their children, compared to one in the substance misuse pathway. Two women in the domestic and family violence pathway reported statutory child protection involvement as a result of their partner’s domestic and family violence, with their children remaining in their care.

Patterns of substance misuse differentiate the adult experiences of homelessness, with four women in the domestic and family violence pathway noting that their substance use became unmanageable after becoming homeless, yet this had been
resolved at the time of interview. In addition to the two women who came in on the substance misuse pathway, nine women who transitioned to adult homelessness reported that problematic substance use was a prominent feature of their lives. At the time of our interview, the majority of these women reported problematic substance use as a current feature of their lives.

Women on the domestic and family violence pathway reported that their mental health and wellbeing were compromised, yet mental illness was not a common feature. Shiloh and Debra did not report mental illness or mental health impacts as a result of their homeless experiences, which is in contrast to the eight women who transitioned to adult homelessness and developed mental illness as adults. For these women, mental illness was one part of a mosaic that also included childhood abuse, other forms of trauma, violence, substance use, and long-term associations with other people experiencing homelessness.

The women on the adult domestic and family violence pathway articulated many impacts of abuse on themselves and their children and spoke about the need to maintain vigilance around their safety. Post-separation abuse was common for the adult domestic and family violence pathway women and they were challenged by the changes in the nature and type of abuse. In contrast, the women in the youth to adult transition group positioned post-separation abuse within their contexts of multiple domestic and family violence relationships, childhood trauma, other forms of violence, mental illness, substance misuse, and extended periods of iterative homelessness. Domestic and family violence was not discussed by the women on the substance misuse pathway. However, both reported risks to their safety in accommodation, with one woman advising she had been raped.

Service delivery for the women on the adult domestic and family violence pathway was experienced as mostly positive, although discursive constructions of women, violence, and homelessness negatively shaped some women's encounters with services. The experience of service delivery for the women in the substance misuse and youth to adult homeless pathways was varied and mediated by discursive constructions of substance users, women, violence against women, and women with long histories of
homelessness. The youth to adult transition group generally had long-term, yet sporadic encounters with specialist homeless and related services, and this informed their presentation and attitudes towards seeking help.

This discussion shows that escaping abuse and transitioning to adult homelessness established the conditions for iterative homelessness, substance misuse, association with homeless social networks, and mental illness (Dizdarevic, 2010; Graham, 2005; Robinson, 2003; Wesely & Wright, 2009). Two other women who transitioned to adult homelessness demonstrated similar patterns and while they did not report childhood abuse, their lives are characterised by problematic substance misuse, long-term iterative homelessness, association with other people experiencing homelessness, and mental illness. Homelessness magnified and expanded these women's structural, individual, and relational marginalisation and vulnerability. Associations with others experiencing homelessness provided a place to belong, while also reproducing and exacerbating the symptoms of trauma. Iterative homelessness complicated and expanded the manifestations of trauma and lifelong disruption.

These women came into homelessness between the ages of 11 and 16, and by the time they transitioned to adult homelessness they were familiar with primary homelessness. The disadvantage created by entering the homeless population at such a young age leaked into their adult lives as they encountered domestic and family violence relationships and some were forced to relinquish the care of their children. This raises the question - did any get out and stay out of homelessness? This question and other themes are addressed in Chapter Nine.
CHAPTER NINE - GETTING OUT OF HOMELESSNESS

No matter how much a homeless way of life is accepted, no matter how much discrimination is endured, and no matter how much people adapt cognitively and behaviourally to homelessness, there is always a desire to 'get out'. (Chamberlain et al., 2007, p. 31)

The four preceding chapters presented empirical materials on the ways in which women came into homelessness and their experiences while homeless. The findings have been presented using a pathways metaphor as an ideal type (Weber, 1949) drawing out differences and similarities in and across the pathway types. Examples have been provided of the ways in which structural, individual agency, and relational factors created the conditions for entering homelessness and mediated the experience of living homeless. This chapter focuses on the women's attempts to create sustainable pathways out of homelessness using the six pathway types and research question 1.3 on how women get out of homelessness is addressed. Structural, individual agency, and relational factors, along with relevant discursive practices are also examined in this chapter.

 Definitions and concepts of a sustainable pathway or successful exit out of homelessness vary significantly and may relate to: how long the person has been housed; economic security; engagement in education, employment, and training; psychological adaptation; cognitive changes; and social connectedness (A. Buck, Balmer, & Pleasence, 2005; Mayock, O'Sullivan, & Corr, 2011; Milburn et al., 2009; Nemiroff, Aubry, & Klodawsky, 2011). Three distinct experiences which reflect the women's positions at the time of the interview in relation to getting out of homelessness have been identified and operationalised. These include creating a sustainable pathway out of homelessness, beginning steps in a pathway out of homelessness, and experiencing homelessness. Each of these categories represents specific structural, individual agency, and relational factors which are summarised in Figure 21. Following this, I explore youth pathways out of homelessness.
### FIGURE 21 – CHARACTERISTICS OF DIFFERENT TYPES OF HOMELESS EXITS

<table>
<thead>
<tr>
<th>Type of Homelessness</th>
<th>Structural</th>
<th>Individual agency</th>
<th>Relational</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sustainable pathway out of homelessness</strong></td>
<td>Stable housing of more than 12 months.</td>
<td>Significant progress in personal recovery.</td>
<td>In-depth awareness and understanding of domestic and family violence and personal safety.</td>
</tr>
<tr>
<td></td>
<td>Engagement in education, employment, and training.</td>
<td>Substance misuse addressed and managed.</td>
<td>Supportive, encouraging, and loving personal relationships.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Improving mental health and wellbeing.</td>
<td>Access to professional support.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clear and concrete goals.</td>
<td></td>
</tr>
<tr>
<td><strong>Beginning steps</strong></td>
<td>Housed less than 12 months.</td>
<td>Personal recovery aspirations.</td>
<td>Unsupported or strained relationships.</td>
</tr>
<tr>
<td></td>
<td>Precarious housing tenure.</td>
<td>Broad and general goals.</td>
<td>Vulnerability to exploitation and violence within relationships and social support networks.</td>
</tr>
<tr>
<td></td>
<td>Dependent housing.</td>
<td>Limited sense of self-efficacy.</td>
<td>Some association with homeless sub-cultural and substance using social groups.</td>
</tr>
<tr>
<td></td>
<td>Limited or no engagement in education, employment, and training.</td>
<td>Vulnerable to substance misuse relapse.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tenuous mental health and wellbeing.</td>
<td></td>
</tr>
<tr>
<td><strong>Experiencing homelessness</strong></td>
<td>Primary homelessness, temporary accommodation, or specialist homelessness service accommodation.</td>
<td>Losing hope.</td>
<td>Ongoing involvement in abusive and exploitative relationships.</td>
</tr>
<tr>
<td></td>
<td>Barriers to or no engagement in education, employment, and training.</td>
<td>Impaired confidence and self esteem.</td>
<td>Other people experiencing homelessness comprise majority of social network.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ongoing substance misuse.</td>
<td>Reluctant to engage with service providers.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Significant day to day impacts of mental illness.</td>
<td></td>
</tr>
</tbody>
</table>
Youth pathways

Of the 21 women who came in on the three youth pathways, four from the eviction pathway are discussed here as the remaining 17 transitioned to adult homelessness. One woman created a sustainable pathway out of homelessness prior to turning 18, two were 18 at the time of interview and taking beginning steps, and one was 18 and still experiencing homelessness.

Kate had not re-experienced homelessness in the 10 years since she was evicted by her parents. After her experience of homelessness Kate secured housing, undertook study, and obtained employment in a professional role. She has reconciled the relationship with her parents and reported an extensive social network. Kate has developed reflexive awareness of the triggers underlying her experience of homelessness. This intrapersonal awareness led her to believe it was unlikely she would re-experience homelessness:

I think it is really clear that not having a place to stay ... was an isolated incident. (Kate)

Kate’s journey out of homelessness exemplifies how structural (housing, employment, and income), relational (reconciled relationships and supportive social networks), and individual factors (reflexive awareness of self and issues that led to the homeless experience, self-esteem, confidence, and a commitment to avoid future homelessness) create the conditions for a sustainable pathway out of homelessness.

Gertie and Shannon had been in their current housing for less than six months when I met them. Both women were in the process of establishing pathways out of homelessness. Their experiences differ with Gertie living rent free in her mother's house while her mother worked in a remote area for 12 months. Gertie and her mother were in the early stages of reconciling their relationship. Gertie said that her mother still "disapproved" of Gertie identifying as same-sex attracted and having a female partner. Gertie has a supportive network of friends and affirming professional relationships with workers from a youth homelessness agency. These relationships were accepting and encouraging of Gertie which was important in the context of Gertie's mother's rejection.
Gertie felt she could turn to the youth agency for support and information should she require it in the future. She was working full time and was committed to avoiding homelessness.

Shannon was in a supported private rental and while she had been described as a "model tenant" by her property manager, the property was due to be redeveloped and she was required to move out. Shannon reported having no personal social supports and was connected with one support worker. Shannon found great comfort in her pets and enjoyed her volunteer work at a local animal rescue centre. She worked part-time in the retail industry and had been accepted into a vocational training course. Shannon experiences debilitating impacts from mental illness and associated somatic responses such as gastro-intestinal disturbances and migraine headaches.

Gertie and Shannon were working hard to strengthen the structural, individual agency, and relational features in their lives by engaging in employment and study, securing accommodation, and building reflexive awareness of factors that created the conditions for homelessness. Relational and individual factors unique to each woman work to both strengthen and undermine their capacity to create a sustainable pathway out of homelessness. Kate, Gertie, and Shannon spoke of their contributions to the conflict in their families which led to them being evicted (also reported by Mallett et al., 2010), and they argued this added to their reflexive awareness about how to avoid future homelessness.

Kerry was 18 and living in medium-term homelessness accommodation at the time of our interview. She planned to move interstate, live with a supportive aunty, complete her studies, and seek employment. Kerry had not reconciled the conflictual relationship with her mother, and other than her aunty, she had no social networks in the area to which she planned to move. Kerry reported that the support and practical assistance provided by the youth homelessness agency where she was accommodated had assisted her to make these plans. Kerry's situation highlights that she aspires to strengthen the structural, individual agency, and relational factors in her life. On an individual level, she demonstrated motivation and enthusiasm to move permanently away from
homelessness. Achieving this goal, however, may be challenging as Kerry has limited social supports and her housing plans are relationally dependent.

These four stories of youth pathways out of homelessness bring to the fore the connections between structural, individual agency, and relational factors. It is noteworthy that of the 21 young women who experienced homelessness, only one from the eviction pathway managed to get out permanently before the age of 18 years. I now consider the adult pathways out of homelessness.

Adult pathways

Nothing, nothing could put me off my track again. I will never go back to that life, not ever. At the end of the day, it's ... how you live your life in between. I know it sounds like a Hallmark greeting card. I went through a long time of really beating myself up that ... I'd exposed them [children] to a lot of ... abuse ... but I’m coming to terms with it now I think. (Lucia)

This section explores the experiences of women on the domestic and family violence, substance misuse, and youth to adult pathways as they sought to leave homelessness behind. My discussions commence with the women who came in on the domestic and family violence pathway.

DOMESTIC AND FAMILY VIOLENCE PATHWAYS

Of the 12 women who experienced homelessness for the first time because of domestic and family violence, seven created a sustainable pathway out, one was taking beginning steps away from homelessness, and four were experiencing a form of homelessness. All of the women who created a sustainable pathway out of homelessness had children in their care. These women had not experienced homelessness for periods of between one and 10 years. Three women had public housing tenancies, two were owner-occupiers, and the other two were privately renting. While owner-occupier status created housing security, the process of achieving a property settlement was difficult as the women were
subject to further abuse from ex-partners (also reported by Braaf & Barrett-Meyering, 2010).

