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**An Occupational Perspective of Wellbeing:
A Case Study of Homelessness in Townsville**

*Thesis submitted by
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DipCOT, GradDip, MEd
in January 2012*

for the degree of Doctor of Philosophy
In the School of Public Health, Tropical Medicine and Rehabilitation Sciences
and School of Indigenous Australian Studies
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STATEMENT OF ACCESS

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STATEMENT ON THE CONTRIBUTION OF OTHERS

I declare that all persons whom have contributed to this thesis have been included as co-authors for published papers or are acknowledged below.

The contribution of my two supervisors; Professor Marion Gray and Professor Sue McGinty throughout the research, in the publication of papers and in the completion of this thesis is greatly appreciated and acknowledged.

A significant contribution has been provided by my cultural mentors; Albert Abdul-Rahman, Chris Henaway, Robert Cedar and Peter Malouf who have provided guidance in relation to understanding Indigenous homelessness. These four contributors provided feedback on Chapter 9: Indigenous Homelessness.

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The contributions are listed below:

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Editorial Support	Formatting and checking	<p>Samantha Talbot, Townsville</p>

DECLARATION ON ETHICS

The research presented and reported in this thesis was conducted within the guidelines for research ethics outlined in the *National Statement on Ethical Conduct in Research Involving Humans* (2007), the *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research* (NHMRC 2003), and the *James Cook University Code for the Responsible Conduct of Research* (2007). The research methodology outlined here received clearance from the James Cook University Human Research Ethics Committee (approval number # H2905).

Signature Yvonne Thomas

31 January 2012
Date

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ABSTRACT

There is a growing concern within the occupational therapy profession regarding the needs of people experiencing occupational injustice within our societies. People experiencing homelessness in Australia have limited opportunities for occupational engagement and are currently a focus of the government's social inclusion agenda. An initial review of the occupational therapy literature on homelessness grounded this study in an occupational therapy perspective, which I have termed 'rebuilding lives'. Literature from other disciplines demonstrates the precarious position of the marginalised that results in poor health and high mortality of homeless people. The importance of participation in communities is reflected in government policy, and supports the potential contribution of an occupational perspective of homelessness. This study aimed to understand the occupations of people experiencing homelessness and to contribute to the occupational perspective through discovering occupations that influence subjective perspectives of wellbeing.

This constructivist case study of homelessness explored the lived experience of people who were homeless using a montage of research methods including observation, interviews and focus groups with consumers and providers of homeless services. The research journey involved a pluralistic design utilising multiple methods (path) and a reflexive process of learning (way) to progressively discover the social world of people experiencing homelessness in Townsville, Australia. A purposive sample of homeless adults aged between 22 years and 60 years was recruited through different services including a homeless drop-in centre, a crisis accommodation service for homeless families, a hostel for intoxicated public place dwellers and an Indigenous camp in the city. A strengths-based approach to data collection prioritised the voices of participants and elicited situated accounts of occupations of meaning. Thirty five in-depth conversational interviews explored the strengths, resilience, agency and capacity of participants to sustain wellbeing during homelessness. Focus groups with thirty four service providers using an abridged Appreciative Inquiry model provided triangulation of the data and evidence of effective intervention strategies.

Analysis and interpretation of the data as driven by the research questions resulted in the discovery of three nested cases within the homeless population. Presented as three collective narratives of homelessness (single males, women with children, and Indigenous homelessness) they illustrate how people who are homeless aim to achieve and sustain subjective wellbeing through the four dimensions of occupation: doing, being, becoming and belonging. Limited opportunities for occupational engagement due to poverty and marginalisation result in situations of occupational injustice for people experiencing homelessness.

The geographical context of Townsville, proximity to Palm Island and corresponding high rates of Indigenous homelessness allowed an opportunity to explore Indigenous perspectives of homelessness. Cultural mentors proved essential in negotiating the cultural interface between Indigenous knowledge and dominant Western paradigms and an understanding of the influence of culture and colonisation to Indigenous wellbeing. The study provides an Australian Indigenous perspective to the theoretical concepts of occupation and illustrates the importance of collective occupations to the wellbeing of Indigenous people.

People experiencing homelessness sustain wellbeing through engagement in occupations that ensure safety and survival, provide positive experiences, facilitate connection with others and maintain a sense of normality. Further, wellbeing is enhanced by maintaining hopefulness through occupations that support self worth and mastery. Despite limited occupational opportunity resulting in occupational injustice, acts of personal autonomy and agency guard against descending into despair and afford a sense of satisfaction with life. An occupational perspective of subjective wellbeing is supported by this study, which challenges the appropriateness of universal definitions of wellbeing for all. Individual meanings of wellbeing should be considered for each client as a goal for occupational therapy interventions.

This study illustrates the socio-cultural contexts of occupations. Neither single males nor Indigenous people invest time and effort in occupations of becoming or a future focus, in contrast to women for whom the wellbeing of children depended on attaining secure housing and improved financial stability. Indigenous people experiencing homelessness achieve occupational wellbeing through being with and belonging to

‘the mob’. Spending time together yarning and drinking reinforced a sense of kinship and cultural identity. Racism and dispossession reinforced the experience of marginalisation for this group and compounded occupational injustice. Some single men achieved high levels of subjective wellbeing through positive mental strategies affirming autonomy and control over life circumstances. The collective narratives represent three different voices within the homeless population in Townsville, and demonstrate the need for services to accommodate social and cultural differences within homelessness.

Three additional interpretive findings propose an expansion of the theoretical basis of occupational justice to recognise the importance of 1) access to place and space; 2) occupations that support gender roles, particularly those of women and mothers; and 3) occupations that support the cultural values of individuals and groups. Banishment or exclusion from public and private spaces prevents engagement in occupations that affirm personal identity; similarly being unable to participate in occupations that support gendered and cultural roles inhibits wellbeing. The multiple meanings of human occupation are intricately affected and shaped by the social and cultural context and consistent with the gendered and cultural norms.

This study supports a redirection of the occupational therapy profession to work towards just and inclusive structural policies that encourage engagement in meaningful occupations and community participation for people experiencing homelessness.

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Ethical Approvals and Research Documents

- Appendix Ga. JCU ethical clearance 2008
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- Appendix H. Interview Consent Form
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Contact with Townsville Service Providers

- Appendix L. Homeless Service Providers
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PREAMBLE: A JOURNEY OF DISCOVERY

The analogy of a journey, though not original, symbolises the process of discovery inherent in this doctoral research study. There have been very few times in my life when I have deliberately set out on a course of action, so unfamiliar to my day-to-day life, that I have not known what skills or knowledge I would need, or how equipped for the experience I would be. This research into homelessness in Townsville was such an experience. I knew from the onset that I would need to draw on many different sources of help and use my own ingenuity and experience to achieve my goal and gain the most of the experience.

The journey has been a shared journey; of many people who have experienced homelessness in Townsville, who have navigated the ups and downs of different stages of homelessness and generously shared aspects of that experience, which are included in this thesis. It has also been a journey for my cultural mentors and for people working in the homeless sector who had travelled with me through different phases. For me this study was a *Journey of Discovery* on many levels; discovery of theoretical understandings of occupation, discovery of the lived experience of homelessness, and a personal discovery of myself as a researcher.

This thesis is an integration of these three aspects of the journey, at times combining and synthesising understandings, at others separating and analysing specific aspects of the study to illuminate the knowledge gained. The format of the thesis is in three parts:

- Preparation and Planning – outlining the necessary background information, search for knowledge and the planning of the journey
- Journey Highlights – signalling the findings along the way including the more significant experiences and understandings gained
- Discovering Meaning – reflecting on the knowledge gained and the meaning of the journey to self and others

I have used this analogy to support the inclusion of the personal pronoun in this thesis. I have used ‘first’ person to communicate my own voice as the journey-er on this

voyage of discovery. I have used the ‘third’ person as the objective voice of academic discourse to integrate the knowledge gained from other academics, the occupational profession, local and national policy and other sources. Finally, I have used the voice of participants and of other writers whose words have spoken directly to me as the researcher have been included in italics and in parenthesis. These three voices are intertwined within the chapters of this thesis and together they illustrate the collective knowledge gained through this journey of discovery.

This thesis begins an ongoing dialogue with the occupational therapy profession to support and develop an occupational perspective of wellbeing in relation to people experiencing homelessness.

Part One

Preparation and Planning

Chapter 1

Getting Started

...those who are homeless represent a multifaceted clientele for occupational therapists and an excellent match with the fundamental expertise of the profession. Those who are homeless often experience difficulties with daily life functioning and with their physical and mental health: occupational therapists are particularly well suited to promote engagement in meaningful and healthy occupations in the environment of the person (Grandisson, Mitchell-Carvalho, Tang, & Korner-Bitensky, 2009, p. 496).

