

What Works: Research Impact and Homelessness

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Editorial – Introduction to the Special Issue

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Why Now?

The origins of this ‘What Works’ special issue of the European Journal of Homelessness goes back a few years, when I set up the Centre for Homelessness Impact to take on the challenge of improving our understanding of what works in a systematic manner. The creation of the Centre, and the stark realisation that much is known about how to address homelessness, but much remains unknown, led to the decision to produce a special edition of the journal which would highlight the evaluation and data work already being done across Europe and beyond, and put forward a plan to help accelerate impact.

For me and my co-editors, Eoin O’Sullivan and Hannah Green, this volume is a celebration of the best examples of robust evaluation and ‘knowledge into practice’ examples in the Global North. They offer a blueprint for how we might go about righting the ship by outlining how we can

improve how homelessness is tackled, before exploring various ‘what works’ methodologies and themes that will enable us to address it. It brings together disparate voices to unite behind a movement for evidence in homelessness, and hopes to inspire the next generation of researchers to specialise in rigorous evaluation and synthesis methods.

We hope that readers will find, as we do, the mix of the more accessible and more technical contributions stimulating. We are grateful to each and all contributors.

Why a New Approach is Needed

This is a decisive moment for homelessness in Europe. In June 2021, the Portuguese Presidency of the European Commission negotiated a Declaration on the European Platform on Combating Homelessness. The declaration commits all 27 Member States of the European Union to ending homelessness by 2030, with the provision of permanent housing identified as the primary solution to ending homelessness (Portuguese Presidency of the Council of the European Union 2021, 2021).

There is an opportunity to make limited resources go further and improve outcomes, by focusing on what works, pushing for greater experimentation and creativity, and changing the culture and behaviours around the use of evidence and data to drive continual improvements.

European countries have long been admired for the housing rights they give to people. But despite all this great work and significant investment in solving homelessness over the years, we are not making rapid enough progress in addressing and preventing homelessness. The ongoing COVID-19 pandemic is making a challenging situation even worse. We lack proven, cost-effective, scalable strategies. Our fiscal predicaments may also be stifling innovation and creativity.

The Centre for Homelessness Impact (CHI) envisions a future in which rigorous evidence is created efficiently, as a routine part of government operations, and used to drive improvements to policies and services aimed at helping people access and maintain stable, affordable housing. Local and national governments across Europe have already taken many important steps towards accomplishing this vision, but much work remains.

So what more can be done? Based on our work at the CHI, three strategies offer the best chance of accelerating progress:

- 1 Build the evidence of the policies, practices, and programmes that achieve the most effective results to improve the lives of people who are homeless or at risk.
- 2 Build the capacity needed to act promptly on the best knowledge available to improve decisions and help limited resources go further.
- 3 Use evidence-led communications to change the conversation around homelessness, challenge stereotypes, and make sure that homelessness is not a defining factor in anyone’s life.

The underlying argument is that to succeed we need a new ‘what works’ movement in homelessness (Teixeira, 2020). The movement is about using evidence and reason to figure out what works and what does not, allowing us to reject the dangerous half-truths that can pass for wisdom. It advocates acting promptly on the best available knowledge, while being aware of the limits of what we know. Also important is using reliable evidence to craft campaigns and communications that get the public to change how they think and talk about homelessness, to create long-lasting change.

Why are the ideas of ‘what works’ in homelessness important?¹

The 19th-century French physician Pierre-Charles-Alexandre Louis put a lot of leeches out of business. For centuries before his research, doctors believed that removing a few pints of a person’s blood would help cure all types of ailments. In the 1830s, doubting bloodletting’s alleged benefits, Louis carried out one of the first clinical trials. He compared the outcomes of 41 pneumonia victims who had undergone early and aggressive bloodletting to the outcomes of 36 pneumonia victims who had not. The results were clear: 44% of the bled patients subsequently died, compared to only 25% of the patients who remained leech-free (Morabia, 2006). Louis’ discovery helped convince physicians to abandon bloodletting and his study became a touchstone of the modern evidence-based medicine movement, which trains physicians to conduct, evaluate, and act according to research.