Bronte’s experiences are presented as an example of how structural, individual agency, and relational factors played out for these women. After ending a second domestic and family violence relationship and obtaining a property settlement, Bronte chose to rent privately because it expanded her choices in relation to quality, amenities, and location. Consequently, Bronte was paying half her income in rent. She acknowledged her housing vulnerability in terms of security of tenure and affordability, yet said she was prepared to manage these risks for housing choice and quality. Bronte had a professional relationship with the property owners and this expanded her sense of security in the tenancy. Bronte articulated that one of the concerns with private rental was the possibility of the property being sold, a situation she had experienced previously.

While the cost of housing was significant in Bronte’s well managed budget, she had recently commenced work as an education assistant after completing study in this area. Bronte specifically chose this area of work as the hours and conditions did not impinge on her parenting responsibilities. Studying and then commencing paid employment assisted Bronte to create financial independence away from income support.

Bronte is deeply engaged in a personal healing journey as a result of a disrupted childhood, compromised mental health, and two domestic and family violence relationships. She is reflexively aware of emotional triggers and has developed strategies to manage these. The following statement emphasises the interconnectedness of individual and relational factors and her application of targeted cognitive strategies:

I can't deny that there’s still times and it's ... minimal ... compared to how I used to be ... that I think: Oh it’s not fair what I’m doing, and he must miss them. But in comes my ... real true self that just says: No you’ve come this far, and you know in your gut that he’s an unhealthy person for your children to be around. So that's what keeps me true and strong to what I'm doing. (Bronte)
In addition to her personal recovery journey, Bronte had built relational knowledge about the dynamics of domestic and family violence and actively assesses all future relationships for the likelihood of exploitative or abusive behaviours. Bronte's focus was firmly on her children's development and attending to the long-term impacts of trauma on her 16 year old son, who had been severely physically and emotionally abused by her second husband. She had also reconciled fractured family relationships and now positioned her family as a source of support and encouragement.

Bronte reported that she had an informal support arrangement with a local domestic and family violence service, but she asserted that her sustainable pathway out of homelessness was her own doing. Bronte’s story shows how structural, individual agency, and relational factors feed into each other, strengthening a woman’s journey out of homelessness and towards personal recovery.

Joanne’s experiences demonstrate how the interrelationships between structural, individual agency, and relational factors can also undermine a woman’s capacity to remain out of homelessness. Joanne had been occupying her public housing tenancy for 12 years when we met and said she planned to live in the house “forever”. Joanne’s experience shows that the length of time housed is not an indication of safety or security, particularly when an ex-partner continues to enact abuse.

Joanne ended the relationship with her ex-partner five years before our interview, and despite the existence of a Violence Restraining Order he used contact with their children over this five year period to threaten and emotionally abuse Joanne (also identified by Laing, 2010). The Violence Restraining Order was due to expire and as Joanne experienced being "treated like a joke" by police and court officers, she was reluctant to seek an extension to the Order.

*I’m scared.* My Restraining Order finishes in October. I’m worried about that. I don’t want to see the police again. So I feel like I have to wait and see if something bad happens. He was hoping that ... when the restraining order runs out in October, that we’d be able to get back together. He still hasn't got the message. *(Joanne)*
This indicates that Joanne's housing, personal safety, and emotional stability could again be at risk, particularly as she has a diagnosed mental illness and a history of substance misuse. Joanne was about to commence studies in community services and hoped to share her lived experience and wisdom with others. Mental illness and substance misuse had precluded Joanne from paid employment in the past; hence it was a long-term goal. Nevertheless, the idea of working was new and somewhat challenging.

Joanne has had a significant amount of contact with police, courts, refuges, domestic and family violence agencies, drug and alcohol programs, and psychiatric services over the past 16 years. The quality of this contact has been variable and is discussed in other sections of this thesis. In terms of her pathway out of homelessness, Joanne finds comfort in knowing that a local domestic and family violence counselling service is available should she need support or advocacy services. Joanne's experience of the police and legal systems is, however, problematic and this left her unwilling to apply for an extension of the Violence Restraining Order, which had mostly stopped her ex-partner's physical violence. Joanne's problematic experience of police and legal agencies was undermining her ability to maintain her pathway out of homelessness.

Of the women who came in on a domestic and family violence pathway, Monica was the only one taking beginning steps out of homelessness. Monica's experiences were detailed in Chapter Eight when I explored her experience of primary homelessness. When we met, Monica had been housed for four months in private rental accommodation which was intensively supported by a non-government agency. Monica's enduring sense of cultural and kinship responsibilities which extend to allowing family to stay with her continued to undermine her housing security (Birdsall-Jones et al., 2010). She was attempting to balance the competing demands of kinship, reciprocity, and tenancy requirements. According to Monica, the tenancy support program workers were culturally sensitive and competent (identified as essential by Flatau, Coleman, Memmott, Boulderstone, & Slatter, 2009). The program worked collaboratively with her family to ensure the tenancy was not jeopardised. Monica did not feel secure in her housing which was mediated by structural, individual, and relational factors, all of which intersected with culture.
Of the four women experiencing homelessness, three were residing in women’s refuges and Chloe was living with her abusive partner and two young children. The women living in refuges had been homeless for periods of between one and three months, which I consider to be short-term homelessness. These three women had significantly different circumstances in relation to housing options.

Sarah was residing in a single women's refuge and had no specific housing plans and reported being too emotionally vulnerable to consider housing or employment options. She identified she was in the early stages of healing from a recent sexual assault and 16 years of domestic and family violence. Her self-esteem and confidence were compromised and she reported that her cognitive and decision making capacities were impaired as a result of her recent experiences. She was choosing to have little contact with her family whose concern about her mental wellbeing was experienced as an added psychological and relational pressure.

Liz had numerous housing options which included: accepting medium-term, externally supported refuge accommodation; private rental; or waiting for a property settlement and purchasing a home. Liz planned to return to part-time work and felt that this would improve the family’s income as well as her self-esteem and confidence. Liz was in the early stages of recovering from the effects of domestic and family violence.

While Liz had sought respite in refuges previously, this was the first time she had resolved to end the relationship and her ex-partner was exerting pressure on her and their children arguing "the last three months didn't really happen". These abusive tactics were undermining Liz’s belief that the violence was “real”. She planned to counter this by joining another domestic and family violence group to strengthen her resolve to end the relationship. Liz’s family lived intestate, yet were a constant and reliable source of support. She had developed connections with other women from her first domestic and family violence group and planned to continue her association with them. Liz’s story shows that whilst her structural options are likely to create stability, relational and resulting individual elements have the potential to undermine a sustainable pathway out of homelessness.
Jade was waiting for renovations to be completed on a public housing property before she and her children moved in. Jade occupied liminal spaces characterised by co-existent love and abuse (Fraser, 2008), concern for her children, constructions of herself as a “bad” mother, and the involvement of the Department for Child Protection. Jade cognitively understood the rationale behind the Department for Child Protection’s stance but as she did not independently decide to end the relationship she was struggling to make sense of her emotions and reactions.

Jade was embarrassed by the involvement of the Department for Child Protection, and at having exposed her children to risk through her ex-partner’s behaviour. Jade’s children were affected by their experiences and exhibited challenging behaviours which were gradually improving as a result of therapeutic interventions. Jade had moved to Western Australia with her partner and had no social networks other than the refuge staff. Once housed, Jade hoped to return to work, but as she had no family or social supports she was unsure how she would organise and afford childcare. Jade's situation speaks of multiple mediating structural, individual agency, and relational elements that have the potential to undermine her capacity to build and sustain a pathway out of homelessness.

I have categorised Chloe’s circumstances as hidden homelessness (Tually et al., 2008) and included her with other women experiencing homelessness on the domestic and family violence pathway. Chloe’s mother is her primary social support, yet her mother has poor physical health and spends lengthy periods of time in hospital. Chloe had no financial reserves on which to draw on, minimal work experience, and basic education. A complicating factor for Chloe was being subject to monitoring by the Department for Child Protection because of her partner’s behaviour which was assessed as a risk to the children. This meant Chloe’s day-to-day activities were infused with the knowledge that if the risk to her children was assessed as unacceptable she would be given the options of leaving the relationship with the children or relinquishing care of her children (Government of Western Australia, 2010a).

If Chloe is informed by the Department for Child Protection that the assessed risk to her children is unacceptable she anticipates her future will involve moving to a
women’s refuge, seeking income support, applying for social or public housing, and poverty. Chloe reported she did not feel emotionally strong enough to insist that her partner leave the home should this scenario arise. Chloe’s situation indicates that structural, individual, and relational factors jeopardise her safety and capacity to avoid re-experiencing homelessness. In addition, the intervention of the Department for Child Protection could directly affect the likelihood of Chloe re-experiencing homelessness if it is decided that her partner’s behaviour constitutes unacceptable risk to the children.

The experiences of the women on the domestic and family violence pathway demonstrate interconnectedness and overlap between structural, individual agency, and relational factors which can strengthen or undermine a pathway out of homelessness. This reinforces that the responses to homelessness as a result of domestic and family violence need to be contextualised, along with assessment of how each domain influences the other, while maintaining a focus on the outcomes the woman is seeking. I now consider the experiences of the two women on the substance misuse pathway.

**Substance misuse pathways**

Secure housing and a sustainable pathway out of homelessness were not features for either woman on this pathway. Debra had become a tenant in her own right in a public housing property three months before our interview. Prior to this she had been accommodated in transitional housing and in receipt of tenancy support which focussed on management of her problematic substance use. She speaks about what this means in the following quote:

I was honest with [worker's name] ... I said: I’m scared shitless. For the last two years, yes I’ve been doing the right thing ... because I’ve had someone over my shoulder - not like intrusively in my life or anything. But ... making sure I ... do the right thing. What happens when you’re gone? I won’t have to be good. I know my spirit ... it’s ... a naughty spirit. It doesn’t like to be told what to do. It’s a struggle, it’s hard because ... there’s always elements and people around you that will tempt you, and you’ve always
got that false sense of security of thinking: I'm good now, I'm right now, I can handle it. (Debra)

Debra's statement points to the mediating impact the tenancy support service had on her ability to abstain from drug use and her concerns about sustaining this after the support was removed.

Debra's social networks primarily compromised people who continued to use substances, and with whom she had shared 'using' relationships (Mayock et al., 2011; Wenzel et al., 2009). This left Debra with an experience of cognitive dissonance as she acknowledged the need to move away from these groups, yet they provided a familiar place to belong where she was accepted (Donath, 2004). Ending these relationships meant social isolation and loneliness as Debra had no other friends, her parents were deceased, and other family members had withdrawn their support as a result of her substance misuse. Debra's example shows how the relational and individual shape a pathway out of homelessness. Debra had not used amphetamines habitually for two years, yet her sense of the potential for lapse which would create the conditions for another experience of homelessness was significant.

Shiloh was in a women's refuge at the time of our interview, waiting for a vacancy in a drug and alcohol rehabilitation facility where she planned to stay for 12 months. The facility was run by a Christian organisation aligned with Shiloh's religious values. Shiloh was resolute that the treatment program would assist her to permanently abstain from substance use. Shiloh had no other plans in relation to housing or returning to paid employment. Her parents were supportive of her entering the facility, particularly as they had advised they would no longer support her if she continued to use alcohol or other substances. Shiloh identified her Pastor as her other social support.