The idea for this research thesis was sparked by reading an advertisement for the position of manager for a new homelessness service in Townsville, the city where I live and work in the tropical, north-east of Australia. I had no previous experience with people experiencing homelessness at this time. As an occupational therapist, I considered the relevance of my professional training and knowledge to working with people who are experiencing homelessness. As I tried to imagine the occupational needs of people experiencing homelessness, I began a reflective process that has continued throughout this study. From an occupational perspective, living without a home, a job and the necessary resources to meet basic survival needs restricts opportunities to engage in many of the occupations that are fundamental to physical, mental, emotional and social wellbeing and therefore contributes directly to health. I was left with the question that has driven this research project from its conception through to its conclusion: How do people sustain and maintain a sense of wellbeing in the face of homelessness?

In this introductory chapter the overall aim was to provide a summary of background information regarding homelessness and a basis for the research project in the broader academic discourses on homelessness. In this chapter I have focused on aspects of homelessness that underpin current homelessness policy and practice in Australia; drawing on international data where appropriate. This chapter begins with an outline of the professional occupational therapy context and the geographical context of the

study. I have included definitions of homelessness used in Australia, available demographic data, discussion on the causes of homelessness, and a summary of current Australian government policy based on the concept of social inclusion. The chapter concludes with a brief introduction to the theory of occupation, its influence on health and wellbeing, and the concept of occupational justice. These concepts in the occupational therapy literature provide a bridge between the theory and practice of occupational therapy and homelessness.

1.1 Professional Context

A fundamental concept of the occupational therapy profession is that the things that people do in their day-to-day life (their occupations) are integrally connected to their health and wellbeing. Contemporary models of occupational therapy practice consider occupation as a central tenet of practice, and reductionist models of health focusing on physical body structures and functions inadequate to achieve lives of meaning and satisfaction (Molineux, 2010). A definition of occupational therapy provided by the World Federation of Occupational Therapists (WFOT) (2010) states:

Occupational therapy is a client-centred health profession concerned with promoting health and well being through occupation. The primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement (para. 1).

The link between occupation and wellbeing has been central to the development of the profession since its inception. William Rush Dunton (1919), one of the founders of the profession, stated:

Occupation is as necessary to life as food and drink. That every human being should have both physical and mental occupations

which they enjoy. These are more necessary when the vocation is dull or distasteful. . . . That sick minds, sick bodies, sick souls may be healed through occupation (p. 17).

Contemporary definitions of occupation include:

... specific chunks of activity within the ongoing stream of human behaviour which are named in the lexicon of the culture, for example, 'fishing' or 'cooking', or at a more abstract level 'playing' or 'working'. These daily pursuits are self-initiated, goals-directed (purposeful) and socially sanctioned (Yerxa et al., 1990, p. 5).

... everything people do to occupy themselves, including looking after themselves (self-care), enjoying life (leisure) and contributing to the social and economic fabric of their communities (productivity)(Canadian Association of Occupational Therapist (CAOT), 2002, p. 34).

...all that people need, want and are obliged to do; what it means to them and its ever present potential as an agent of change (Wilcock, 2006, p. 9).

This study focuses on the occupations of people who are homeless and is primarily concerned with what people 'do' on a day-to-day basis, how they spend their time and the individual interpretation of the meaning and purpose of their occupations. The study aims to contribute to an understanding of human occupation and the growing body of knowledge of Occupational Science (Wilcock, 1999; Yerxa et al., 1990). Drawing on the *Occupational Perspective of Health* (Wilcock, 2006) framework with its belief that human beings are innately occupational and achieve physical, mental and social wellbeing naturally through their occupations, this study focuses specifically on the occupations of people who live without the resources or access to many of the most common occupations of life in Australia such as homes, work and

community citizenship. The theoretical constructs of an occupational perspective of health are explained in more detail in section 7 of this chapter. The goal of this research is to contribute to the development of the profession through exploring the relationship between occupation and wellbeing in the context of homelessness.

1.2 Geographical Context

The specific geographical context for this study is Townsville, a regional city situated on the coast of North Queensland, Australia (Figure 1.1; Figure 1.2). The current population is more than 180,000, with Townsville recording the highest population growth of all centres outside South East Queensland between June 2009 and June 2010 (Australian Bureau of Statistics, 2011). Improving infrastructure and building new accommodation is a high priority for the Local Regional Council. This has resulted in the development of new residential apartment blocks within the central city area as well as new residential developments in the outer suburbs.

Figure 1.1 Map of Australia showing the location of Townsville



Figure 1.1 May showing Townsville from Perry (2011). Where is Townsville? January, 10, 2012. Study English Blog. <http://studyenglishblog.tiesnq.com.au/general-news/where-is-townsville.html>

Townsville is situated some 1,000kms north of the Tropic of Capricorn, and has a tropical climate with low rainfall for most of the year. Having an average of 320 days

of sunshine a year and a constant warm climate makes Townsville suitable for sleeping out for most of the year. There is higher rainfall during the wet season, from December to February, and the region is prone to tropical cyclones during the first four months of the year. The rate of homelessness in Townsville at 93 per 10,000 of the population is almost double the national rate of 53 per 10,000 (Chamberlain & MacKenzie, 2008). In comparison to other states and territories Queensland has the second highest rate of homelessness in Australia. Townsville, therefore, offers a unique case study from which to gain a greater understanding of homelessness in regional Australia.

Indigenous Australians (people of Aboriginal and Torres Strait Islander descent) are over represented in the homeless population in all states and territories in Australia. Indigenous Australians comprise 2.4% of the general population of Australia, however 10% of the national homeless population and 17 % of Supported Accommodation Assistance Program (SAAP) clients across the country identify as Aboriginal and Torres Strait Islanders (Department of Communities, 2010; Homelessness Taskforce, 2008). The proportion of Indigenous Australians varies across and within each state. In Queensland, 3.5% of the general population identified as Indigenous, compared to 8.1% of the homeless population, while in Townsville approximately 10% of the homeless population are Indigenous (Chamberlain & MacKenzie, 2008). Statistics on Indigenous homelessness, based on the 2006 census data, are acknowledged to be problematic on two counts: there was a general undercount of Indigenous people from remote areas in Australia and a more specific undercount of Indigenous people staying with friends or relatives.

Townsville is the largest city in Northern Queensland and provides a vital service centre for a vast rural and remote area, including hospital and social services. Many Indigenous people regularly travel to Townsville to access essential services without the resources for accommodation or transport to return to their communities. In addition a 'culture of mobility' within Aboriginal and Torres Strait Islander peoples may increase the number of people visiting and experiencing periods of homelessness in Townsville (Memmott, Long, & Thomson, 2006). The high proportion of Indigenous people in Townsville's homeless population allows an opportunity to explore homelessness through a cultural lens; recognising the historical, social and

cultural factors that influence everyday life and wellbeing of this group (Chamberlain & MacKenzie, 2008).

1.3 Historical Context: Palm Island

The history of Townsville and North Queensland since colonisation bears some relevance to the current situation. Great Palm Island is 65 km north-west of Townsville (see Fig 1.2 and 1.3). Established in 1918, this Indigenous community became the home of many Indigenous people forcibly moved from their traditional lands under the *Aboriginal Protection and Restriction of the Sale of Opium Act, Qld*, (1897). Under this legislation and the later amendments, Aboriginal people were made wards of the state and removed to settlements where the Chief Protector controlled the movements, language, marriage, wages, property and debts of Aboriginal people (Dade Smith, 2007). Removal of Aboriginal peoples from locations in North Queensland began during the early settlement of the area and allowed for the development of the region for pastoral properties, agriculture and mining (Babidge, 2010). Different cultural groups were forced to live together resulting in conflict between kinships groups and traditional cultural protocols (Babidge, 2010; Dade Smith, 2007). The island location of the Palm Island settlement became a penal community where ‘disruptive’ people were sent from other settlements when they could not be managed (Sutton, 2009; Watson, 1994). This practice continued until the late 1960s when the Queensland Government began to reduce settlement population after generations of families had grown up on settlements (Babidge, 2010). A neighbouring island, Fantome Island (Figure 1.3), housed an Indigenous lazarette or leprosarium at its northern end for the reception and medical treatment of leprosy until 1973 and Locke Hospital at the southern end, which was a lazarette for Indigenous people with venereal disease which closed in 1945 after the penicillin was discovered (Babidge, 2010; Parsons, 2008).

The current population of Palm Island is estimated to be 2,165 and comprises two clans; the Manbarra (traditional owners) and Bwgcolman (Indigenous people who have historical links to the Island through the settlement process). There are approximately 320 houses on the island; overcrowded and inadequate housing arrangements are the norm (Fien et al., 2010). Movement between Palm Island and

Townsville has been a constant feature of the history of the Island with certain areas of the city being considered as places where Aboriginal people can stay when on the mainland (Hale, 1996). The naming of a city centre street as Boundary Street was the physical limitation designated on Indigenous people's access to the main business areas of the city (see Fig 1.4). Happy Valley is a small Indigenous community bounded by the town common, the airport and the cemetery where Indigenous people have lived for many years. Some individuals can trace a connection to Happy Valley that extends across multiple generations. To this day people from Palm Island frequently travel to Townsville by barge, ferry and plane for various reasons including work opportunities, visiting family members, and accessing essential services, including health and social services. Many Palm Island children are sent to the mainland for education, and many families have ties with both the Island and with the mainland.