Today, as then, the experimental, empirical approach matters. It matters because many attempts to do good fail – even those with a high profile. Scared Straight is a good example of misguided intuition passing for wisdom: this is a programme that originated in the USA which takes children who have committed misdemeanours to visit prisons and meet inmates to confront their likely future if they continue to offend (IMDB, nd). The concept proved popular not just as a social programme but as entertainment; it was adapted for both an acclaimed documentary and a TV show on the A&E Network and Netflix, which broke ratings records for the network upon its premiere. There is just one problem with Scared Straight: multiple studies have found that the programme actually increases rates of offending among its participants (Washington State Institute for Public Policy, 2004). More recently, teenage pregnancy prevention programmes which use ‘magic dolls’ to simulate the needs of a new baby have been found not to work, according to a previous study (Brinkman, 2016). The 1000 teenage girls who took part in programmes in Western Australia were more likely to become pregnant than girls who did not. Similar programmes are still used in schools in 89 countries, including the USA.

Research shows that many attempts to do good are like Scared Straight and ‘Magic Dolls’: when tested with rigorous randomised controlled trials, nearly 80% of individual interventions

1. This section draws on the section with the same title in Teixeira, L. (ed.) (2020) *Using Evidence to End Homelessness* (Bristol: Policy Press).
2. But see the latest 80 000 blog on this topic: <https://80000hours.org/articles/effective-socialprogram/#what-can-we-conclude-from-all-the-above>, [accessed 15 April 2019].

do not work, and between 1-10% have negative effects.² But while many attempts to do good fail, some succeed, and the best examples of success are exceptional. Consider the evidence-informed provision of bed nets in sub-Saharan Africa, where malaria is one of the leading killers of children. Insecticide-treated nets (LLINs) effectively prevent deaths and many other non-fatal cases of malaria. They are also relatively inexpensive: about \$5 per net (GiveWell, 2021). The charity evaluator GiveWell estimates that a donation of \$7 500 to the Against Malaria Foundation will save someone's life.

In other areas of policy, giving cash grants to people living in poverty in low-income countries has the strongest track record of success. Cash transfers – directly transferring money to poor individuals – are a priority programme of GiveWell as they allow individuals to purchase the things most necessary to them.

Strong evidence indicates that cash transfers lead recipients to spend more on their basic needs (such as food) and may allow recipients to make investments with high returns, with no evidence of large increases in spending on items like alcohol or cigarettes, in spite of what many unhelpful stereotypes would suggest (GiveWell, 2012). Homelessness has yet to find its direct cash transfers or insecticide-treated mosquito nets. People are not aware of the best ways to help end homelessness for good, and so miss opportunities to make a tremendous difference. No wonder then that in lieu of evidence, leaders often base their decisions on dearly-held ideologies, the actions of others, and strategies they have used in the past. As a result, we inadvertently risk causing harm in the manner of Louis' bloodletting doctors.

These challenges are not unique to homelessness, of course. We now take it for granted that when our doctor prescribes a treatment, it has good evidence behind it. Yet the body that assembles that evidence for medicine, NICE, only just passed its 20th birthday. The comparable bodies for education and policing are less than a decade old. For many areas of policy and practice, including homelessness, the journey is only just beginning.

What has been the journey in homelessness?

Many things have changed for the better since I first started working in homelessness 13 years ago. We have a much richer understanding of the causes and consequences of homelessness and the need to address its root causes instead of its symptoms (Ministry of Housing, Communities and Local Government, 2019). The types of services offered to individuals and families experiencing housing instability have changed for the better in the past few decades. For example, there has been a shift towards a model of support that prioritises immediate housing and away from the traditional model of requiring preconditions, such as sobriety and employment, before obtaining permanent housing (MHCLG, 2019). Evidence played an important role in building support for this shift, with several randomised evaluations showing that a Housing First approach could more effectively house people experiencing chronic homelessness than hostel-based approaches.³

3. The next challenge is to ensure that the intervention, in particular given how costly it is, is targeted effectively. There is a danger that, unless local need is understood, more units than strictly required are made available, potentially diverting resources from other promising interventions such as Rapid Rehousing.