Shiloh said she did not understand why she had developed problematic amphetamine and more recently, alcohol use patterns. She felt that the stint in rehabilitation would help her discover the triggers to her substance misuse. Shiloh's situation suggests that outside of the rehabilitation centre, she has few structural, relational, or individual agency elements or plans that will strengthen her pathway out of homelessness. Shiloh cited her faith and religious values as significant features in her
recovery journey (Kellehear & Cvetkovski, 2004). As with the other pathways, these discussions articulate the intertwining effect of structural, individual agency, and relational factors. I now consider the 17 women who transitioned to adult homelessness.

Youth to adult pathway

I’m happy with who I’m becoming. With everything I’ve been through that would have to be one of the biggest miracles in my life. I know I’ve made a conscious choice of being better not bitter. So, even though I go through meltdown and everything else; my conscience is clear. Whatever happens when I die I want to have a clear conscience and not have any regrets. I will have sadness because things happened the way they did, but the opportunities came and I didn’t miss them. (Elsie)

Of the 17 women who made the transition to adult homelessness, five were creating sustainable pathways out of homelessness, another eight were taking beginning steps away from homelessness, and four were experiencing homelessness. I start by discussing the five women who were creating sustainable pathways out of homelessness.

The three women – Elsie, Debbie (a 40 year old non-Indigenous mother of one), and Michelle, all came in on the youth escape pathway. These three women were identified in the previous chapter as standing apart from others who escaped and transitioned to adult homelessness. Specifically, these women had one experience of homelessness under the age of 18, which was followed by many years of housing stability, and then a second experience of homelessness as adults due to domestic and family violence. These women were securely housed (two owner-occupiers, one renting privately). Elsie and Michelle were in paid employment, and Debbie wanted to return to her profession, but restrictive conditions placed in a parenting order by her ex-partner precluded her from working.

All three women had developed an acute awareness of domestic and family violence dynamics and were vigilant of their safety (and that of their children). These
women were actively engaged in personal recovery journeys which promoted emotional wellbeing. They had quality social and support networks comprising friends, family, and professionals. None of the women had experienced substance misuse. Elsie spoke of service delivery practices assisting her to create a sustainable pathway out of homelessness as refuge workers had continually conveyed their belief that she would heal and have a better life.

Two women who came in on the eviction pathway were creating sustainable pathways out of homelessness. Both were in secure and appropriate social housing and one was engaged in study, which she hoped would lead to employment in the community services industry. Both women reported that they were proactively managing individual factors such as mental illness and substance use, and while this was often a struggle they felt they were making progress. An important component of recovery for these women was reflexive awareness and management of triggers underlying mental illness and substance misuse. Extricating themselves from homeless and substance using social networks was reported by the women as central to creating a sustainable pathway out of homelessness.

Of the eight women who were taking beginning steps away from homelessness, four escaped, three came in on the eviction pathway, and Tracy ‘chose’ homelessness. These women occupied tentative and uncertain spaces in relation to leaving homelessness behind and most had been accommodated less than six months. Karen was living with her partner when we met and spoke in detail of her enduring and embodied sense of displacement (Robinson, 2011) regardless of whether she was housed or not:

Even though ... I do have a roof over my head ... I feel ... homeless. (Karen)

In a follow-up contact, Karen advised her relationship had broken down and she was re-experiencing iterative homelessness, which confirmed her deeply embedded sense of homelessness.

Five of the women taking beginning steps occupied social or public housing and the experience was unsatisfactory for the majority. Two women were offered social
housing on the condition they accepted tenancy support. They understood that if they addressed the issues underlying their lengthy experiences of homelessness they would qualify for independent social housing as tenants in their own right. These two women escaped into homelessness and had long histories of iterative homelessness, multiple experiences of domestic and family violence, childhood trauma, mental illness, and substance misuse issues. Given this background, they were deeply appreciative of being housed. However, they found the conditions associated with the tenancy mismatched to the contexts of their lives. Melissa, who is a 36 year old non-Indigenous mother of three children, provided examples of this situation.

Melissa’s tenancy agreement stipulated that “homeless people” were not allowed to visit her home. She was informed that if this occurred she would be in breach of her tenancy agreement and would face eviction. As she was in a long-term relationship with a man who was experiencing homelessness (and this was known to the tenancy support agency), she navigated the guidelines by having her partner visit at weekends as the service operated during the working week. As Melissa’s partner was living rough they had nowhere else to meet. In summary, tenancy support created the conditions for a pathway out of homelessness through the provision of housing, but the expectations attached to the tenancy restricted the women’s lives and in particular their relationships.

Tracy’s experience of being allocated public housing after a long experience of iterative homelessness demonstrates the relevance of appropriateness of housing and its links to individual factors. Tracy felt she had no choice other than to accept the housing as she has a problematic tenancy history and had no other options. Her story is a lucid example of how location, the behaviour of neighbours, and the safety of the area interact with individual factors to create the conditions for recurrent homelessness:

I got this place and I was so excited ... I was starting a new book, not a new chapter. This is everything for us. I’m off the speed. I wasn't smoking pot at the refuge. So for a month and a half I was clean. I was ... pumped up full of life. And then we come to see the house ... we pulled into the street and I just knew that it wasn’t a good place and knew that I had to accept it anyway. We
pulled into the drive and five minutes after being in the drive there were five people across the road to score. There were cars pulling up on the house on the corner. Two doors down there was someone else doin' a deal. And I’m like (crying): How can this be my new book? How can you continue to say no when it’s so present and so close and familiar? So I’ve had a few troubles since I’ve been here with the drugs. It sets families up to fail. (Tracy)

These experiences spilled over into Tracy's sense of self-worth and her relational goal of providing a secure environment for her children that would not replicate her life experiences of mental illness, domestic and family violence, and substance misuse:

It’s like I’m still a piece of shit. Let’s stick all the pieces of shit ... in the one spot. This is kind of like the Projects for Australia. You’ve got [high rise public housing] down the road. Twice I’ve been down there and walking through and people have jumped. You see the bodies get wheeled out and the workmen have to have counselling. This is not a place I want for my kids. We've found five knives in our front yard. We’re always on the phone to the police about our neighbours. If it disturbs my kids, it’s disturbing me. If they’re scared, I’m ringing the cops. I don’t care. I’m so over trying to be nice, and ... this is about my kids and when they’re scared, that pisses me off. (Tracy)

Compared to the women who were creating a sustainable pathway out of homelessness, this group of eight women were less likely to be engaged in education, employment, and training activities, with two women reporting they were employed part time. Other women said that mental illness, substance misuse, parental responsibilities, and emotional vulnerability precluded them from engaging in participation activities (Evans, 2007). Half the women reported having never been in the workforce and this was seen as a further barrier to moving off income support into paid employment.

For most of these women, recovery and healing were tentative and contingent on maintaining housing and the uncommon experience of personal safety. Karen and Kayla were more certain about recovery as they had developed reflexive awareness of their experiences and underlying triggers. In particular, they outlined the links between substance misuse and suppressed emotional expression. This awareness led the women
to develop “healthier” (Kayla) ways of coping with difficult emotions (Marsh & Dale, 2006). Central to Karen’s and Kayla’s narratives were expressions and enactments of agency such as taking responsibility for their decisions and what happened in their lives. Both women spoke about moving from a "victim" (Karen) positionality to an empowered and assertive stance (McNaughton, 2006). Neither woman felt that service delivery practices directly informed the changes they had made, although they acknowledged that some practitioners had been influential role models because they continuously conveyed hope and faith that the women would achieve their goals.

Wai Ling’s situation is worthy of consideration as it shows how length of housing tenure is not a stand-alone indicator of a sustainable pathway out of homelessness. Wai Ling had been housed for over 12 months in a private rental property. However, her lease was due for renewal, her partner had recently ended their relationship and moved out, and she was experiencing debilitating loss and grief reactions after the statutory removal of her baby son. Rent payments consumed most of Wai Ling’s Newstart Allowance payment. Wai Ling was concerned that the lease would not be extended and she did not feel confident about being able to compete against salaried applicants for other properties.

As a result of multiple experiences of childhood sexual abuse and the loss of her son, Wai Ling was emotionally vulnerable and said she found it difficult to live independently. Wai Ling rejected the multiple psychiatric diagnoses she had been given which included schizophrenia and bi-polar affective disorder. Instead, Wai Ling asserted that her experiences of trauma, abandonment, and limited opportunity to form attachments in her childhood impacted on her mental health, manifesting in anxiety and grief (Read et al., 2004). Wai Ling traced these impacts on her own parenting:

I never had nurturing when I was young. I [was] worrying that I’m not doing anything right. I was always anxious, worry something would happen with him. I don’t know if this is a first time mother’s thing. (Wai Ling)

Complying with psychiatric treatment was one of the conditions Wai Ling was required to meet if reunification with her son was to be considered. This left Wai Ling wrestling with the need to “play the game” (Wai Ling) to maximise her chances of reunification.
while rejecting the psychiatric diagnoses and prescribed treatments (and enact individual agency).

Wai Ling had a history of employment in the manufacturing industry, but she could not conceptualise being able to work while trying to comply with the conditions imposed by the Department for Child Protection, or while attempting to cope with her distress, and emotional fragmentation. In addition to dealing with these issues, she reported struggling to attend to the participation activity tests attached to the receipt of Newstart Allowance. Wai Ling was socially isolated and did not want to engage with support agencies as she found their responses and availability inadequate. Consequently, Wai Ling’s ability to avoid future homelessness is compromised due to structural (housing and poverty), individual (mental illness/distress, grief, and the impacts of trauma), and relational factors (the loss of her son, social isolation, and her unwillingness to seek professional support).

Four women who were taking beginning steps away from homelessness spoke of the centrality of intimate relationships. These relationships gave the women stability, love, and affirmation. Five of the women with children in their care reported that their commitment to creating a better life for their children was a major motivator in avoiding situations that could lead them to re-experience homelessness (Benevolent Society, 2009). Similarly, the connection with pets was reported by some of the women as an important relational component of their recovery journey. While having pets compromised the tenancy agreements of four women, the unconditional love they felt for, and received from, their pets, displaced their concern about the risk of being evicted. The women spoke of the constancy and reliability of their pets' love and devotion, something of which most women had few lifetime experiences. The responsibility for pets also acted as a protective factor in relation to suicidality for three of the women.

Amy is another woman whose housing status cannot be used as a sole indicator of a pathway out of homelessness. She had been housed for 18 months in private rental accommodation, yet a number of individual and relational factors suggest her pathway out of homelessness remains tentative. Amy reported that her symptomatic experience of bi-polar affective disorder undermined her coping skills and contributed to suicidal
ideation. In addition, Amy’s inconsistent compliance with psychiatric medications and problematic alcohol use patterns exacerbated her suicidal ideation.

When I first met Amy, she was in a mutually violent relationship with a man she had met through her homeless social networks. Six weeks later, she advised she had ended the previous relationship and commenced a new relationship with a man who was not experiencing homelessness, yet associated with homeless sub-cultural groups. Amy’s primary social network comprised people experiencing homelessness and she was vulnerable to financial and sexual exploitation from within this group:

Since I had that flat all the streeties came and took advantage of me and it was really hard and a lot of people know where I live now, and it’s really not very good for me and healthy. So, I’ve been going through a lot of heartache from that. They take advantage of me. They … have feeds from me, money, smokes, whatever they can get out of me. Even sex, and that’s one thing I don’t really want people to use me, that’s why it’s hard for me to have a relationship nowadays. I’ve got a good heart and … that’s why it’s hard for me to say no. (Amy)

Amy said she had not received any tenancy related complaints as a result of the behaviour of her visitors. However, she was behind in her rent and the lease had expired. Amy explained that the property owner was overseas for an extended period of time and the Real Estate Agency was not willing to act until the owner returned. This description of Amy’s situation shows that structural, relational, and individual factors are working in concert to undermine her ability to maintain a pathway out of homelessness. I now consider the four women who transitioned from youth to adult homelessness and were experiencing homelessness when I met them. These four women came in on the escape pathway and had been homeless for an average period of 18.5 years.