Figure 1.2 Map of Local Government Settlements, Missions and Reserves in North Queensland

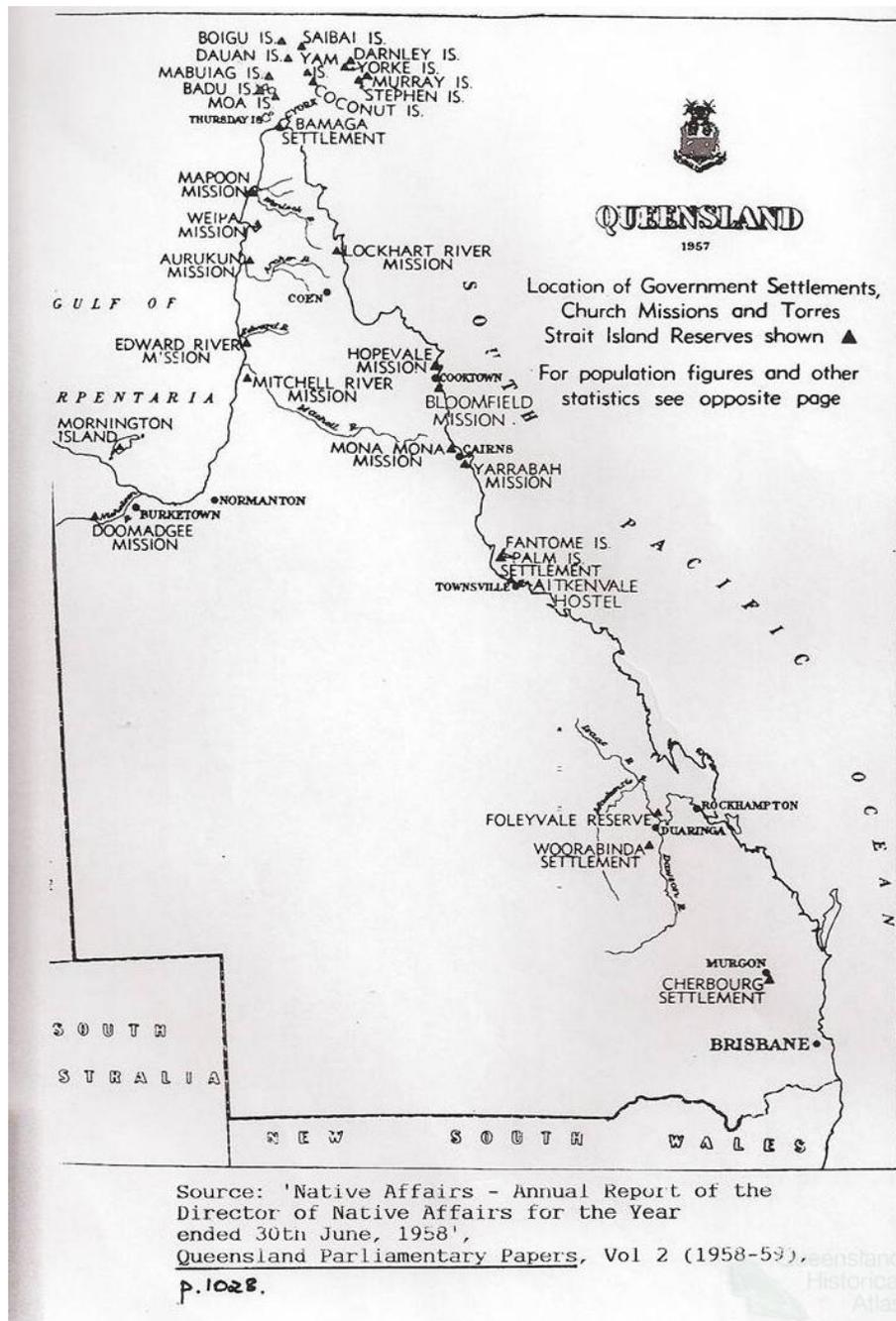


Figure 1.2. Map of Queensland showing the location of missions and reserves showing Palm Island and Fantome Island, taken from 1958 Annual Report of Director of Native Affairs. By J. Watson (2010). Palm Island. Queensland Historical Atlas. Accessed September 27, 2011 from <http://www.qhatlas.com.au/content/palm-island>

Figure 1.3 Map of Great Palm Island and Fantome Island (1941)

*Notes indicate the reserves on Palm Island in 1941.

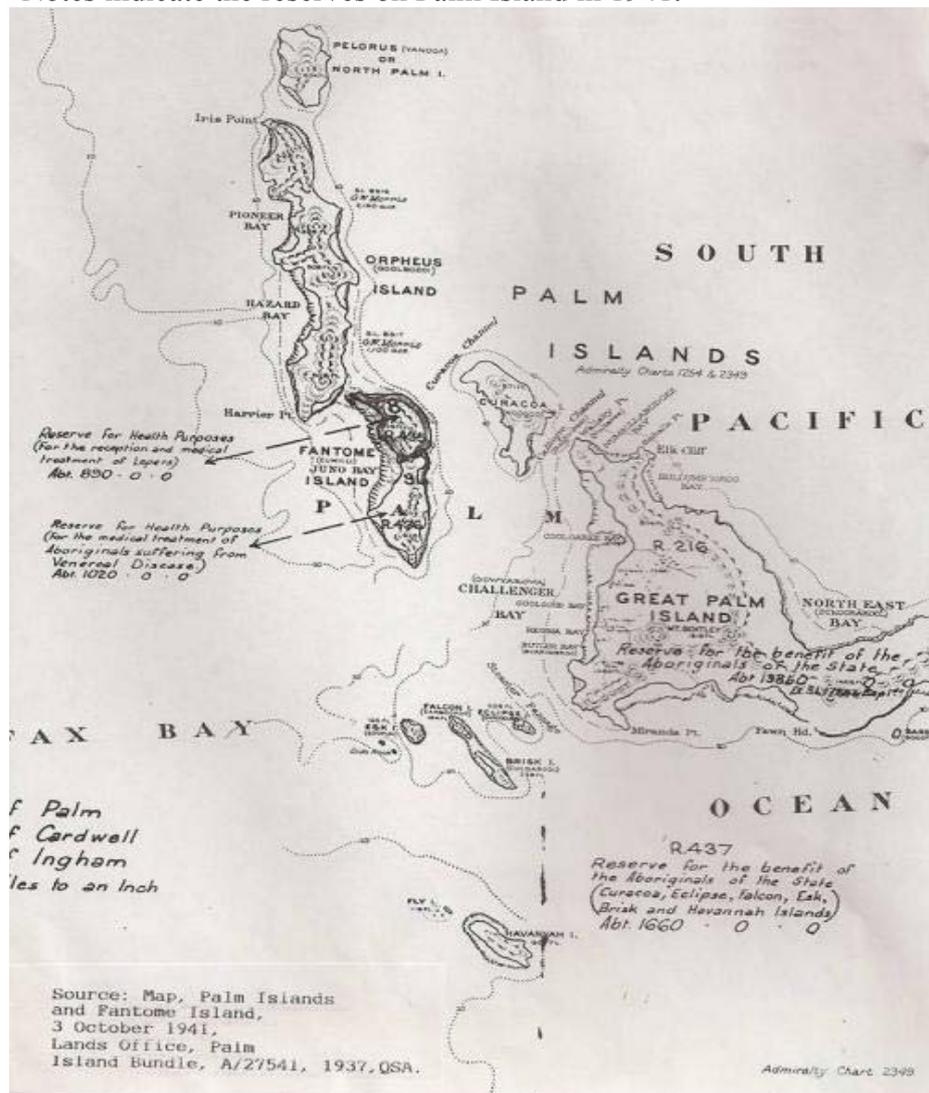


Figure 1.3. Map of Palm Island and Fantome Island, showing locations of lazarettos taken from 1958 Annual Report of Director of Native Affairs. By J. Watson (2010). Palm Island. Queensland Historical Atlas. Accessed September 27, 2011 from <http://www.qhatlas.com.au/content/palm-island>

The growth of the Townsville population over the last twenty years has seen extensive expansion of the city with new housing and industrial developments (see Figure 1.4). As the city grows and development of the central city becomes gentrified, areas that have traditionally been available for Palm Island people to stay when they come to the mainland have been lost to development (Hale, 1996). The development of a V8 track and motor sports complex south of the city, on previously undeveloped land that

bounded a creek, and includes the infamous Boundary Street, is an example of how homeless Indigenous people in Townsville have lost space that has traditionally been available for sleeping out. Therefore, larger numbers of Indigenous people currently use a smaller amount of accessible public space to live in, a situation that forces people together in large groups or where disparate groups are in close proximity to each other. Consequently, homeless Indigenous people become more apparent within the community, causing greater potential for complaint.