Evidence also played a key role in the move from a crisis-driven approach to prevention to a more strategic and targeted methodology. In the UK, post-devolution Scotland took the bold step of strengthening its statutory safety net for those affected by homelessness, culminating in the ambitious commitment to house all those deemed to be homeless (The Homelessness [Abolition of Priority Need Test] [Scotland], 2012). More recently it took the decision to provide people with support from their local authority regardless of whether they have a local connection with them or are intentionally homeless (Scottish Government, 2019). In England and Wales, local authorities now have a duty to help prevent homelessness regardless of a person's level of priority, and the period during which a person is deemed to be 'threatened with homelessness' has been extended from 28 to 56 days. In Finland, the introduction of a new evidence-led strategy in 2008 resulted in a significant decrease in long-term homelessness at a time when numbers were rising in most other European countries.

Also welcome is the increase in the number of rigorous studies on homelessness in recent years. On average, just four studies were published per year from 2000 to 2009, but since 2010 that has increased to nearly 10 per year (CHI, 2018). The Centre for Homelessness Impact (CHI) Evidence and Gap Map of effectiveness studies demonstrates that there is now an evidence base on which to build an infrastructure for evidence-based policies (CHI Evidence and Gap Maps, 2021). With the exception of legislation, there are studies we can learn from in most outcome areas, even if significant gaps remain.⁴

According to a recent survey, 65% of the public think decisions about homelessness should be mostly based on evidence, rather than just views about what is the right thing to do. A majority would like to see important decisions made based upon evidence of what works as well as the views of those affected by or at risk of homelessness. These featured ahead of expert's views, the cost/amount of money needed, and public opinion itself (Ipsos MORI, 2020).

However, you only need to cast a glance at CHI's Evidence and Gap Maps to see that something is off as far as the European research tradition is concerned: while in North America a large number of impact evaluations exist, in Europe researchers have tended to be concerned with more qualitative and conceptual explorations, with profound implications for our ability to answer in a rigorous manner questions about effectiveness and value for money. Very few initiatives have been subject to rigorous evaluation – given the 80% rule (that most interventions turn out to be ineffective when subjected to rigorous scrutiny), this should be a matter of serious concern.

It is time to approach one of the seemingly intractable challenges of our time in a new way. If we fail to do this, then we risk looking unscientific when compared with other fields, further losing the public's trust and, most importantly, failing the people we exist to help.

4. The largest concentrations of studies are on health and social care interventions, followed by accommodation-based approaches.

Where Do We Go From Here and Overview of the Special Edition

After nearly a decade and a half of building links between evidence, policy, and practice in homelessness, I have come to understand that we are in the business of capturing hearts and minds. All of us who aim to increase the use of evidence in homelessness and elsewhere should avoid assuming that the magic impact fairy will take our research and turn it into change on the frontline or in policy (Fiennes, 2020). Key to this is to ask what problems decision makers are trying to solve, building demand for more data-driven decision making, and not overselling the availability of evidence-based practices or underestimating what it takes to scale them.

But if we want to gain momentum for evidence-based approaches with a view to ending homelessness for good, we also need to start routinely testing the effectiveness of intervention while taking a bird's eye view of the issue. Only then can we figure out how to achieve breakthrough results at population level and use data to drive improvement on an ongoing basis.

Since its inception in May 2018, the CHI has been reflecting on these questions. Our answer is threefold:

- 1 Build the evidence of the policies, practices, and programmes that achieve the most effective results to improve the lives of people who are homeless or at risk. Policymakers and practitioners must have good information on which to base their decisions about improving the viability and effectiveness of programmes and policies. Today, there is surprisingly little rigorous research on homelessness policy and programmes (Culhane et al., 2020). Examples of evaluations using experimental and quasi-experimental methods, such as the trials discussed in Chapters 2 and 3 of this special issue, are still rare. Of the 562 studies in CHI's Evidence and Gap Map of Effectiveness studies, 8-9% are from North America and only around 15% of the total (87 studies) are from Europe. These shortcomings need to be addressed: we need more experiments to identify which interventions are effective and cost-effective in addressing homelessness, and we also need more – and better – systematic syntheses of those findings.