Fatima had been accepted as a priority housing applicant and was waitlisted. This meant her stay in the refuge was expected to be lengthy (see also Chung et al., 2000). As noted earlier, Fatima was culturally and religiously isolated, emotionally fragile, and her activities of daily living were significantly impacted by long-term trauma. She spoke limited English and identified her only source of support as the refuge workers, yet
Fatima said she struggled to cope with her children’s behaviour which was shaped by them having lived most of their lives in refugee camps, and their exposure to two domestic and family violence relationships. Fatima said she did not have the emotional resilience or English literacy to participate in the labour market. This snapshot identifies that while Fatima has some structural stability in the form of housing, significant individual and relational factors intersect with cultural issues in her pathway out of homelessness.

Willow was 45 when we met and had been experiencing iterative homelessness since escaping sexual abuse at the age of 12. She had recently applied for public housing and been rejected because of a problematic housing history and as a single applicant she did not qualify for priority housing assistance (also noted by Robinson & Searby, 2005). Willow was a long-term user of amphetamines and had a number of psychiatric diagnoses. She attempted to maintain contact with her adult children, although these relationships were strained. Her son was struggling with problematic amphetamine use and had assaulted her on a number of occasions whilst intoxicated. The relationship between Willow and her daughter was conflictual and problematic. Her social networks comprised drug using associates and other people experiencing homelessness.

While Willow presents a tough exterior to the world, she expressed her vulnerability in our interview, tracing the impact of lifelong experiences of abuse and abandonment. She was offered medium-term shared accommodation by the single women’s refuge in which she was staying. Willow refused this offer on the grounds that she did not want to swap refuge accommodation for another form of temporary housing. She desired independent and permanent accommodation but could not envisage this materialising. Willow reported she was contemplating returning to her abusive partner, saying she could see no other option.

Belinda was in her 21st year of homelessness which had primarily been spent living rough. She expressed a desire to have her own accommodation, yet had little hope that this would happen. Belinda was disconnected from domiciled family and her social networks comprised other people experiencing homelessness. She did not discuss her
mental health or substance use patterns and appeared resigned to living the rest of her life on the streets. Belinda’s contact with service delivery agencies involved attending a homeless day centre for meals and showers.

PJ was evicted from medium-term homelessness accommodation shortly after our interview as she threatened a worker with a weapon. She moved into primary homelessness and reported that the homelessness agencies she had approached refused to assist her because of her substance misuse and history of aggressive behaviour towards workers and other residents. PJ was contending with two diagnosed mental illnesses and poly-substance use patterns. Her social network comprised drug using associates and other people experiencing homelessness. PJ was undertaking study, but was struggling to maintain her attendance due to concentration issues. PJ’s prescription for Dexamethamphetamine had been suspended as she had misappropriated the supply. PJ said that without this medication she could not concentrate on her studies and anticipated withdrawing from her course.

Despite escaping and thinking that anywhere else was safer, the lives of these four women showed few signs of improving across structural, individual agency, and relational domains. Primary homelessness was familiar territory for them. They were socially isolated. Belinda, PJ, and Willow had few connections or supports outside of homeless and drug using networks. Relationships over their life-course consistently involved exploitation, abuse, and violence which compromised their ability to trust:

It’s just that I find it hard. I mean everybody wants to be your friend, but a true friend is there when you really need 'em. There's never ever been anyone there to do that, but when you sit and you're talking with 'em: Oh, you know if you ever need help, we’ll be there, ra, ra, ra. When it comes to ... the crunch ... nup. So I look at it like this: Why bother? I could have heaps of acquaintances, but why bother havin' a ‘true friend’ when a ‘true friend’ is not goin' be there? And it’s not because I wish it that way, it’s because of the way it’s turned out. (Willow)
I conclude this chapter by comparing and contrasting the various experiences of getting out of homelessness and articulate the facilitating factors and barriers in a sustainable pathway out of homelessness.

Conclusions

Through not having the pills and sleeping all the time I was able to go out and I ... started meeting a few people. Then got my confidence up a little bit, gave up the pills totally and then got into a relationship; which lasted seven and a half years. That enabled me to look at my weight, and ... I lost my weight [30 kilograms]. That in itself was another journey. I certainly know where I want to go and where I don’t want to go. I don’t want to lie around smoking cones or popping pills and not working. I think I’ll always work at something, and it’s not just for the money, it’s for my own wellbeing. I don’t take pills and I don’t smoke marijuana anymore ... at the most I may have a couple of drinks occasionally. (Karen)

This chapter has articulated the differences across the pathways in moving out of, and away from, homelessness. Clear differences are evident in that the women who came in on a domestic and family violence were more likely than any other group to leave homelessness behind. Figure 22 provides a summary of this:
Every young woman who came into homelessness on the escape pathway transitioned to adult homelessness. Eight of these women who escaped had not achieved sustainable pathways out of homelessness at the time of interview. In considering the structural barriers for these women, two of the four women who were housed were subject to restrictive tenancy conditions, and another was experiencing housing stress in trying to meet rental payments after her partner ended the relationship and vacated the property.
These eight women had limited lifetime experiences of being housed and their cognitive orientation to homelessness was one of resignation and familiarity. Being housed on the other hand was a distinctly unfamiliar experience (Tomas & Dittmar, 1995). Five women had problematic tenancy histories which limited their housing options. Six women had no experience of the labour market and they cited barriers to employment such as the impact of mental illness, substance misuse, unresolved trauma, being homeless, no experience of work, and compromised self-esteem and confidence. The one woman who was working had achieved considerable progress in her personal recovery journey and linked this to the ability to work.

Recovery and individual agency in the form of control over one's life for seven of these women was desired, yet considered a remote possibility. The women's goals were general and non-specific. They argued that their “self sabotage” (Willow) undermined their efforts to leave homelessness behind. Given this, the women’s capacity to reflexively trace the factors informing their substance misuse, mental illness, and vulnerability to violence and abuse was compromised. In short, they were struggling to get by day-to-day. The discursive constructions they applied to themselves were negative and undermined their sense of self. They evidenced these constructions of themselves by the amount of lifetime abuse and violence they had experienced, which they felt reinforced that they were unworthy and somehow to blame for their experiences.

The three women whose children were removed from their care by the Department for Child Protection argued that their childhood experiences of abuse and the lack of opportunity to form secure attachments with caregivers eroded their ability to parent adequately. These women’s lives were saturated with grief that had continued for years. Unsurprisingly, five of the eight women adopted substance misuse as a coping mechanism, were diagnosed with serious mental illnesses, and had enduring associations with homeless social networks. As noted before, homeless social networks provided a place to belong outside normative social practices yet were also sites of exploitation and violence.
Across the relational aspect I have already mentioned that these women had few experiences of loving relationships as children which carried over into adulthood with multiple domestic and family violence relationships, often with men they met through their homeless social networks. One woman was building her knowledge and awareness of domestic and family violence dynamics, but this was not reported by others. In general, the women were socially isolated and disconnected from professional support services.

This discussion of the women who escaped suggests that their capacity to get out and stay out of homelessness was seriously compromised. These findings reflect local and international research in that the longer a person experiences homelessness, the greater the likelihood that they will remain homeless and struggle to get out (Chamberlain et al., 2007; Mayock et al., 2011; Reeve et al., 2006; Wong et al., 1997). Many of these women were losing hope that their life would change, and this is reflected in Willow’s comments:

Each time I do find a fella, I think the honeymoon is there. I've had enough: Where’s my life? Why do I have to keep being belted or abused verbally? And I'm copping it from my children as well. I've got to rebuild everything. And it makes me angry and sad too, because it's like my age - 45. I keep reflecting back on my sisters and brother ... they've got everything ... their own homes, they work. Willow's on a pension, she hasn't got a job ... she hasn't got a home, she hasn't got furniture, she's got clothes. It's me that's stopping it ... I'm always the one that wants to do something, but when it comes to the crunch, I back off. (Willow)

For Tracy who ‘chose’ homelessness and Amy who transitioned to adult homelessness after being evicted, similar life experiences and struggles were evident in their narratives. Features shared with the eight women discussed above include debilitating mental illness, substance misuse, ongoing associations with other people experiencing homelessness, lengthy experiences of iterative homelessness, multiple domestic and family violence relationships, and obstacles to engaging in the labour market.
Shiloh and Debra had not managed to create a sustainable pathway out of homelessness after coming in on the substance misuse pathway. They differ from Tracy, Amy, and the other eight women who escaped in that they firmly endorsed individualised accounts of why they experienced homelessness. They constantly emphasised that their choice to privilege substance use over all other activities led to homelessness. Both women had lengthy iterative homelessness experiences and had limited social supports outside of their substance using acquaintances. They did not report mental illness or impaired emotional wellbeing and minimised their experiences of abuse, exploitation, and violence. These women rejected a ‘victim’ subject identity. Shiloh and Debra were aware of the potential for lapse back into substance misuse which placed them in a precarious space around a sustainable pathway out of homelessness.

A common set of characteristics can be traced in the narratives of the women who were creating sustainable pathways out of homelessness. Affordable, safe, and appropriate housing was a central factor for these women (B. Buck, 2002; Chamberlain et al., 2007; Chung et al., 2000; Clapham, 2005; Rocha, Johnson, Young McChesney, & Butterfield, 1996; Tually et al., 2008; Wong et al., 1997). Having previous experiences of housing, economic stability, and other forms of structural security facilitated a familiar cognitive orientation which created hope for the future and helped the women set concrete and achievable goals. Some women had a bumpy road out of homelessness, particularly if they felt pressured to accept unsuitable housing (Jones, 1999). This often meant women were housed in unsafe areas, but in spite of these difficult beginnings they eventually achieved stability and security.

Economic stability and increased income were other mediating structural factors in these women’s pathways out of homelessness (I. Anderson & Tulloch, 2000; A. Buck et al., 2005; Busch-Geertsema, 2005; Edgar & Doherty, 2001a; Jerome et al., 2003; McNaughton, 2005; Wong et al., 1997). Being housed and engaging in employment, education, and training positively impacted the women’s self-esteem and facilitated engagement with normative and socially sanctioned activities (Costello, Chung, & Carson, 2005). This provided opportunities to expand their social networks and created the conditions for new identities to emerge which were distanced from homelessness and violence (G. Johnson et al., 2008).
The women's ability to participate economically was mediated by parental responsibilities, the cost and availability of childcare, and the levels of support provided by family and friends (Averitt, 2003). The women who undertook further study did so to minimise the likelihood of re-experiencing homelessness and for those who chose to study human services it provided opportunities for personal recovery, reciprocity, and the development of theoretical knowledge about their lived experiences of gendered abuse and violence (Evans, 2007; Saugeres & Hulse, 2010).

Individual factors, enactments of agency, and personal recovery are evident in these women's narratives. Recovery involved knowing the self away from abuse and violence, tracing the archaeology of experiences and impacts on self-esteem, and honouring one's experiences. The experiences that led to homelessness were not necessarily welcomed, but over time were positioned as central to growth and self-understanding:

Having that experience ... left me in a position to really appreciate ... what I have now ... and where I am in life now. I certainly see myself as being extremely privileged person. I do not regret or wish that any part of that time in my life didn't happen. It's made me who I am now and it's made me stronger. It just puts things into perspective I think. (Kate)

Personal recovery also manifested in consciousness raising and taking responsibility for one's choices and decisions (R. Coleman & Taylor, 2007). Alongside agency and personal responsibility were experiences of having greater personal control and hope for the future. This connects with relational factors as women extricated themselves from the impacts of other people's choices and exercised individual agency on their own terms.