Figure 1.4 Map of Townsville suburbs showing the key locations of the study



Figure 1.4. Location of the study. Adapted from Our Location, James Cook University, January 28, 2012 from <http://www-public.jcu.edu.au/about/campuses/where/index.htm>.

The research is framed as an intrinsic case study on homelessness in Townsville; the case is bounded by the geographical location of Townsville, from 2007–2011 (Stake, 2005). Four locations (see Figure 1.4) provided opportunities for data collection: Reverence Charles Harris Diversionary Centre; the Drop In Centre, Family Emergency Accommodation Townsville (FEAT) and Happy Valley. Descriptions of each are provided in Chapter 5. This study is framed by its specific context including the climatic, historical, social, cultural and political factors that influence the experience of homelessness in Townsville. The research journey told through in this thesis is a representation constructed from the stories of participants and from the

researchers observations and reflections, and interpreted through the lens of the researcher (Stake, 2005). In selecting the content my aim is to illuminate the nature of occupational engagement and its relationship to the wellbeing of people experiencing homelessness and so add to the evolving science of occupation. However, a second goal of the study is to provide a specific local perspective of the needs of people experiencing homelessness with a view to enhancing future opportunities for their occupational participation.

1.4 The Concept of Homelessness

Homelessness is literally understood as the lack of a home, however the concept of home, and therefore homelessness, is substantially more complex than the issue of accommodation (Somerville, 1992). Home has been studied widely across different disciplines and is viewed in terms of place, space, feelings, practices or an active state of being in the world (Mallett, 2004). The meaning of home is socially constructed and subjective; people create home around ‘temporal rhythms and self-determined habits’ and habitats (Veness, 1993, p. 324). It is as possible to live in a house that is not experienced as home, as it is to have no abode but to have a strong sense of home. Attempts to differentiate the absence of a physical residence from the broader understandings of home have led some authors to suggest the use of alternative terms to homelessness such as ‘rooflessness’ (Somerville, 1992), ‘un-housed’ (Veness, 1993) and ‘public place dwellers’ (Memmott et al., 2003). Whilst acknowledging the centrality of broader meanings of home to this research study, the term ‘homelessness’ is used as a descriptor for the lack of suitable or conventional accommodation, and ‘the homeless’ as a collective noun for a proportion of the population that experience homelessness rather than individuals. To describe a person as homeless creates stigma and supports notions of homogeneity, inferiority and dysfunction; perpetuating a negative image of ‘the homeless’ (Parsell, 2010). In reality, people who experience homelessness are heterogeneous, comprising individuals and families who lack opportunity and access to material, social and human aspects of life.

1.5 Definitions of Homelessness in Australia

Defining homelessness remains problematic due to the heterogeneity of the individuals and families who experience homelessness. Homelessness is a complex issue, which results from a wide range of individual and social factors, and affects people in different ways. Many researchers and advocates now talk about homelessness in the context of a ‘continuum of housing’, running from those who have stable houses to the literally homeless, with many persons falling between these two extremes (Toro, 2007). Throughout this thesis, the multifaceted and complex nature of homelessness is acknowledged and broad definitions of homelessness applied.

There is no accepted international definition of homelessness; different countries conceptualise and define homelessness differently (Toro, 2007). Defining homelessness is essentially a political mechanism to; determine the extent of homelessness within the population of a country, allocate public funding to meet the needs of that population and to select the criteria by which individuals can benefit from publically funded programs (Memmott et al., 2003). A definition of ‘literal homelessness’ or lack of a home is commonly used in the US, while Europe’s ‘operational’ definition is based on the individuals incapacity to sustain housing without support (Philippot, Lecocq, Sempoux, Nachtergaele, & Galand, 2007; Toro, 2007).

In Australia homelessness is defined from the perspective of a ‘cultural definition’, which identifies shared minimum community standards of housing that people have the right to expect within a given culture and its conventions and expectation (Chamberlain & MacKenzie, 2008). This cultural definition of homelessness is used to enumerate homelessness in Australia, where people living in sub standard accommodation are defined as homeless.

The minimum community standard is a small rental flat with a bedroom, living room, kitchen, bathroom and an element of security of tenure, because that is the minimum that most people achieve in the private rental market. However some exceptions exist where people are living in

institutional accommodation that are not considered homeless e.g. seminaries, prisons, elderly people in nursing homes and students in university halls of residence (Chamberlain & MacKenzie, 2008, pp. 1-2).

Three categories of homelessness are recognised by the Australian Bureau of Statistics (ABS) and used in the analysis of census data (Chamberlain & MacKenzie, 2008). Primary homelessness describes those that have no conventional accommodation, and live on the street, in parks, squat in derelict buildings, or use cars or railway carriages for temporary shelter. Secondary homelessness describes those that move frequently from one form of temporary shelter to another, staying in crisis accommodation or staying with friends or boarding houses short-term. Tertiary homelessness describes those that live in boarding houses on a medium to long-term basis, designated as 13 weeks or more. People move between different categories of homelessness and marginal housing as their circumstances change over time, however the impact of sustained homelessness can result in ‘exclusion from mainstream life’ (Commonwealth of Australia, 2008b, p. 24).

The Supported Accommodation Assistance Program (SAAP) Act (1994) is the legislation under which the Australian Government administers and funds non-government organisations that provide accommodation, support and assistance across Australia, including outreach, shelters, crisis accommodation and transition or supported accommodation. The definition of homelessness from this legislation focuses on inadequate access to safe and secure housing, and defines homelessness in terms of the potential for damage to health, injury and marginalisation. Under this act SAAP services work with people who are at risk of losing housing as well as those who meet the homeless definition (Commonwealth of Australia, 1994, Section 4).

Homelessness of Indigenous Australians can only be understood in the context of a cultural understanding of home, as a traditional and spiritual connection with land and family (Keys Young, 1998). The legacy of colonisation and dispossession has resulted in disadvantage and a greater risk of homelessness for Indigenous people (Australia: Commonwealth Advisory Committee on Homelessness (CACH), 2006). Three categories of Indigenous homelessness have been identified: public place dwellers, at-risk-of homeless persons and spiritually homeless persons (Memmott et al., 2003).

Separation from traditional lands, family and kinship networks, and identity confusion arising from separation from Aboriginal identity systems are recognised as contributors of spiritual homelessness (Memmott et al., 2003).

1.6 Causes of Homelessness

Homelessness is precipitated by a dynamic interaction of individual factors and social structures; however, the most common characteristic of homeless people is poverty (Anderson, 2003; Horsell, 2006). Vulnerability to homelessness is often associated with major life transitions and life crises, including leaving school, family breakdown, losing a spouse, leaving prisons or hospital, retirement and relocation (Commonwealth of Australia, 2008b). For many people, homelessness is a result of multiple factors, including poverty, lack of social and family support, domestic violence, governmental policy, psychiatric illness, societal isolation and lack of resilience (Philippot et al., 2007; Turnbull, Muckle, & Masters, 2007). Social factors such as the lack of affordable housing, access to work, education and training and entrenched disadvantage have also been recognised as contributing to the causes of homelessness (Commonwealth of Australia, 2008b). The concept of pathways into and out of homelessness is used to effectively explain how these precipitating factors collectively affect peoples' lives and housing status (Anderson, 2003; Chamberlain & MacKenzie, 2008; Clapham, 2003). Housing pathways describe the dynamic interactions and continually changing relationships between people and house and home, over time and space (Christian, Clapham, & Abrams, 2011).

Pathways have been identified at different life stages including youth homelessness, adult homelessness and homelessness in later life (Anderson, 2003). Young people may become homeless as a result of family breakdown, child abuse, problems at school, or on leaving child welfare systems. Typically, youth homelessness begins with 'running away' for short periods, initially staying with various friends and relatives (commonly referred to as 'couch surfing'), until they become increasingly unwelcome, and progresses through to chronic homelessness when they become entrenched in the homeless 'subculture' (Chamberlain & MacKenzie, 2008). Experiencing homelessness or foster care in childhood is itself a predictor of

homelessness in later life (Anderson, 2003; Shelton, Taylor, Bonner, & van den Bree, 2009).

Adult pathways into homelessness result from economic disadvantage and lack of social support and are perpetuated in part by lack of access to affordable or social accommodation and poor coping strategies. Single people are more vulnerable to becoming homeless as a result of loss of income and are least likely to qualify for housing assistance (Chamberlain & MacKenzie, 2008). Over time, people lose hope of getting accommodation and accept their situation as a way of life, thereby transitioning into chronic homelessness. Family breakdown and domestic violence may precipitate women leaving home, initially staying with another family member or moving to a shelter. Women with children are discriminated against in the housing market and by employers and may experience long periods of homelessness or insecure accommodation, however they 'cling to the ideal that they should have their own flat or house to live in' and rarely make the transition into chronic homelessness (Chamberlain & MacKenzie, 2008; Fingeld-Connett, 2010).