We also need to systematically reorient resources to the most promising interventions and drive prevention upstream. For example, work by the CHI shows local authorities in England are spending an average of £12 500 per year/person or £240 per week/person in Temporary Accommodation (TA). CHI estimates that moving 25% of temporarily accommodated households in the 15 local authorities with the highest rates of TA use to 'settled' Private Rented Sector with support could produce savings of up to £500 million over a 5-year period (CHI Analysis, 2020).

Trialling promising interventions, such as family mediation and other prevention activities, in a range of UK settings would both enrich our domestic evidence base and help identify which variations of these interventions would allow a more effective and cost-effective response to the needs of particular parts of the homeless population. Crucially, to stop the flow of people who experience homelessness, we also need to address the larger, systemic

housing affordability issues, and ensure welfare support and wages are adequate.

In the first section of this special edition, Tim Aubry and colleagues share their reflections on how insights from major studies they led challenged prevailing assumptions about how best to support people with long term experiences of homelessness in Canada and France. While Juha Kaakinen and Saija Turunen outline the successes and challenges of introducing Housing First at scale in Finland.

This section also addresses systems issues, reminding us that efforts to end homelessness for good will be fruitless unless we create housing systems that leave no one behind, or see homelessness through a public health prism. Kelly Doran and Adam Tinson set out lessons learned from the COVID-19 pandemic, and Rita Ranmal and colleagues explore how health inequalities intersect with housing and homelessness. Also in this section, Hal Pawson explores housing trends in Europe and Australia, and how they intersect with homelessness levels, while Danny Dorling reflects on the use of evidence to tackle homelessness and housing affordability issues. Guillermo Rodriguez-Guzman and colleagues provide an overview of the first ever randomised controlled trials in the field in the UK, covering areas as diverse as cash transfers, out of borough placements, and landlord behaviour. Jonathan Roberts explores how social entrepreneurs and philanthropists can make the most difference and Dennis Culhane and Gary Painter examine the role of social investment in ending homelessness.

- 2 Build the data infrastructure and capacity needed to act promptly on the best knowledge available to improve decisions and help limited resources go further. Existing data-collection arrangements limit the sector's ability to detect the incidence and duration of homelessness – for example, in the identification and monitoring of people sleeping out or 'sofa-surfing'. Take, for example, how the COVID-19 pandemic brought into focus the scale of street homelessness in many European countries. In England, the numbers accommodated under Everyone In exceeded 33 000 between late March and the end of November last year – suggesting that the street homelessness population over a full year vastly exceeds the Government's annual 'snapshot' headcount statistic (MHCLG, 2021). But outside of London (where the CHAIN database operates alongside the annual headcount), there is no robust approach to data collection that allows comprehensive monitoring of and insight into this larger street based sleeping population – in aggregate, and into how it changes on a daily basis through inflows and outflows. Also, existing approaches to the analysis of data sets provide decision-makers with little ability to predict who is at risk of homelessness, limiting the ability of statutory and voluntary agencies to take preventative action. Encouraging initiatives are underway to address aspects of this agenda. But right now, the sector does not know enough about the

problem – who is homeless or at risk of becoming homeless, why, and for how long. In the UK, the Office for National Statistics (ONS) and CHI are taking steps to improve data collection and data architecture in the homelessness sector. A new set of indicators has been created that, for the first time, bring together all the data needed to understand success and track progress towards ending homelessness for good (Share Homelessness Indicators Platform, nd). The reporting platform could be used to support the European work plan, and the Institute for Global Homelessness and UN-Habitat are working hard to improve the state of global homelessness data as described by Louise Casey and Lydia Stazen. But local areas and communities also need help using data and data analysis more effectively – as a management tool to generate innovation, systems reengineering, and continuous improvement. Local authorities across the UK produce a large volume of performance data, but many of the performance metrics are highly imperfect (e.g. focusing on outputs rather than outcomes), and find it very challenging to go beyond performance reporting to use data to drive performance improvement. CHI's What Works Community (WWC) is helping build the required capacity where it is needed most: in local areas throughout the UK. Focusing on skill-building at the local level, identifying and implementing sentinel practices that can be replicated, and sharing and translating successes and challenges across the UK, the WWC is creating a new way of working for local areas in the UK that values and uses evidence to address and prevent homelessness in both the short and long-term.