For these women, framing violence as unacceptable and learning about the dynamics of abuse signalled turning points in their lives. Being able to step outside the dynamics of abuse and believe that they were not the problem was profoundly important. In the following statement, Jo refers to an incident in her neighbourhood that took place some years after she had ended an eight year abusive relationship:

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I could hear him saying to her: You’re a fucking whore, you’re a slut and everyone thinks you’re fucked. And it was virtually word for word everything my man had said to me. And I started shaking and crying on the front lawn ... and this is after I think I’ve come so far. Because as much as I’d read all the books on ... violence ... it’s all very intellectual ... it’s perfectly reasonable, but ... when I actually heard him abusing her, it finally clicked what the books had been saying about ... the whole universalness of what they are actually doing in the abuse. And I suddenly thought: It wasn’t actually me personally, it wasn’t actually about me being a slut, because truthfully I know I’ve never been a slut. But I finally realised that would be what he’d say to any woman that he was yelling at; it wasn’t actually personal, you know? (Jo)

Building knowledge about abuse and violence led to a heightened sense of personal safety and the ability to carefully assess risk. This extended to possible and future partners, with the women describing how they were developing discerning and discriminatory capacities:

For me, it was like a journey to recovery. I recognise that ... finding the perfect man is not the answer. I saw the pattern when I was at the women’s refuge. These ... women meet someone: He’s gonna solve my problems, he’s wonderful, it’s all happening. The next thing they end up back at the women’s refuge and they think: Oh if only I could just meet the right man ... all my problems will be solved. So they repeat the cycle over and over again, and it’s not about meeting the right man, because the reality is there isn’t one out there. The best you can hope for is someone who’s whole in themselves, and I’m yet to meet one. (Elsie)

Supports and social connection with family, friends, and service providers underscored the relational component of these pathways out of homelessness (Averitt, 2003; Bassuk et al., 2001; B. Buck, 2002). The motivation to keep going for children was expressed by the mothers who had left homelessness behind, and while they identified the struggles of parenting alone, they ultimately believed the difficult situations they
encountered would be worthwhile and serve to strengthen their emotional resilience and their children’s quality of life.

Being socially connected assisted the women to make sense of their experiences by being affirmed and encouraged. Interested, involved, and supportive family, friends, and professionals facilitated the journey out of homelessness:

I ... couldn't have had a better experience than ... what I did at that refuge with the staff that they have there. They are just fantastic. I can ring anytime, day or night ... and ... they're just always helpful ... they recognise too that I don't have anybody else. So ... I think they know how important they are to me. They treat me as a person. I think they recognise that I’m completely committed to ... getting through this and to the kids and to doing my degree and to whatever it takes. And because of that ... they are there for me. Whereas I think if you were just there all the time going: Can you do this for me, can you do that for me? It would be ... different. (Lenore)

These discussions on the differences across the six pathways are not intended to present binaries in terms of the women who got out of homelessness and those who did not. By layering analysis of the pathway experiences with structural, individual agency, and relational factors the interconnected and interdependent nature of these domains has been highlighted. Examples have been provided where structural stability in the form of long-term and secure housing can be significantly undermined by relational elements such as ongoing abuse or individual features like difficult to manage substance use or mental illness.

While the structural, individual agency, and relational barriers for ten women who transitioned from youth to adult homelessness are entrenched, far-reaching, and impenetrable these women are not willing to give up their dreams of secure housing, healing from painful life events, and loving relationships. Eight of these women escaped abuse, one was evicted, and one ‘chose’ homelessness. Their journeys since first becoming homeless have been marked by sexual and physical violence, exploitative relationships, debilitating distress and mental illness, substance misuse, extended periods of homelessness, and exclusion. These women are not ‘victims’ of their
circumstances. Despite the extended experiences of adversity they have encountered, they continue to strive to leave homelessness behind. The narratives of these and other women in the study provide rich information on what helped and hindered a sustainable pathway out of homelessness. The implications of these findings for service delivery and policy practices are considered in the next and concluding chapter.
CHAPTER TEN – CONCLUDING COMMENTS AND IMPLICATIONS

It’s either do it or give up. And if you give up ... what was the point in what you’ve already done? (Shannon)

Shannon's opening quote highlights the tenacity demonstrated by the women in this project and provides a platform from which to draw the project to a close. I set out to explore the nature of women’s homeless experiences, unpicking the factors involved in entering homelessness, living homeless, and the processes involved in creating a sustainable pathway out of homelessness. In this final chapter, I provide a summary of the material presented in the preceding chapters and conclude with a discussion on the policy, program, and service delivery implications of the findings. This chapter responds to the overall research question and discusses the policy and practice implications I set out in sub-question 1.5.

I introduced my personal and professional biographic experiences and values related to social justice which motivated me to undertake this study in Chapter One. This study occurred in a period when the Supported Accommodation Assistance Program ceased and an expanded homelessness landscape focussing on preventing and reducing homelessness was introduced.

Chapter Two provided the conceptual backdrop to the project where I painted a picture of how my critical, feminist, post-modern approach to practice created my focus on women and homelessness in this project. I pointed out that my claim to employ post-structuralist practices was weakened by my endorsement of material realities related to women’s experiences of abuse. I argued that most homelessness studies fail to account for gender differences and I signalled my interest in all types of women’s homelessness, including the marginalised experiences of young and single women.

I explored and explained the various analytic approaches I employed, describing my process of testing the fit of pathways as ideal types to women’s homelessness in Chapter Three. This chapter defined my analytic framework of structural, individual agency, and relational factors. Structural factors were defined as housing and economic issues, and individual agency factors were noted to cover choice, sense of self, substance
misuse, mental health impacts, mental illness, demographic, and behavioural issues. I argued that the majority of women's homelessness in this project came about because of relational factors involving the choices and behaviours of others. I signalled that a relational element would be added to my analysis of structural and individual agency matters. The sample size and minimal involvement of Indigenous and culturally and linguistically diverse participants were noted as two key limitations of the project.

Chapter Four described how 23 women reported at least one experience of domestic and family violence across their lifetime. Significantly, I noted that 14 women reported experiencing childhood abuse and 14 women had received a diagnosis of a mental illness. Twelve women identified they had homeless experiences of longer than 10 years.

Chapter Five described the experiences of the 21 young women who had a first experience of homelessness before the age of 18. I explored the reasons associated with the conflict that led to nine young women being evicted. The types of abuse the 11 escaped were considered, and the situation of one woman who said she ‘chose’ homelessness was discussed. I reported that twenty of these young women were pushed into homelessness as a result of relational factors, and while enactments of agency and mediating structural factors were traced, I argued that being pushed into homelessness undermines the dominant constructions that young people ‘choose’ homelessness.

The adult women’s experiences of becoming homeless were considered in Chapter Six. Ending a domestic and family violence relationship and entering into homelessness was presented as a complex process for the women in this pathway and I showed how the decision to leave was mediated by discourses about children 'needing' to be raised by heterosexual parents and women's ‘responsibility’ for creating successful relationships. I reported that when women lost hope that partners would stop their violence they decided to end the relationship. In contrast, the women on the substance misuse pathway reported that as their substance use spiralled out of control, they considered homelessness inevitable. I concluded by comparing the five pathways noting that the escape and domestic and family violence pathways shared similarities as women
fled unsafe situations and found they were blamed for the relational events that pushed them into homelessness. In contrast, the women in the other three pathways asserted personal responsibility and gave explanatory examples of individual agency for their first experience of homelessness.

Living homeless for the young women in the escape and eviction pathways was the focus in Chapter Seven, and I drew attention to how women in the escape pathway were more likely to experience primary homelessness and for longer than those women who were evicted. Similarly, iterative homelessness while common to both pathways was experienced for longer periods by the women who escaped. Associating with other people experiencing homelessness was common to both pathway types. More women who escaped reported developing problematic substance use once living homeless.

Chapter Eight reported on the living homeless experiences for the adult women from the domestic and family violence, substance misuse, and youth to adult pathways. The women in the domestic and family violence pathway were deeply affected by ongoing post-separation abuse and emphasised that they had needed to remain vigilant about their safety despite the relationship ending. The two women on the substance misuse pathway noted their dwindling sources of support and accommodation as they lived homeless and continued to misuse substances. Both of these women experienced male associates expecting sex to be exchanged for accommodation. The youth to adult pathway was highlighted for the numerous adverse characteristics such as longer periods of iterative homelessness, greater likelihood of mental illness, problematic substance use, associations with other people experiencing homelessness which increased personal safety risks, and ongoing experiences of primary homelessness.

Chapter Nine analysed the processes of leaving homelessness behind across the six pathways. Seven women on the domestic and family violence pathway, one from the eviction, and five from the youth to adult pathways had created a sustainable pathway out of homelessness at the time of interview. The characteristics which supported a sustainable exit from homelessness were reported as affordable and appropriate housing; engagement in education, employment, and training; healing and recovery from abuse and violence; being supported and encouraged; and developing skills and
knowledge in assessing personal safety. I detailed the experiences of the eight women who had transitioned to adult homelessness after escaping and noted that they continued to fare worse than any other group, with four still experiencing homelessness after escaping between 10 and 35 years before. This group’s experiences continued to be characterised by emotional and physical vulnerability, mental illness, substance misuse, social isolation, marginalisation, abuse, exploitation, and violence. The discussions in Chapter Nine drew attention answered research question 1.4 on pathways out of homelessness.

This summary provides a backdrop to the discussions that follow where I consider the implications of the empirical materials for policy, program, and service delivery processes starting with consideration of the policy context.

Policy context
As noted in the introduction, this project coincided with an unprecedented surge in homelessness policy, program, and service delivery activity. This created the conditions for significant growth in the homelessness system with $4.9 billion committed by the Commonwealth, State, and Territory governments under the National Partnership Agreement on Homelessness (Commonwealth of Australia, 2010c). This equates to a 55% increase in homelessness spending involving 1720 new social housing dwellings, improvements to 70,000 existing dwellings, enhancement and expansion of Indigenous housing, and a raft of other policy and programmatic responses across Australia (Commonwealth of Australia).

As these initiatives are new very little national or jurisdictional outcome or output data is available at the time of writing. A key national reporting mechanism is the “Progress and Action Plan for the Australian Government’s White Paper on Homelessness” (Commonwealth of Australia, 2010c). My reading of this document identified that it contains one reference to women’s homelessness which is framed around a domestic and family violence pathway into homelessness.
This singular characterisation of women’s homelessness led me to analyse other policy documents for references to women and I found similar results. For example, the Western Australian homelessness plan “Opening doors to address homelessness: Western Australia Homelessness State Plan 2010-2013” (Government of Western Australia, 2010b), makes four references to women, firstly noting that homelessness affects everyone - including women. There are then two references to women’s domestic and family violence pathways, and discussion of a new program for young women leaving out-of-home-care. One of the seven Perth metropolitan regional homelessness plans contains references to women by noting the limited housing options available to single women, and categorising this group’s needs as different to women on a domestic and family violence pathway (South West Metropolitan Regional Working Group on Homelessness, n.d.).

Apart from the aforementioned regional homelessness plan, these documents are silent on the issues faced by young, single, Indigenous, culturally and linguistically diverse women, and those with impaired mental health or substance misuse issues. Who then do descriptions of people who are the “most challenging to assist” (Commonwealth of Australia, 2010c, p. 12) refer to? These policy artefacts reiterate the common, incorrect, and blunt perspective that women’s homelessness is solely related to domestic and family violence.