There has been little research into later life pathways into homelessness (Anderson, 2003). As people age they become less employable, more vulnerable to economic stress, and therefore unable to maintain or repair their former housing. Predictors of older homelessness include being male, relationship breakdown, loss of job, and lack of children to live with (Shinn et al., 2007). A study of older homelessness across England, the US and Australia found that two thirds of participants had never experienced homelessness before and identified physical and mental health problems, alcohol abuse and gambling problems as contributory factors (Crane et al., 2005).

In recognition of the different pathways into homelessness this study focuses on adults experiencing homelessness and excludes adolescents and aged participants. In Queensland the age profile of the homeless population is older than the national profile with 36% aged 45 years or older. Adults between the age of 22 and 65 years were chosen as the target population as this age group increased between 2001 and 2006 (Chamberlain & MacKenzie, 2008). This study did not focus on the causes of homelessness and a pathways approach as outlined above provides a general understanding of how individuals may become homeless.

1.7 Enumerating Homelessness in Australia

The challenge of enumerating the homeless population and determining accurate statistics regarding those affected is accepted internationally (Frankish, Hwang, & Quantz, 2005; Spret-Kittler, 2002). Three main approaches to enumeration have been used: quantitative research, service based documentation and public statistics. Generally there is a desire to obtain a long-term and consistently applied database to inform policy and measure the success of service provision (Chamberlain & MacKenzie, 2003; D'Onise, Wang, & McDermott, 2007). It is almost certain that official counts of the homeless population are at best estimates due to the mobility and reluctance to be counted of people who experience homelessness (Chamberlain & MacKenzie, 2003; D'Onise et al., 2007).

In Australia, the first attempt to specifically include homeless people in the national census was made in 1996 through a special enumeration strategy based on the cultural definition of homelessness (Chamberlain, 1999). The strategy involved a winter census when homeless people are more likely to seek out hostels and other accommodation, although Townsville's mild winters allow sleeping out all year. Census field staff collected data over a week time period by working closely with local services and employing homeless people as census collectors. A short form specifically for homeless people was handed out at food vans and other known locations where people experiencing homelessness could be found. A procedure for completing a substitute form was agreed upon when the individual was spotted but unable to complete the form themselves (Chamberlain & MacKenzie, 2003).

The census also identified people staying with friends and family and having no other accommodation, as well as those in marginal housing such as caravan parks and boarding houses. While census data provides the number of people who are homeless on a single night of the year, another way to enumerate the homeless population is to determine the number of people who experienced homelessness during a year, using data from Supported Accommodation Assistance Program (SAAP) National Data Collection Agency of the Institute of Health and Welfare (AIHW). Additionally, the

numbers of homeless young people were collected throughout Australia, via staff in secondary schools (Chamberlain & MacKenzie, 2003).

An alternative enumeration approach of the capture-recapture method was used by D'Onise, Wang, & McDermott (2007) to determine the number of homeless people in the Adelaide region of South Australia. This approach utilised three service organisations records and qualitative data of workers to determine who was currently homeless and the lists were compared to remove people who appeared on more than one list prior to statistical analysis. The results suggest a markedly different picture to that obtained through the census data, with at least three times the number of primary homeless reported through the census data in 2001 (D'Onise et al., 2007).

Contrary to this finding, the ABS recently published a discussion document on its review of the 2006 census data, which suggests that the number of homeless people in Australia was over-estimated by the Chamberlain and MacKenzie report (Pink, 2011). One area of over estimation suggested confusion between homeless people and 'grey nomads'. The review states:

Of these 13,033 [homeless] people, 2,469 people have been reclassified by this review as 'grey nomads' and removed from the potential homeless population. Grey nomads were defined in this review as people in dwellings where all people in the dwelling were aged 55 years and over, were not in the labour force, and were staying in caravans, cabins or houseboats on Census night. The great majority of these grey nomads were enumerated in holiday destinations – the northern beaches in NSW, and in Queensland, NT and northern WA (Pink, 2011, p. 40).

As exemplified above, there remains considerable debate of precisely how many people in Australia are currently homeless in the sense of having no secure and safe, culturally appropriate housing. For the purposes of this thesis the statistics quoted are taken from the Australian Government department reports related to the current published data on homelessness.

1.7.1 Current Statistics

Official estimates of homelessness, taken from the 2006 census data, SAAP client collection, and the national census of school students, show that the rate of homelessness across Australia, at 53 per 10,000, has remained unchanged since the previous census (Chamberlain & MacKenzie, 2008). Table 1.1 provides the relative change in the rate and number of homeless individuals in each state between 2001 and 2006. While the rate of homelessness has remained constant between these two time periods, homelessness affected an additional 5,000 people in 2006 when compared to 2001.

Rapid overall population growth in Queensland has resulted in a minor drop in the rate of homelessness from 70% to 69% despite an increase of 2,213 homeless individuals. Queensland has the second highest number of people experiencing homelessness, falling just short of New South Wales, and the second highest rate of homelessness next to the Northern Territory.

Table 1.1 Number and Rate of Homelessness in Australian States and Territories.

Note: The rate of homelessness is expressed per 10,000 of the population.

Year	NSW	Vic	Qld	WA	SA	Tas	NT	ACT	Aust
2001	26,676	20,305	24,569	11,697	7,586	2,415	5,423	1,229	99,900
Rate	42	44	70	64	52	52	288	40	53
2006	27,374	20,511	26,782	13,391	7,962	2,507	4,785	1,364	104,676
Rate	42	42	69	68	53	53	248	42	53

The number and rate of homelessness in 2006 across the different definitions of primary, secondary and tertiary homelessness, including those in SAAP accommodation, has been used to compare Townsville with Queensland and the national statistics (Table 1.2). The overall rate of homelessness in Townsville is 93 per 10,000, which is almost twice the national rate and substantially higher than the Queensland rate. However, these statistics also present an unusual picture of homelessness in Townsville. The low rate of rough sleepers and corresponding high rate in boarding houses suggests that most homeless people in Townsville are accommodated, and contradicts the impressions of both the public at large and of the current service providers. Possible explanations for these statistics include an

inaccurate physical count of rough sleepers during the census period or a concentrated effort by service providers to house people in boarding houses during this period. Subsequent enquiries suggest that there are significantly more than 84 rough sleepers in Townsville on any one night, however some may have homes elsewhere (C. Brereton, personal communication, 8 May 2011). A survey conducted in Townsville in 2010 identified 56 rough sleepers with 39 considered to be the most vulnerable and in need of support (Walsh, 2010).

Table 1.2 Comparison of National, State and Local Rates of Primary, Secondary and Tertiary Homelessness

Note: Both the number of individuals and the percentages of the overall homeless population from 2006 census are provided.

Definition	Australia	Qld	Townsville
Overall rate per 10,000	53	69	93
Primary Homelessness <i>Rough sleepers</i>	16,375 (16%)	5,165 (19%)	84 (6%)
Secondary Homelessness <i>Friends and Relatives</i>	46,856 (45%)	12,946 (49%)	637 (48%)
SAAP accommodation	19,849 (19%)	3,233 (12%)	138 (11%)
Tertiary Homelessness <i>Boarding Houses</i>	21,596 (20%)	5,438 (20%)	470 (35%)

1.7.2 Age Distribution

Homelessness affects people of all ages in Australia with an increase in the older age range from 45 years upwards (Table 1.3). Compared with the rest of the country, Queensland has an older homeless population with 36% over 45 years of age compared to 29% Australia wide. Although specific data for Townsville was unavailable for comparison, adult homelessness is the focus of many of the services provided in Townsville and was the focus of this study.

Table 1.3 Age Distribution of Homeless Population

Note: N= number of persons; % = the proportion of the total

Age Group	Australia		Queensland	
	N	%	N	%
Under 12	12,133	12	2,914	11
12–18	21,940	21	4,469	16
19–24	10,504	10	2,624	10
25–34	15,804	15	3,820	14
35–44	13,981	13	3,471	13
45–54	12,206	12	3,464	13
55–64	10,708	10	3,667	14
65 or older	7,400	7	2,353	9

There have been some significant changes in the age distribution of homeless people between the 2001 to 2006 census periods (Table 1.4). The number of homeless teenagers aged 12–18 years, who were on their own rather than part of families, decreased by 20% (Australia. Homelessness Taskforce, 2008). Two structural changes occurred during this period; firstly, an increase in early intervention for adolescents through the Reconnect Program and secondly, improved labour markets. During the same period, family homelessness increased by 16.8%. To date, early intervention and improved labour markets have not had the same positive effects on families experiencing welfare as they have had on teenagers, however a more assertive early intervention program for families now exists and may result in future reductions. The number of single adults, including couples without children, increased by 10.4% from 2001 to 2006, with an increase in the percentage of homeless single women. The majority of this group was homeless for more than a year and therefore early intervention is not an appropriate response to help this group. High rates of substance abuse and mental illness have been found amongst single adults and they will therefore require high levels of support and assistance to find and maintain accommodation (Chamberlain, Johnson, & Theobald, 2007; Johnson & Chamberlain, 2009). From an occupational perspective, chronic adult homelessness presents particular challenges for service providers because of the reasons previously mentioned.