In the second section of this volume, Stephen Aldridge sets out how improvements to data and evaluation have influenced policy in the UK and elsewhere, and Emily Tweed and Ian Thomas explore how data linkage is being used to reveal new insights on the root causes of homelessness in Scotland and Wales. Evelyn Dyb and colleagues set out how homeless registrations are being used in the Nordic countries to address homelessness more effectively. Also in this part of the journal, Dame Louise Casey and Lydia Stazen provide an overview of the Global Homelessness Data initiative, which is trying to answer the question "how many people are homeless around the world?" for the first time.

- 3 Use evidence-led communications to change the conversation around homelessness, challenge stereotypes, and make sure that homelessness is not a defining factor in anyone's life. Evidence shows how the public see the 'typical' homeless person as an outsider or victim – someone whose circumstances place them in a separate category of society. When asked about their expectations for the future, most see homelessness as an impossible problem that personal actions can do very little to solve. This fundamental misconception may be preventing our work from progressing (Teixeira, 2017). Sadly, communications from sector organisations and the media are supporting these

paradigms and likely increasing the public's sense of fatalism about homelessness. Why? Because we tend to give weight to stories emphasising the depth and scope of the problem, headlining its prevalence and individual impact, while omitting evidence-informed solutions. By doing so we are encouraging the public to believe that homelessness is just an inevitable part of modern society (Teixeira, 2017).

The good news is that we have the power to change this by telling different kinds of stories. Evidence suggests that people are able to think in more productive ways about homelessness when presented with a systems view on the subject. Currently, only one-third of the sector's communications applies a systems perspective on homelessness, suggesting that we are missing valuable opportunities to illustrate consequences and solutions, and to show how wider society benefits from collective action.

We can improve how we communicate about homelessness by following simple rules, e.g. by challenging the public's image of a 'typical' homeless person (including avoiding images that reinforce the public's stereotypes of homelessness), or discussing the social and economic conditions that shape people's experiences, and avoid talking about personal choices and motivation (it may seem like a good idea but evidence shows this strategy backfires). We should also talk about how systems are designed – and can be redesigned. The public should understand that the current situation is largely due to policy decisions and that we can change it by making different choices.

If we follow these guidelines and make sure we tell stories that are concrete, collective, causal, conceivable, and credible, then our communications will be fuller, more systems-oriented, and a lot more likely to build public support, both for direct services and social and policy change. Just as importantly, it will ensure we are not reinforcing unhelpful attitudes and stereotypes. Simply suggesting that somehow communication is 'the answer' to ending homelessness is of course wrong. But strategic communication – when approached thoughtfully, informed by data, and delivered with precision – is an important part of the solution.

In the third part of this special issue we turn to the role of first-hand experiences of homelessness and what works for young people and children in care. Hannah Green reviews what works in engaging people with experiences of homelessness in service design, delivery, and evaluation, while Steve Gaetz and colleagues set out how international collaboration influenced how prevention in youth homelessness is understood in Canada and Wales. Michael Sanders and colleagues address the perceptions of children's social care in England, and we conclude with a paper from Matt Peacock on the role of the arts in preventing or ending homelessness.

Moving Forward

Homelessness is one of the most tragic forms of poverty and it blights rich countries as much as poor ones. A new approach is needed that includes a commitment to improving people's lives through data and evidence as its centrepiece. A huge amount of commitment and effort has only taken us so far until now. And history shows—whether dramatically reducing smoking, alcohol-related traffic fatalities, or deaths from malaria—that bold goals seem impossible until they aren't.

At the CHI and the European Observatory on Homelessness, we make the data and evidence on homelessness more accessible, and support that evidence to be applied in practice. But in this moment of great change, we are also aiming to mobilise a growing chorus of 'what works' champions – from local councils, to central government, and universities across Europe – to ensure that, as part of aiming to end homelessness for good, we use this opportunity to understand how to end it effectively, how to end it sustainably, and, most importantly, how to end it with evidence. Join us.⁵

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5. To sign up to the End It With Evidence campaign, visit <https://www.homelessnessimpact.org/end-it-with-evidence>.