Given this lack of attention to difference in women’s pathways into homelessness, I then examined the specialist homelessness service system within the new policy landscape. I base my discussion of this around the three homelessness policy objectives of “turning off the tap, improving and expanding services and breaking the cycle” (Commonwealth of Australia, 2008a, p. 15). As this is a Western Australian based study, I have also used the “Implementation Plan for National Partnership Agreement on Homelessness between the Commonwealth of Australia and Western Australia” (Commonwealth of Australia, n.d.-a) to inform my analysis. I start by exploring the strategies and activities aimed at breaking the cycle of homelessness.
Breaking the cycle of homelessness

A variety of responses are planned or being implemented in Western Australia to break the cycle of homelessness. One strategy involves the provision of housing for 33 applicants on the Department of Housing’s Priority Assistance list (Commonwealth of Australia, n.d.-a). Potentially, this initiative could have assisted three of the women involved in this study who experienced domestic and family violence (one youth to adult pathway and two on the domestic and family violence pathway). These three women spent lengthy periods waiting in refuges for housing allocations and prompt re-housing would have been beneficial.

This strategy raises the issue of public housing and single people, whom the Department of Housing acknowledge face significant discrimination in the private rental market (Government of Western Australia, 2012). Yet, the Department’s tacit practice (as discussed by women, raised by service provider stakeholders, and based on my own practice experience), is to preferentially allocate housing to people with children in their care. This means that it is highly unlikely that the women who already have the fewest housing options, such as those who escaped and transitioned to adult homelessness or those with problematic substance use, would be covered by this strategy.

Focussing on breaking the cycle of youth homelessness is the planned Oxford Foyer. This service for 98 young people aged 16-25 years will replicate European Foyer models by focussing on young people with low support needs who are required to engage in education and training as part of their accommodation contract (Anglicare WA, n.d.). Of the 21 young women on the youth pathways, three from the eviction, and two from the escape pathway may have benefited from a Foyer model.

It would appear that the other 16 women on the youth pathway would be categorised as having high-level support needs due to the manifestations of childhood trauma, mental illness, substance misuse, association with other young people experiencing homelessness, and other behaviours constructed as problematic. This says then that the emphasis on young people with low support needs in Foyers neglects the experiences of many young women, as found in this and other research, as abuse is a key
Another significant response aiming to break the cycle of homelessness is the provision of assertive outreach services to people experiencing primary homelessness. This has involved the introduction of the Street to Home program comprising three assertive outreach teams, a mental health outreach team (funded by the Health Department of WA), and teams of housing support workers (Government of Western Australia, 2010b). I have been unable to obtain aggregated output data on this program from the Western Australian Department for Child Protection. My request was refused on the basis that the information is categorised as “unpublished data” (Government of Western Australia, Department for Child Protection, personal communication 30 April 2012). Consequently, I approached the three agencies delivering the assertive outreach component of the program and two responded to my request for data on the gender of registered clients.

One Assertive Outreach Team reported working with nine women out of total of 92 clients and the other program has registered 26 women out of a total of 54 clients (Assertive Outreach Teams, personal communication, 14 May 2012). Data from the Victorian Street to Home program shows five out of the 45 clients were women (G. Johnson & Chamberlain, 2012). My request to the South Australian Street to Home program for similar data also failed to elicit a response. Given the high numbers of women in the second Western Australian program I spoke with the program Coordinator and she advised that the team had proactively targeted services such as Aboriginal street patrols and local government rangers based on the evidence that women were unlikely to be found in the inner-city and more visible locations. According to the Coordinator, council rangers made regular contact to report women living rough in suburban locations and this accounted for the high numbers of women they supported.

The women in this study who experienced primary homelessness were cautious and careful about their personal safety, choosing to conceal themselves from other people experiencing homelessness and the general public (Reeve et al., 2006). The women’s safety strategies are reflected in the feedback from the coordinator mentioned
in the previous paragraph in that rough living women are found in out-of-the-way places. This raises the question of how thoroughly women’s primary homelessness is conceptualised and understood by policy makers and subsequently responded to by the majority of Street to Home programs. There is no mention of women’s rough living strategies and experiences in relevant policy documents. It seems to me that gender blindness has permeated the policy, programmatic, and service delivery responses to rough living by relying on dominant constructions of rough living men with substance misuse issues.

All of the women who had longer term experiences of rough living had transitioned from youth to adult homelessness and most were from the escape pathway. These women expressed ambivalence in relation to engaging with service providers, noting that previous experiences of service delivery models, practitioner attitudes, and the experience of being judged had informed their choice to avoid in-depth engagement (Johnsen & Teixeira, 2010; Kryda & Compton, 2009). These women were described by stakeholder participants as ‘challenging and difficult’ due to the multiplicity of their experiences, numerous and unresolved adverse life events, and the ways in which they presented (Robinson & Searby, 2005). In current policy terms, the majority of these women would be considered to have “exceptionally complex needs” and to be “extremely difficult to work with due to multiple needs” (Commonwealth of Australia, n.d.-a). Yet no specific responses to them are evident in the new homelessness policy, program, or service delivery landscape.

Another programmatic response to break the cycle of homelessness proposed for Western Australia is the introduction of two Common Ground facilities. These facilities will be redeveloped from existing crisis accommodation services and utilise Common Ground principles (Commonwealth of Australia, n.d.-a). Original Common Ground projects were based on Housing First principles with the right to housing paramount and treatment or support considered a voluntary choice (Johnsen & Teixeira, 2010). International evidence suggests that strict alignment with Common Ground and Housing First principles creates housing stability and improved wellbeing, yet no documented material is available to assess how closely the Perth projects will mirror these principles.
I have been unable to locate evaluative data which examines how women fare in Common Ground facilities, but given the focus on people who have experienced primary homelessness it is probable that men are discursively constructed and conceptualised as forming a large part of the intended target group. However, features such as housing that is not tied to support or treatment and the emphasis on safety, security, and permanent tenure (Australian Common Ground Alliance, n.d.) reflect the goals of many women in this project, particularly those who transitioned to adult homelessness and had long histories of iterative homelessness, mental illness, substance misuse, violence, and trauma. I can only hope that the proposed Common Ground facilities are sensitive to, and inclusive of, women. I now consider early intervention strategies in Western Australia.

Early intervention and prevention

Early intervention and prevention activities in Western Australia are reported to include: financial counselling and assistance; intervention support for at risk private and public rental tenants; successful out-of-home-care transitions for young women; long-term support for people in housing once they leave homelessness; Safe at Home programs; and specialist workers supporting people to secure and maintain tenancies where problematic substance use and mental health issues occur (Commonwealth of Australia, n.d.-a). All of these strategies could have been helpful to women in this study, yet pathway distinctions can be traced. Two women who escaped had highly problematic experiences within out-of-home-care, and they would have benefited from sensitive attention to their experiences and issues.

Tenancy and homelessness support programs ostensibly could have benefited the majority of women across all pathways, but one fundamental issue is at stake, and that is whether the women would have accepted the support on offer and the suitability of the service delivery approach to the women’s needs and experiences. This is particularly the case when the support is framed as addressing mental illness, substance misuse, or problematic tenancy behaviours as this approach communicates pathology or deficit in the woman. This can reinforce negative views of self and a sense of hopelessness about
one’s capacity. I assess that half the women diagnosed with a mental illness would have been likely to accept ‘mental health’ support services, yet the other half rejected their diagnoses and framed their experiences and behaviours as understandable reactions to trauma (Read et al., 2004).

The women who came in on the domestic and family violence pathway were much more likely to be open to receiving support services and identified that these did not need to be formalised, rather they simply wanted to know “that someone is there if you need them” (Sandy). Of the women who had created a sustainable pathway out of homelessness, only one indicated that she needed and wanted formal, regular, and holistic support as she was contending with the ongoing abusive behaviour of her ex-partner, mental illness, and substance misuse issues.

Safe at Home programs would have potentially been useful responses for five women (three who came in on the domestic and family violence pathway and two who transitioned to adult homelessness). The other women who experienced domestic and family violence reported that the extent, type, and level of violence precluded them from remaining in their homes (McFerran, 2007; Thompson, 2007). I now consider the third policy prong of expanding and improving the homelessness system.

Expanding and improving responses

The final policy prong of expanding and improving the homelessness service delivery system is evident in the strategies already discussed in areas such as increasing housing supply, tenancy support services, Street to Home programs, the Foyer model, support for young women leaving out-of-home-care, and the planned Common Ground facilities.

Additionally, the Western Australian government is piloting models of support for people with “exceptionally complex needs” (Commonwealth of Australia, n.d.-a, p. 28). This pilot will assist 15 people who experience co-occurring issues such as “disability, mental health, drug and alcohol and the justice systems” (Commonwealth of Australia, n.d. p. 28). No further details have been released on this project but as my discussions indicate, many women could have benefited from this type of intensive, wrap-around
floating support, yet given the lack of documented detail and the pilot nature of the small scale projects it is not possible for me to draw any conclusions around applicability to the women in this study.

This discussion on the changes in the policy, program, and service delivery systems highlights that while the expanded and more responsive set of homelessness strategies can make a difference in the lives of people experiencing homelessness, the potential differences for the women in this study are not obvious or extensive. The women most neglected and invisible in these responses are those who transitioned to adult homelessness and those on the substance misuse pathway. These women were either taking tentative steps away from homelessness or were homeless at the time of interview. What then are these women’s needs?

**Trauma-informed responses**

This study identified that 33 out of 35 women had at least one experience of trauma. This suggests trauma-informed practice is highly relevant in responding to women’s homelessness. The types of trauma reported included childhood sexual and physical abuse, childhood neglect and abandonment, rape, domestic and family violence, other forms of physical violence, extensive grief, involuntarily removal of children, generational impacts of colonisation, and psychological abuse.

Trauma for some women had distinct cultural standpoints including civil war, coerced marriage, endemic and sanctioned violence against women, and cultural alienation. This points to the need for culturally competent and trauma-informed homelessness service delivery responses which are distinct from specialist trauma services (Robinson, 2010). I propose that trauma-informed responses have the potential to respond to the scepticism and unwillingness to engage with service providers that the women with long-term experiences of homelessness reported.

Effective trauma-informed service delivery models embody women-centred approaches and position the woman to take control of the helping process (Morrison, 2009). Such services focus on emotional, physical, cognitive, relational, and
environmental safety, with due consideration given to issues of trust (Herman, 1992). Trauma-informed policies, programs and services understand that trauma is “a defining and organizing experience that forms the core of an individual’s identity” (Harris & Fallott, 2011, p. 11, quoted in Hodas, 2006, p. 33). This means respectfully acknowledging the connections between ‘difficult’ or ‘challenging’ behaviours and functional trauma responses without further pathologising women (Morrison, 2009). It also means asking questions such as: ‘what happened to you?’, rather than ‘what is wrong with you?’

Relationships are central to trauma-informed service delivery, acting as containers for safe, trusting, and empowering interactions where women have first-time experiences of controlling and directing parts of their lives. Herman captures this in her influential work on trauma, gender, and politics by pointing out: “Trauma robs the victim of a sense of power and control; the guiding principle of recovery is to restore power and control to the survivor” (1992, p. 159). This reinforces the importance of professional relationships, rapport, trust, safety, quality interpersonal skills, and evidence informed knowledge for practice (which are discussed in more detail shortly).

Central and of the utmost importance is that trauma-informed programs, policies, and services actively avoid re-traumatising women (Morrison, 2009). Sadly, most of the women who remain vulnerable to, or continue to, experience homelessness provided examples of being re-traumatised as a result of service delivery actions or inactions (which are rooted in policy frameworks and program requirements). I now propose a broad framework to guide practice with these women.