Table 1.4 Changes in the Composition of the Homeless Population (2001–2006)

	2001 (N)	2006 (N)	Change (%)
Youths 12–18yrs	22,600	17,891	-20.8%
Families with Children	22,944	26,790	16.8%
Adults (singles and couples)	54,356	59,995	10.4%
Total	99,900	104,676	4.8%

1.7.3 Cultural Distribution

As previously stated, rates of Indigenous Australian homelessness are higher than for the rest of the population. Table 1.5 demonstrates that Indigenous Australians comprise 2.4% of the Australian population, 10% of the national homeless population and 17% of SAAP clients (Australia. Homelessness Taskforce, 2008; Queensland Government, 2007). Statistics are likely to be lower than the actual number due to an acknowledged undercount of Indigenous census data (Chamberlain & MacKenzie, 2008)

The rate of Indigenous homelessness in Queensland, at 159 per 10,000, is almost three times higher than the rate for non-Indigenous homelessness at 65 per 10,000 (Chamberlain & MacKenzie, 2008). Distribution of Indigenous homeless people is higher in rural areas (22 %) and in remote areas (68%; Commonwealth of Australia, 2006). Official estimates of homelessness based on the 2006 census data suggests there are 1,329 people experiencing homelessness in Townsville on any one night, of which approximately 155 are of Aboriginal or Torres Strait Islander descent (Chamberlain & MacKenzie, 2008). This study of homelessness in Townsville provides an opportunity to gain a greater understanding of the experiences of Indigenous people who are homeless.

Table 1.5 Indigenous Homelessness

Aboriginal and Torres Strait Islander (ATSI) Statistics	Australia	QLD	Townsville
Population identified ATSI (%)	2.4	3.5	(unknown)
ATSI in homeless population (%)	9.1	8.1	11.7
ATSI in Boarding Houses (%)	5.8	8.4	10.4
ATSI with Friends and Family (%)	3.8	3.7	4.7
ATSI in SAAP (%)	19.7	21.0	27.3
ATSI Rough sleeping/improvised dwellings (%)	15.8	10.2	48.8

1.8 Government Policy

1.8.1 National Policy

In 2008 the Australian Government, under the leadership of Prime Minister Kevin Rudd, released a Green Paper on homelessness in Australia titled ‘Which Way Home’ (Commonwealth of Australia, 2008b). After a period of public consultation the White Paper, ‘The Road Home: A National Approach to Reducing Homelessness’ (Australia. Homelessness Taskforce, 2008), was released and currently forms the basis of National and State policy regarding homelessness in Australia. ‘The Road Home’ outlines an ambitious target to halve homelessness by 2020 and to reduce overall homelessness by 20 % by 2013. Three broad strategies are identified in the White Paper:

- ‘Turning off the Tap’ – preventing homelessness occurring especially for children and families
- ‘Improving and Expanding Services’ – including mainstream services to minimise the time spent in specialist services
- ‘Breaking the Cycle’ – boosting specialist models of supported accommodation and affordable housing to create more housing opportunities with wrap around support.

A major focus of the National Approach is on the integration of national, state, and local governments with corporate, private sector and non-government organisations to work in partnerships to end homelessness and to encourage social inclusion.

Following the White Paper, the Council of Australian Governments (COAG) signed the National Affordable Housing Agreement (NAHA) (Australia. COAG, 2008) that came into effect in January 2009. The agreement identifies the roles and responsibilities of each layer of government and the measures of expected performance towards the goals of affordable, safe and sustainable housing for all Australians, including:

- Improved integration and coordination of assistance to people who are homeless or at risk of homelessness
- Improvements to social housing arrangements to reduce concentrations of disadvantage and improve the efficiency of social housing

- Improved access for Indigenous people to mainstream housing, including home ownership and contributing to the ‘Closing the Gap’ targets
- Other reforms to increase the supply of affordable housing.

1.8.2 State Policy

The Queensland Government Implementation Plan was released in November 2009 and outlines the extent of funding to be directed towards ending homelessness, totalling \$284.5 million over five years, 2008/9 – 2012/3. The majority of funding is directed into initiatives through the Department of Communities (DoC), although Queensland Health (QH), Department of Community Safety (DoCS), Department of Employment, Economic Development and Industry (DEEDI) and the Department of Justice and Attorney General (JAG) also receive some funding.

A smaller percentage of the overall funding, \$82.2 million constitutes the states commitment to the National Agreement ‘A Place to Call Home’, which will provide 143 new dwellings in Queensland over five years. The Queensland target is for 23 dwelling in the first four years, to assist 94 individuals per year, and in the final year 51 dwellings will be built to assist 209 individuals. In addition to extra housing, several new programs have commenced and increased funding has been provided for some existing services.

The National and State Government goals to reduce homelessness has resulted in significant activity and interest in the development of evidence based programs to re-engage people who experience homelessness back into the community. As in Europe and the UK a framework of social inclusion to tackle disadvantage has been one of the drivers of this policy:

Tackling homelessness is about more than shelter and support. The focus must be on building the capacity of people and communities to maximise everyone’s potential to participate economically and socially (Australia. Homelessness Taskforce, 2008, p. 19).

From this perspective local and national responses to homelessness require an evidence base that will inform services on processes that increase social participation

for people who have experienced homelessness. Existing evidence on social inclusion originates from the United States and UK where similar efforts have been in progress for a number of years. There is a paucity of Australian literature in this area.

1.9 Social Inclusion and the Concept of Marginalisation

Homelessness has recently become a focus of government intervention in a number of developed countries across the world. Political perspectives of homelessness are encapsulated within a broader agenda of social inclusion that recognises the reality of disadvantage experienced by some people within some of the strongest economies and advantaged societies in the world. There is a danger that the social inclusion agenda fails to address disadvantage and focuses instead on a growing demand on all individuals to contribute to society through employment, and community participation, while denouncing the rights of people to voluntarily self exclude and choose to live differently to mainstream society (Commonwealth of Australia, 2009; Crane et al., 2005; Humpage, 2006; Hunter, 2000; Parsell, 2011; Sen, 2000).

The Australian Government's approach to homelessness is driven by the framework of social inclusion (Australia. Homelessness Taskforce, 2008). A broader goal of this agenda is building the capacity of people and communities to maximise economic and social participation (Australia. Homelessness Taskforce, 2008).

The Australian Government's Social Inclusion Agenda provides a policy framework and approaches that aim to engage individuals and communities experiencing disadvantage. With a vision of a socially inclusive and fairer Australia, this agenda is about enabling all individuals, regardless of background or circumstance, to participate in the economic, social and civil life of their communities (Australian Government, Department of Education, Employment and Workplace Relations (DEEWR), submission no 69, p. 2. Cited in Commonwealth of Australia, 2009, p. 53).

From a cultural perspective social inclusion fails to recognise the different world views of Indigenous people, emphasising the primacy of the mainstream and therefore

non-Indigenous world view. While social inclusion actively seeks to ‘close the gap’ of Indigenous disadvantage, there has been criticism of this approach (Humpage, 2006; Hunter, 2008):

In theory, the social inclusion literature (and to a lesser extent social exclusion) is consistent with the promotion of non-discrimination and inclusion of Indigenous perspectives in laws, policies and programs, and the promotion of the full and effective participation in decisions that affect Indigenous people. However, in practice it has been difficult to redefine development processes to ensure that they recognise the different ‘world views’ of Indigenous and other Australians, let alone deal with the enormous cultural diversity within the Indigenous population (Hunter, 2008, p. 11).

Politically, social exclusion is the term currently used to discuss marginality, deprivation and welfare dependency (Bryne, 2005; Horsell, 2006). Social exclusion has replaced previous concepts of the ‘undeserving poor’ and the culture of poverty espoused by the political right, although its use in highlighting the personal rather than the structural features of social inclusion is similar (Bryne, 2005; Horsell, 2006). The drivers of social exclusion in Australia are: poverty, low income and inequality; lack of access to the job market; poor educational outcomes; poor health and wellbeing; lack of access to social supports and networks; exclusion from services; and discrimination (Commonwealth of Australia, 2009).

The terms social inclusion and exclusion in this thesis refers to a political process, intention or action, rather than a social science concept or theoretical framework. My intention is to differentiate between social exclusion/inclusion as a political discourse and the broader social science concepts of marginalisation and a philosophical understanding of justice. The concept of justice has also been identified in relation to occupational therapy and will be discussed later in this chapter. A focus on justice and marginalisation in relation to homelessness allows acknowledgement of the different experiences, knowledge(s) and agency of people experiencing homelessness in relation to wellbeing (Bryne, 2005; Horsell, 2006; Robinson, 2003).