References

Brinkman, S. (2016) Efficacy of Infant Simulator Programmes to Prevent Teenage Pregnancy: A School-Based Cluster Randomised Controlled Trial in Western Australia, *The Lancet* 388(10057) pp.2264-2271.

CHI (2018) Evidence and Gap Map of Homelessness: Effectiveness Studies (London: CHI). [Accessed 21 September 2021].

CHI Analysis (2020) See Housing Calculator. Available at: <https://www.homelessnessimpact.org/housing-costs-calculator> [Accessed: 20 September 2021].

CHI Evidence and Gap Maps: <https://www.homelessnessimpact.org/gap-maps> [Accessed 16 October 2021].

Culhane, D., Fitzpatrick, S., and Treglia, D. (2020) Contrasting Traditions in Research between the UK and US, in L. Teixeira and J. Cartwright (Eds.) *Using Evidence to End Homelessness*, pp.99-124. (Bristol: Policy Press).

Fiennes, C. (2020) Charities and Donors in Evidence Ecosystems, in L. Teixeira and J. Cartwright (Eds.) *Using Evidence to End Homelessness*, pp.197-215 (Bristol: Policy Press).

Fitzpatrick, S., Bramley, G., Watts, B., and Wood, J. (nd) Homelessness Monitor Series (London: Crisis). Available at: <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/homelessness-monitor/>. [Accessed 23 October 2018].

GiveWell (2012) Cash Transfers. Available at: <https://www.givewell.org/international/technical/programs/cash-transfers>. [Accessed 15 March 2019].

GiveWell (2021) Against Malaria Foundation. Available at: <https://www.givewell.org/charities/amf>. [Accessed 28 May 2018].

IMDB (nd) Scared Straight 1978. Available at: <https://www.imdb.com/title/tt0078205/>. [Accessed 10 July 2020].

Ipsos MORI (2020) Homelessness and Evidence (London: CHI). Available at: <https://www.homelessnessimpact.org/post/one-in-six-believe-that-they-could-be-affected-by-homelessness>. [Accessed 7 October 2021].

MHCLG (2019) Homelessness Prevention Trailblazers: An Evaluation. [Accessed 19 September 2020].

MHCLG (2021) Rough Sleeping Snapshot in England: Autumn 2021. Available at: <https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2020/rough-sleeping-snapshot-in-england-autumn-2020>. [Accessed 8 September 2021].

Ministry of Housing, Communities and Local Government (2019) Homelessness: Causes of Homelessness and Rough Sleeping (London: MHCLG). Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/793471/Homelessness_-_REA.pdf.

Morabia, A. (2006) Pierre-Charles-Alexandre Louis and the Evaluation of Bloodletting, *Journal of the Royal Society of Medicine* 99(3) pp.158-160.

Portuguese Presidency of the Council of the European Union 2021 (2021) Lisbon Declaration on the European Platform on Combatting Homelessness. Available at: <https://www.2021portugal.eu/en/news/lisbon-declaration-on-the-european-platform-on-combatting-homelessness/>.

Scottish Government (2019) Local Connection and Intentionality Provisions in Homelessness Legislation. Available at: <https://www.gov.scot/publications/consultation-local-connection-intentionality-provisions-homelessness-legislation-analysis-responses/pages/4/>. [Accessed 19 September 2020].

Share Homelessness Indicators Platform (nd). Available at: <https://share.homelessnessimpact.org/>. [Accessed 20 September 2021].

Teixeira, L. (2017) Why We Need to Change the Way We Talk About Homelessness,

European Journal of Homelessness 11(2) pp.77-91.

Teixeira, L. (Ed.) (2020) Using Evidence to End Homelessness (Bristol: Policy Press).

The Homelessness (Abolition of Priority Need Test) (Scotland) (2012). Available at: <https://www.legislation.gov.uk/sdsi/2012/9780111018187>. [Accessed 10 September 2019].

Washington State Institute for Public Policy (2004) Benefits and Costs of Prevention and Early Intervention of Programs for Youth. Available at: https://web.archive.org/web/20160331094011/http://www.wsipp.wa.gov/ReportFile/881/Wsipp_Benefits-and-Costs-of-Prevention-and-Early-Intervention-Programs-for-Youth_Summary-Report.pdf. [Accessed 18 February 2018].