**Responding to women with long-term homeless experiences**

The features I am about to propose are constitutive of a quality practice framework for responding to all types of women’s homelessness as detailed in the six pathways in this project. However, my focus is specifically on the needs of the 13 women who feared they may never permanently leave homelessness. Ten of these women transitioned from youth to adult homelessness, two entered on the substance misuse pathway, and one initially came in on the domestic and family violence pathway.
Given the different reasons for coming into homelessness, I do not describe the specific programmatic responses needed, as this requires comprehensive and evidenced discussions beyond the scope of this project. Instead, I focus on the service delivery approaches most likely to assist these women to reach their structural, individual agency, and relational dreams of stable and appropriate housing, loving non-abusive relationships, and the opportunity to make progress in their healing and recovery journeys. Focussing on the service delivery approach is particularly pertinent given these women are usually framed as ‘difficult’ and ‘resistant’ to service delivery responses and interventions (Gronda, 2009; G. Johnson et al., 2008).

I have chosen to focus my attention on this group of women because their experiences are mostly invisible in research, policy, program, and service delivery activities. This invisibility sits in the context of compounded experiences of multiple and complex adverse life events. My focus then is motivated by my commitment to social justice and transformation of the inequitable treatment of this group of women. I spoke of my personal and professional motivation, and commitment to address oppression and disadvantage in the first chapter of this thesis and it is fitting that I conclude by focussing on women who are mostly invisible, consistently silenced, and marginalised.

A universal need for every person who requires assistance as a result of homelessness is to be valued, deeply listened to, and to have compassionate understanding communicated to them (Maidment & Egan, 2004). This sounds simple, yet there are many barriers to women being heard and seen beyond their initial presentation in the homelessness service delivery context. To be able to hear and see a woman requires practitioners and agencies to commit to, and constantly enact, critical reflexivity (D'Cruz et al., 2007; K. Healy, 2005). This means that practitioners and agencies do not personalise what may appear to be a woman’s resistance to engaging in service delivery and instead adopt an open, curious, and interested stance, seeing each woman as unique with a distinct set of life experiences inside and outside of homelessness.

Critical reflexivity is aided by emotional literacy and facilitates self-awareness, regulation of feelings, insight, and interpretative capacities in practitioners (Beddoe &
Maidment, 2009; Weld & Appleton, 2008). Emotional literacy is especially pertinent in homelessness practice with women who present as withdrawn, traumatised, distressed, aggressive, or agitated. Compassion and understanding are central, particularly as the greatest challenge to empathy is to step into the shoes of individuals we least relate to and categorise as most different to ourselves (Boyatzis, 2006). Emotionally literate practitioners position diversity as an opportunity to learn rather than a threat to their worldview.

All participants in this project emphasised the centrality of the professional relationship within the experience of homelessness (Cree & Davis, 2007; Gronda, 2009; Rapp, 1998). A quality professional relationship is the conduit for processes of practice such as engagement, advocacy, assessment, collaborative planning, and intervention (Beddoe & Maidment, 2009). As Gronda (2009, p. 35) found in her research synthesis on case management in homelessness: "Structured tasks and case planning ... could only be effective if there was a good relationship with the client". This means that work with women is “continually improving ... responsive, timely, efficient ... effective ... flexible” (Government of Western Australia, 2010b, p. 5). The statement below draws attention to the importance of a professional working relationship:

It doesn’t really matter what intervention you use, it’s actually the relationship that counts. (SPY5)

Professional relationships create the conditions in which sustainable pathways out of homelessness can be built (FEANSTA, 2009; Gronda, 2009), and can contribute to a reduction in homelessness and improve other quality of life outcomes (Chinman, Rosenheck, & Lam, 2000; R. McCabe & Priebe, 2004). Practitioners who convey their belief and faith in a woman’s decision making ability exhibit a non-judgemental stance which is open and inquisitive (Maidment & Egan, 2004). These practitioners are sensitive to the possibility that their competence can create feelings of inadequacy and potentially de-skill women (Kidd & Davidson, 2007).

The specialist homelessness service delivery system has traditionally operated on grassroots knowledge, informed by philosophical frameworks and tacit knowledge developed through practice experience (Black & Gronda, 2011). My position is that this...
type of knowledge base is different to, yet just as valid as, theoretical and evidence informed knowledge. The uses of knowledge and evidence include guiding practice, promoting consistency and accountability, and inviting practitioners to justify their practice approaches and decisions (K. Healy, 2005).

Specific knowledge and evidence needed to work with the women in this study includes contemporary and critical approaches to attachment and developmental theories, trauma, domestic and family violence, substance misuse, motivation and change, mental health and mental illness, and specific approaches like strengths and person-centeredness. While women-centred and strengths approaches were regularly cited as models for practice in this study, there was evidence that these are applied mechanistically without deep understanding of the core ingredient – the need for practitioners to de-centre themselves in the helping process (Blundo, 2006).

Ending
To finish, I return to the research questions that guided this project and provide a response to them. The main research question was: Why do some women experience long-term recurrent homelessness and others do not? This was supported by sub-questions around the factors which created a pathway into homelessness, what happened while homeless, how women got out, and the practice and policy implications. These sub-questions were the focus of Chapters Five through Nine with practice and policy implications discussed in this concluding chapter.

The study has shown that the reasons for coming into, getting out of, or experiencing recurrent homelessness are varied across the six pathway types. The women who had created a sustainable pathway out of homelessness did so through: affordable and appropriate housing; engagement in education, employment, and training; healing and recovery from adverse events; expanded awareness of personal safety; and supportive relationships. These women were unlikely to have associated with other people experiencing homelessness and distanced themselves from the subject position of ‘homeless’. While their experiences impacted on their wellbeing, they were
hopeful about the future and detailed concrete goals and aspirations. Most of these women came into homelessness on a domestic and family violence pathway.

Those women most vulnerable to recurrent homelessness are the women who escaped abuse into homelessness at a young age. Their lives are characterised by long-term experiences of abuse and exploitation, trauma, mental illness, substance misuse, associations with homeless sub-cultural groups, and iterative homelessness. They are committed to leaving homelessness but consistently encounter structural, individual agency, and relational obstacles to achieving their dream. These are the women who cycle in and out of service delivery agencies. They are discursively constructed as ‘difficult’ and ‘resistant’ and are the very women who sparked my initial interest in this project. Framing these women as ‘difficult’ reflects an uninformed understanding of their lives, their tenacity, and their drive to reach their potential. These are the women who inspire me to contribute to a transformed policy and service delivery system that is acutely aware of and responsive to, their marginalisation, strengths, and wisdom.

I conclude the project with the words of one of these invisible and marginalised women. Belinda’s words haunt me for their simplicity, profundity, and sadness, and it is fitting that the final words in the project belong to an Aboriginal woman.

I’ve got nowhere to live anyway, normally on the street, the streets here. I’m still waiting for a place for myself. I just want my own privacy. Like a home for myself and all that there, see? (Belinda)
REFERENCES


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APPENDIX I - INTERVIEW GUIDE WOMEN

Participant Code
Date of iv
Location of iv
Pseudonym

1. Can you tell me about the first time you were without a place to stay?

<table>
<thead>
<tr>
<th>Questions</th>
<th>Prompts</th>
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<tbody>
<tr>
<td>The causes and contexts leading up to experience of homelessness</td>
<td>• Age</td>
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<td>• Emotions</td>
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<td>• Outcomes and consequences</td>
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<td></td>
<td>• Impact on self (identity, esteem, role, functioning, coping, resilience)</td>
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<tr>
<td></td>
<td>• What did other’s think/say/do?</td>
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<tr>
<td>The actual experience of homelessness</td>
<td>• How did other’s views or actions influence the woman?</td>
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<td>• Social support networks (who and their role/function)</td>
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<td>• Impact on work, study, training etc</td>
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<tr>
<td></td>
<td>• Domestic and family violence</td>
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<tr>
<td>What happened whilst homeless (how long did it last for, what happened</td>
<td>• Spirituality</td>
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<td>• Income</td>
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<td>• Physical and mental health</td>
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<td>• Substance use</td>
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<td>• Housing</td>
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<td>o Effectiveness,</td>
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<td>o Unmet needs</td>
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<td>o Experience of asking for help</td>
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<tr>
<td>The pathways out, or projected pathway out</td>
<td>• Discrimination</td>
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<td>What did you learn, or are you learning about yourself?</td>
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<td>What meanings do you make about this now?</td>
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<td>Children – impact on them; what you did, or are you doing to assist them</td>
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<td>Culture – how did this influence/shape/mediate?</td>
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</table>

2. Tell me about all the other times you have been without a place to stay since that first time

<table>
<thead>
<tr>
<th>Questions</th>
<th>Prompts</th>
</tr>
</thead>
<tbody>
<tr>
<td>The causes and contexts leading up to experience of homelessness</td>
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<td>• Outcomes and consequences</td>
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<td>• Impact on self (identity, esteem, role, functioning, coping, resilience)</td>
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<td>• What did other’s think/say/do?</td>
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<tr>
<td>The actual experience of homelessness</td>
<td>• How did other’s views or actions influence the woman?</td>
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<td>• Social support networks (who and their role/function)</td>
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<td>• Impact on work, study, training etc</td>
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<td>• Domestic and family violence</td>
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<td>What happened whilst homeless (how long did it last for, what happened</td>
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<tr>
<td>The pathways out</td>
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</tbody>
</table>
What did you learn about yourself?

- Spirituality
- Income
- Physical and mental health
- Substance use
- Housing
- Agency assistance
  - Requested,
  - Received
  - Effectiveness,
  - Unmet needs
  - Experience of asking for help
- Discrimination

What meanings do you make about this now?

- Children – impact on them; what you did to assist them, what concerned you
- Culture – how did this influence/shape/mediate?
- Comparing this to the way you coped with your first experience of being without a place to stay, what was different?

3. I am interested in the idea of turning points – for example people, events or actions you might have taken that turned your experience of being without a place to stay around – or made it different. Can you tell me about any events; people or things you did that were turning points in any of your experiences of being without a place to stay, or you predict will assist you?

<table>
<thead>
<tr>
<th>Age</th>
<th>Emotions</th>
<th>Outcomes, consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact on self, identity, esteem, confidence, resilience, coping, functioning</td>
<td>What did others think, say and do?</td>
<td>How did others’ views and actions impact on the woman?</td>
</tr>
<tr>
<td>Social support networks (who and their role/function)</td>
<td>Impact on work, study, training etc</td>
<td>Domestic and family violence</td>
</tr>
<tr>
<td>Spirituality</td>
<td>Income</td>
<td>Housing</td>
</tr>
<tr>
<td>Physical and mental health</td>
<td>Spirituality</td>
<td>Substance use</td>
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<tr>
<td>Agency assistance (requested, received, unmet needs, effectiveness, outcomes, experience of asking for help)</td>
<td>Discrimination</td>
<td></td>
</tr>
</tbody>
</table>

4. What has helped you avoid returning to that experience of being without a place to stay?
5. You have told me what has helped; can you now tell me what has not helped (you in your efforts to make sure you don't go back to not having a place to stay)?
6. Thinking about your children during these experiences, what have you noticed happened for them?