The marginalisation of people experiencing homelessness has been previously discussed in the literature (Cosgrove & Flynn, 2005; Harnett & Johnson, 2008; Melnitzer, 2007; Schiffer & Schatz, 2008). Media representation of homelessness portrays people who are homeless as ‘lackers, slackers or unwilling victims’ (Rosenthal, 2000). The view is consistent with beliefs that ‘the homeless’ are undeserving and often criminals with occasional incidents where homeless people were victims of crime, in stark contrast to the representation of those who provide services as heroes and angels (Zufferey & Chung, 2006). Public opinion obtained by random telephone interviews with people in five different countries demonstrate less compassionate attitudes towards people experiencing homelessness in the UK and the US than in Germany, Belgium and Italy (Toro et al., 2007). However people who have previously experienced homelessness are significantly more compassionate than those who have not (Toro et al., 2007).

The stigma associated with homelessness is the basis of prejudice and discrimination across society, including housing, health and service organisations, and has a direct influence on the way that people experiencing homelessness perceive themselves as separate from, and other than, the rest of society (Cosgrove & Flynn, 2005; Finfgeld-Connett, 2010; Melnitzer, 2007; Williams & Stickley, 2011). Stigmatisation and discrimination contribute to a lack of participation in occupations through restricting access to opportunities and reluctance on the part of those experiencing homelessness to participate in situations where they will experience stigma. Some authors have identified how services specifically directed to meet the needs of people who are homeless actually perpetuate the experience of prejudice for some individuals (Cosgrove & Flynn, 2005; Melnitzer, 2007). Inclusion in everyday occupations together, and in cooperation, with housed member of society can decrease perceptions of stigma and increase empathy (Melnitzer, 2007).

There is a risk that research focusing on people who are economically and socially marginalised will inadvertently reinforce beliefs and views that create stigma. This current research project recognises the value of occupations to structure everyday life and sustain wellbeing for people who are homeless. By exploring how these occupations can be further harnessed, the research acknowledges the structures, agency, social capacity, performativity and power of those that experience

homelessness to effect change and challenge wider power structures within society (Hurley, 2007).

1.10 An Occupational Perspective of Wellbeing and Justice

As an occupational therapist, my professional epistemology is relevant to this study. Occupational therapy is founded on a belief that there is a universal and fundamental relationship between ‘people’s dignified and meaningful participation in daily life and their experience of health, wellbeing and quality of life’ (Pollard et al., 2009, p. 3). The complexity of occupation as a concept is recognised (Ikiugu, 2005; Molineux & Rickard, 2003; Wilcock, 1999; Yerxa et al., 1990) and indicates the need to approach research focusing on occupation from multiple perspectives or dimensions (Hammell, 2004; Wilcock, 1999). Four dimensions of occupational engagement are discussed in the literature: doing, being, belonging and becoming (Hammell, 2004; Lyons, Orozovic, Davis, & Newman, 2002; Wilcock, 2006). The link between occupation and wellbeing is attributed to the synthesis of doing, being, belonging, and becoming as distinguishable dimensions of occupation that are not exclusive of each other. An analysis of 10 published research articles, undertaken at the beginning of this study, identifies the characteristics and influence on wellbeing ascribed to occupation (Black & Living, 2004; Fieldhouse, 2003; Griffiths & Corr, 2007; Knight et al., 2007; Lyons et al., 2002; Reynolds, 2003, 2004; Scheerer, Cahill, Kirby, & Lane, 2004; Stone, 2005; Wilding, May, & Muir-Cochrane, 2005). The analysis of these articles is summarised in Table 1.6.

Table 1.6 Research supporting the four dimensions of occupation and its relationship to wellbeing

Dimension	Doing	Being	Belonging	Becoming
Definition of the dimension	Purposeful goal orientated activities including sleep.	Characteristics or quality of the inner person, self-identity.	The sense of being included through social interaction mutual support and friendship.	Recognising and striving towards a potential.
Description of the factors that can be studied	Being busy, filling one’s time with socially and culturally	Contemplation or enjoyment of the inner life; reflection, being introspective or	Establishment of occupational roles and connectedness with others.	Envisioning a future self or possible life not yet achieved.

	valued activities that provide purpose in life.	meditative.		
Influence of dimensions on wellbeing	Meeting ones physical, mental and social needs through routine and balance of occupations.	Experiencing pleasure in life for its own sake; also in creativity and flow experiences.	Affirming self through relationships with others.	Using strengths to move forward, take steps towards changes. Hopefulness for future.
References	Lyons et al., 2002 Fieldhouse, 2003 Black & Living, 2004 Reynolds, 2004 Scheerer et al., 2004	Lyons et al., 2002 Stone, 2005 Wilding et al., 2005 Griffiths & Corr, 2007 Reynolds, 2003 Scheerer et al., 2004	Fieldhouse, 2003 Black & Living, 2004 Knight et al., 2007	Lyons et al., 2002 Reynolds, 2003 Reynolds, 2004 Stone, 2005

Central to the science of occupation is the understanding that engagement in meaningful and purposeful occupation is a basic human need, and therefore when a person's opportunities or ability to participate in occupation is restricted this will negatively affect the health and wellbeing of the individual (Stadnyk et al., 2010). When participation in occupations that fulfil basic needs, demonstrate capacities and abilities, and express identity is restricted a situation of occupational injustice arises (Wilcock, 2006).

The concept of occupational justice, based on the right of individuals to pursue occupations that meet their individual and different needs, is evolving (Stadnyk et al., 2010). Occupational justice affirms individual and communal rights to opportunities to engage in the occupations that will enable them to flourish and have full citizenship (Townsend & Wilcock, 2004; Wilcock, 2006). Distinct from social justice, occupational justice focuses on 'occupational equity, occupational fairness, occupational empowerment, occupational rights and responsibilities, occupational enablement, expression and opportunity, occupational satisfaction and occupational wellbeing' (Wilcock, 2006, p. 247). For each individual, occupational needs are driven by a range of contextual factors including age, gender, ability, wealth, ethnicity, location and health status.

The opportunity to meet individual occupational needs is supported through structural and political factors such as economy, policy and cultural values operationalised through programs and institutions such as health systems, income support, housing, employment, education and community facilities. Occupational equity and fairness is not achieved by each person being able to do the same things, rather occupational justice is achieved through ensuring the capacity and opportunity for individuals to meet their occupational needs (Stadnyk et al., 2010; Wilcock, 2006). Although the theory of occupational justice is still evolving, the principles of occupational justice and the fundamental human right to meaningful occupation drives the research design for this study.

A number of terms have been discussed in the occupational therapy literature to describe situations where occupational justice is challenged, these terms are not exclusive of each other and situations of injustice frequently feature more than one inhibitor. Occupational deprivation, occupational alienation, occupational marginalisation and occupational apartheid are terms used to describe situations where individuals are unable or denied opportunities to engage in occupations that fulfil their occupational needs for reasons outside of their control (Pollard et al., 2009; Stadnyk et al., 2010; Townsend & Wilcock, 2004). Definitions of these terms are provided in the glossary at the end of this thesis. As the theory of occupational justice evolves, the need for questioning, testing and critique has been identified (Nilsson & Townsend, 2010; Stadnyk et al., 2010). Within this thesis an ‘occupational justice lens’ will be used to critically analyse the opportunities and resources for occupational participation available to homeless people in Townsville to achieve a state of subjective wellbeing and empowerment (Nilsson & Townsend, 2010; Townsend & Wilcock, 2004).

Occupational justice recognises ‘occupational rights to inclusive participation in everyday occupations for all persons in society, regardless of age, ability, gender, social class, or other differences’ (Nilsson & Townsend, 2010, p. 57). Going beyond the aim of enabling individual wellbeing, occupational justice aims towards equitable opportunities, responsibilities, rights and privileges calling for increased action towards changing social and structural processes underpinning injustice (Whiteford &

Townsend, 2011). It is anticipated that this research will contribute to its conceptual development of occupational justice theory and highlight how the concept of occupational justice can be applied to homelessness in terms of policy and service provision.

1.11 The Research Questions

This case study takes an occupational approach to exploring the lives and experiences of homeless people in Townsville. The significance of occupational engagement to achieving and maintaining wellbeing has not previously been explored with people who experience homelessness and marginalisation and provides an opportunity to expand on the theoretical understanding of occupational injustice. The tropical and cultural setting of this geographical region offers a unique context for this study, with higher rates of homelessness and significantly greater proportions of Indigenous homelessness being found here. This study thus provides a uniquely Australian and Indigenous perspective on homelessness.

Four research questions guided the study and provided a structure for this case study:

1. How do homeless people in Townsville perceive wellbeing and understand it in relation to their lives?
2. What are the occupations of people who are homeless? What occupations are perceived to be related to wellbeing? What meaning is ascribed to occupation?
3. What is the relationship between occupational engagement and wellbeing for people experiencing homelessness in Townsville?
4. How do services assist people experiencing homelessness in Townsville to improve their wellbeing?

1.12 Aim of the Study

The aim of this study was to explore the relationship between engagement in occupation (everyday activities) and the experience of wellbeing for people who are homeless in Townsville.

This study provides an understanding of the occupations of people experiencing homelessness and contributes to the occupational perspective through discovering the processes by which occupation influences subjective perspectives of wellbeing.