<table>
<thead>
<tr>
<th>Behavioural</th>
<th>Psychological/mental health</th>
<th>School/education</th>
</tr>
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<tbody>
<tr>
<td>Physical health</td>
<td>Relationships, socialising with other children</td>
<td>Siblings – relationships</td>
</tr>
<tr>
<td>Relationships with other family members</td>
<td>Resilience/coping abilities</td>
<td>Developmental issues</td>
</tr>
<tr>
<td>Culture (woman and children)</td>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

7. For those women whose children are/were not in their care – is there anything about your experience of not having a place to stay and your children not being in your care you think is important for me and others to know about?
8. From what you have shared with me, I have a sense you have had a rich, challenging and amazing journey to this point in your life. Considering your experience(s) of being without a place to stay, what are your hopes and dreams for your future in the next:

~ 269 ~
a. 3 months
b. 6 months
c. 12 months
d. 2 years and beyond?
9. What can you see or imagine could get in the way of your future vision? (Unpack any changes that woman sees might need to happen.)
10. Demographics
   a. Date of birth
   b. Country of birth
   c. Cultural identity
   d. Do you identify as Aboriginal or Torres Strait Islander?
   e. Languages spoken

   a. Relationship status (current and for each experience of homelessness)
      - Partnered
      - Single
      - Divorced/separated
      - Other

   b. Children (current and for each experience of homelessness)
      
      | Child 1 | Child 2 | Child 3 | Child 4 | Child 5 | Child 6 |
      |--------|--------|--------|--------|--------|--------|
      | Age    |        |        |        |        |        |
      | Care of woman | | | | | |
      | Care of State | | | | | |
      | Other care arrangement (specify) | | | | | |

c. Type of current housing and for each experience of homelessness
   - Public rental
   - Private rental
   - Own home (paying mortgage or owned)
   - Community housing
   - SAAP or other crisis accommodation
   - SAAP or other medium-term accommodation
   - Other supported housing
   - Living rent/board free
   - Boarding
   - Other

d. How long in current housing and each experience of homelessness?

e. Housing history in last 12 months:
   - Type of housing
   - If SAAP/crisis/supported how did you come to be in this accommodation?
   - Who have you been living within this time?
   - Length of time in each housing type
• Any other information?

f. Income status/type (current and for each experience of homelessness)
   • Centrelink – type of payment
   • Wages (own)
   • Wages (ex or current partner's)
   • Other government income support (type)
   • No income
   • Other

g. If receiving Centrelink benefits:
   • Are you required to undertake any 'Participation Activities'?
   • What is required of you (number of hours, type of activity, transport and travel arrangements, childcare arrangements etc)
   • What is your view on these requirements?

h. Work, employment, training, education, volunteering (current and for each experience of homelessness)
   • Can you describe your activities in these areas?
   • Are you currently looking for work
   • How long have you been looking for work
   • Are you experiencing any difficulties in these areas?

10. We have pretty much finished with the questions I have. Can I ask you:
    • Is there anything else that you think it is important for me and others to know about?
    • What key messages do you want to get across to others (i.e. other women who have had similar experiences; service providers and policy makers)?
    • What it has been like for you talk about these issues?
    • Do you have any questions?
# Appendix 2 - Interview Guide Stakeholders

<table>
<thead>
<tr>
<th>Date of interview</th>
<th>Agency Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Representative name:</td>
<td>Preferred pseudonym</td>
</tr>
<tr>
<td>Agency Type:</td>
<td>Main focus of agency’s work:</td>
</tr>
<tr>
<td>Client target group</td>
<td>Percentage of women experiencing homelessness in overall client group:</td>
</tr>
</tbody>
</table>

1. If someone not involved in homelessness or human services asked you about women experiencing homelessness, what would you say about….

   - The women and how they present to your agency
   - Their circumstances
   - The usual reasons why they come to your agency
   - Why become homeless
   - The support or help the women need
   - What a sustainable pathway out of homelessness looks like
   - What service providers do to help or hinder the women (including creating a pathway out)
   - What policy makers, politicians or funding bodies do to help or hinder the women (including creating a pathway out)
   - What the broader community can do to help or hinder the women (including creating a pathway out)
   - Why some women achieve a sustainable pathway and others do not, continuing to experience homelessness

2. The following are comments made by women in this study about positive, affirming and helpful responses they received from individual workers and agencies. Tell me what these comments suggest about useful models and approaches to women who experience homelessness.

<table>
<thead>
<tr>
<th>Approach</th>
<th>The role they played</th>
<th>Believing in me, valuing me</th>
<th>What they did</th>
</tr>
</thead>
<tbody>
<tr>
<td>Down to earth, approachable</td>
<td>I would not have got through this without them</td>
<td>Believing in me – that’s something I’ve seldom had</td>
<td>The told me other women experience this and that helped me</td>
</tr>
<tr>
<td>Acceptance</td>
<td>They knew they were important to me – I was totally alone</td>
<td>They saw who I really was</td>
<td>Someone batting for me behind the scenes</td>
</tr>
<tr>
<td>I could tell her anything</td>
<td>She was there when I needed her, and she knew when to step back and let me try it on own</td>
<td>They knew I was capable even before I recognised it.</td>
<td>Culturally sensitive, flexible and aware</td>
</tr>
<tr>
<td>I was free to be myself</td>
<td>Treating me as a person – respecting me; not treating me like a child</td>
<td>They knew I would get through it.</td>
<td></td>
</tr>
</tbody>
</table>
3. The following are statements and themes from the women are about negative and unhelpful experiences within services. I am interested in your response to these:

<table>
<thead>
<tr>
<th>The approach</th>
<th>Information</th>
<th>Understanding</th>
<th>Conditions</th>
<th>Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotionally cold; didn't engage us.</td>
<td>Insufficient or misleading information left me scared.</td>
<td>I stood in the court and told them he beat the crap out of my son and they said what has he done to you... something relevant something recent that’s happened? I was totally humiliated – he (partner) walked out and laughed.</td>
<td>The condition of the place was horrible – it stunk like glue.</td>
<td>Breaching my confidentiality; left my notes on the desk and someone else read them. Racist.</td>
</tr>
<tr>
<td>Seeming like they didn’t care about me, they just left you there.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Being treated like I was a joke.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>The only support was from other clients; not the workers.</td>
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</table>

4. Some of the women in this study have expressed strong views about being self reliant. Once woman referred to this as “my independent self” and spoke of it in the context of workers expecting that she meet them a few times a week to discuss her goals, activities, and progress towards moving out of the service into other accommodation. She saw this as an impingement on her ability to look after herself. She also found it hard to accept help from others because she had been let down so much in her life. This woman exemplifies many women I have worked with over the years who appear to be ‘resistant’ and ‘reluctant’. They are often difficult to engage, and at times quite challenging in their behaviours. This “independent self” or reluctant presentation is common to women in this study who have long, protracted experiences of homelessness, and they have had a lot of contact with services over an extended period of time (for many of the women since childhood).

a. Does this description resonate with you and the type of women you work with?

b. If it does, tell me about your experience of these women, how you view them, and how you manage to work with them.

c. Are there women like this that have managed to build a sustainable pathway out of homelessness? If so, tell me about their journeys.

5. The following quotes come from women in the study (with homelessness experiences between 10 and 23 years) who are commenting on the role of workers and services in creating a sustainable pathway out of homelessness. The three quotes address different themes and I ask that you talk me through your responses to the quotes and themes.
a. The approach of the worker and how this facilitated trust and rapport  
b. The impact of having many different workers and needing to tell one’s story again  
c. The change process and the ways in which workers can/cannot impact upon this – rather the woman decides when it is time to change.

There were so many services... and... some better than others. It all depended on the worker. Not necessarily... the aim or... mission statement, none of those things. It depended very much on the worker, and my attachment or what I felt from the worker.

Oh no... don't get me another case worker because I don't want to train another one.

No one could stop what was going on in my head, it was my journey and I had to do my journey, and obviously that’s where my journey went to, until I got sick of being on that journey. I think you have to want to change... no one can change a situation for you, but you. You’ve got to be tired of not going anywhere.

6. This study has identified at least three types or categories of women who experience homelessness, and these are:
   a. Young women who leave or are ‘kicked out’ of home and who articulate a strong self reliance discourse. These young women do not expect to experience homelessness again in their lives.  
   b. Women with children who experience homelessness because of the choices of another (i.e. domestic and family violence and subsequent homelessness).  
   c. Women with/without children who have high level needs and experience multiple complex issues. These women tend to have long histories of homelessness and are either homeless or precariously housed at the time of being involved in this project.

7. How do you think policy, funding and programs can accommodate and respond to the variety of homelessness situations?
8. What if any changes have you noticed in women who experience homelessness in the past 12 months, 2 years, 5 years?
9. What is your dream model or response that would facilitate women’s sustainable pathways out of homelessness?
10. Is there anything else you think I should know?
**APPENDIX 3 - CONSENT FORM**

**RMIT HUMAN RESEARCH ETHICS COMMITTEE**

*Prescribed Consent Form for Persons Participating In Research Projects Involving Interviews, Questionnaires, Focus Groups or Disclosure of Personal Information*

**PORTFOLIO OF**

**SCHOOL/CENTRE OF**

Design and Social Context

Social Science and Planning

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Name of participant:

Project Title:

Revolving or evolving doors: What promotes sustainable pathways out of homelessness for women?

Name(s) of investigators:

Robyn Martin

Phone: 0414 413 671 or (08) 9337 6475

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1. I have received a statement explaining the interview(s) and tasks involved in this project.
2. I consent to participate in the above project, the particulars of which - including details of the interviews and tasks - have been explained to me.
3. I authorise the investigator to interview me or administer a questionnaire.
4. I give my permission to be audio taped  
   - Yes  
   - No
5. I give my permission for my name or identity to be used  
   - Yes  
   - No
6. I acknowledge that:
   (a) Having read the Plain Language Statement, I agree to the general purpose, methods and demands of the study.
   (b) I have been informed that I am free to withdraw from the project at any time and to withdraw any unprocessed data previously supplied.
   (c) The project is for the purpose of research and/or teaching. It may not be of direct benefit to me.
   (d) The privacy of the information I provide will be safeguarded. However should information of a private nature need to be disclosed for moral, clinical or legal reasons, I will be given an opportunity to negotiate the terms of this disclosure.
   (e) The security of the research data is assured during and after completion of the study. The data collected during the study may be published, and a report of the project outcomes will be provided to me if I elect to receive one. Any information which may be used to identify me will not be used unless I have given my permission (see point 5).

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**Participant’s Consent**

<table>
<thead>
<tr>
<th>Name: Participant</th>
<th>Date:</th>
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</table>

<table>
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<tr>
<th>Name: Witness</th>
<th>Date:</th>
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</table>

Participants should be given a photocopy of this consent form after it has been signed.

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Any complaints about your participation in this project may be directed to the Secretary, RMIT Human Research Ethics Committee, University Secretariat, RMIT, GPO Box 2476V, Melbourne, 3001. The telephone number is (03) 9925 1745. Details of the complaints procedure are available from: www.rmit.edu.au/council/hrec

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RMIT HUMAN RESEARCH ETHICS COMMITTEE

Prescribed Consent Form For Persons Participating In Research Projects Involving Interviews, Questionnaires, Focus Groups or Disclosure of Personal Information

PORTFOLIO OF Design and Social Context

SCHOOL/CENTRE OF Social Science and Planning

Name of participant: ____________________________

Project Title: Revolving or evolving doors: What promotes sustainable pathways out of homelessness for women?

Name(s) of investigator: Robyn Martin

Phone: 0414 413 671 or (08) 9337 6475

In the event that Robyn Martin cannot locate me because I have moved or changed phone numbers, I give permission for her to contact any of the people listed below and obtain my new contact details:

Name: _____________________________________________

Contact Number/Address______________________________

Name: _____________________________________________

Contact Number/Address______________________________

Name: _____________________________________________

Contact Number/Address______________________________

Name: _____________________________________________

Contact Number/Address______________________________

Participant’s Consent

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Participant</td>
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</tr>
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</table>

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Witness</td>
<td></td>
</tr>
</tbody>
</table>

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