1.13 Chapter Conclusion and Thesis Overview

Returning to the quote at the beginning of the chapter, the assertion that an ‘excellent match’ exists between the needs of the homeless population and the ‘fundamental expertise’ of the occupational therapy profession (Grandisson et al., 2009) deserves more rigorous research. Such a determination requires careful and deliberate analysis of the literature on homelessness and theoretical knowledge of the profession. The current study contributes the voice of people experiencing homelessness in Townsville and recognises cultural and environmental influences on occupational engagement. This chapter grounds the case study in its geographic context and within an occupational perspective of wellbeing; it provides a summary of the fundamental concepts of the topic, definitions, causes, and demographics of homelessness relevant to the case study and outlines the current government policy based on social inclusion to counteract the reality of marginalisation on people experiencing homelessness. A brief outline of the occupational perspective of wellbeing and justice as espoused within the occupational literature is also provided.

Chapter 2 provides a review of the occupational therapy specific body of knowledge on homelessness, including practice evidence and theoretical development of the concepts of occupation and occupational justice in relation to homelessness. This chapter is based on two articles: A systematic review and a meta-synthesis of previous research studies (Thomas, Gray and McGinty, 2011b; in press). Chapter 3 comprises a narrative review of non-occupational therapy literature as it pertains to the occupations and wellbeing of people experiencing homelessness. Through undertaking reviews of both the occupational therapy literature and literature from other disciplines as a foundation for this study, the current evidence supporting the significance of occupation to the lives of people experiencing homelessness is outlined.

Chapter 4 provides a description of my own background as a researcher and the research journey I undertook through this project and compliments Chapter 5 that

outlines the research methodology and the methods used to collect and analyse the data. Chapters 6 through to 10 successively outline the multiple phases of the study and of the reflexive journey. Chapter 6 reports on a pilot study on the meaning of art as an occupation to people experiencing homelessness, while Chapter 7 addresses the concept and meaning of wellbeing to people experiencing homelessness. These two chapters are reproductions of articles that are nearing publication in international journals (Thomas, Gray, McGinty, & Ebringer, 2011; Thomas, Gray, McGinty, & Miles, under review). The main results of the study are provided in Chapters 8, 9 and 10 and include the voices of people who are homeless and the support staff from services provided in Townsville. Three collective narratives of homelessness and occupation are provided to demonstrate significant social and cultural differences within the population. Chapter 11 provides the discussion of these results, and its implication to future practice and policy and concludes the thesis.

The current project is significant in that it is the first Australian study of homelessness conducted by an occupational therapist and potentially offers an expansion of the Australian homelessness literature to include an occupational perspective. Similarly, the project provides an Australian perspective to the occupational therapy literature on homelessness. This project is not the end of the journey, in some respects it is the start of a future career as an occupational therapist researcher and educator, and of an expansion of knowledge into the occupational significance of wellbeing in homelessness to which I hope I will continue to contribute.

1.14 Publications from this Project to Date

Table 1.7 Publications (see Appendices A–F)

Title	Publication
Thomas, Gray & McGinty (2010). Homelessness and the right to occupation and inclusion: An Australian perspective	WFOT Bulletin, 62, 19-25. (Peer reviewed international journal)
Thomas, Gray & McGinty (2011a). Occupational therapy at the cultural interface: Lessons from research with Aboriginal and Torres Strait Islander Australians	Australian Occupational Therapy Journal, 58, 11-16. (Peer reviewed journal, ISI Journal Citation Rehabilitation: 33 / 43 Impact Factor: 0.634, SCImago ranking 0.035, SNIP 0.648)

Thomas, Gray & McGinty (2011b). A systematic review of occupational therapy interventions with homeless people	Occupational Therapy in Health Care, 25(1), 38-53. (Peer reviewed international journal, SCImago ranking 0.033, SNIP 0.579)
Thomas, Gray & McGinty (under review). Participation in occupation: Using meta-synthesis to reframe evidence regarding the value of occupation with homeless persons	Australian Occupational Therapy Journal. (Peer reviewed journal, ISI Journal Citation Rehabilitation: 33 / 43 Impact Factor: 0.634, SCImago ranking 0.035, SNIP 0.648)
Thomas, Gray, McGinty and Ebringer (2011). Homeless adults engagement in art: Identity, recovery and social inclusion	Australian Occupational Therapy Journal, 58, 429-436. (Peer reviewed journal, ISI Journal Citation Rehabilitation: 33 / 43 Impact Factor: 0.634, SCImago ranking 0.035, SNIP 0.648)
Thomas, Gray, & McGinty (accepted for publication). An exploration of subjective wellbeing among people experiencing homelessness: A strengths-based approach.	Social Work and Health Care. (Peer reviewed International Journal, Thomas Reuters Impact factor 0.483, SCImago JR 0.047, and SNIP 0.658)

Table 1.8 Conference Presentations

Title	Conference
Occupational Therapy and Homelessness	OT Australia National Conference, 2009, Melbourne
Methodological Issues in Researching Homelessness in Australia	WFOT Congress, Santiago, Chile, 2010
Occupation without Occupation: Stories from People Experiencing Homelessness	OT Australia National Conference, Gold Coast, 2011
Homelessness during a Cyclone: The effects of Natural Disasters on People Living on the Margins	Asia Pacific Conference, Chang Mai, Thailand, November 2011
	Planned
To be confirmed: Research findings on interventions that work	National Australian Homelessness Conference

Table 1.9 Future Publication Plan

Indigenous Homelessness: An Occupational Justice Perspective	In preparation
Using Composite Narratives in Homelessness Research	In preparation
Participation in Occupations during Homelessness: Narratives Voices of Single Men and Women with Children	In preparation

Homelessness during a Cyclone: The effects of Natural Disasters on People Living on the Margins

In Preparation

Chapter 2

Occupational Therapy Perspectives of Homelessness: A combined systematic review and meta-synthesis

2.1 Introduction

A first step in the preparation for this journey involved an extensive review of the occupational therapy literature on homelessness. This began a professional journey into the occupational therapy literature to discover what was already known. The aim of this chapter is to draw together the relatively small body of evidence in the literature that contributes a specific occupational perspective of homelessness to the broader academic discourses on homelessness. This chapter is based on a systematic review of the quantitative literature and a meta-synthesis of the qualitative research (See Appendices C and D) undertaken at the commencement of the study and resulted in two publications in the occupational therapy literature (Thomas, Gray, & McGinty, 2011; under review)

An initial search of published occupational therapy literature from 1990 – 2008 elicited 39 articles and a further four articles have been published since 2008, making a total of 43, not including the publications resulting from this study (see page 297 for list of publications). This chapter begins with an overview of the literature over the last twenty years before outlining the method and findings of the systematic review and the meta-synthesis. A discussion of the past, present and future research and practice challenges for occupational therapy is provided.

2.2 Occupational Therapy's Contribution to the Literature

Between 1990 and 2000 only 11 articles were published on occupational therapy and homelessness, most of which originated in the US and describe programs undertaken either by innovative occupational therapists (e.g. Snyder, Clarke, Masunaka-Noriega, & Young, (1998) 'New Occupations for Life Program' and Kannenberg & Boyer (1997) 'Working Zone' for homeless youths) or by students in non-traditional fieldwork settings (e.g. Drake (1992) day care for homeless children and Heubner & Tryssenaar (1996) fieldwork experience in a homeless shelter). Three articles from the

UK provide a more theoretical approach: Kavanagh and Fares (1995) apply the 'Model of Human Occupation' (Kielhofner, 2008) to interventions with homeless adults with mental illness; Mobsby (1996) provides a guide for the role of therapists working in hospitals who may be referred clients who are homeless ; and Mitchell and Jones (1997) review social policy and the role of occupational therapy. Prior to 2000, the literature clearly confirms that working with people who are homeless was unusual for occupational therapists and the focus for an occupational therapy role was primarily on issues of disability.

The increase in publications since 2000 is largely due to a special edition on homelessness in the journal *Occupational Therapy in Health Care*, published in 2006 and that contained 12 articles. This journal special edition was also published as an edited book (Swensson Miller, Hertzberg, & Ray, 2006) and marks the '...infant stage of creating a body of literature on how to collaborate with people who are homeless, to facilitate their occupational performance and their full participation in society' (Herzberg, Ray, & Swensson Miller, 2006, p. 6). Together, the opinion articles, program descriptions and evaluations, found in this special edition provide a range of occupational therapy perspectives of homelessness rather than a unified approach. For example Johnson (2006) applies the theory of Occupational Adaption to people experiencing homelessness, using case studies, which demonstrate an inability to perform daily activities successfully. Similarly Munoz, Garcia, Lisak and Reichenbach (2006) used the Canadian Occupational Performance Measure (COPM) to assess the needs of people who are homeless under the categories of self care productivity and leisure. Throughout the publications in this special edition there is a focus on deficit models of homelessness and the problems and needs that occupational therapists may address through their interactions with homeless people.

As a health profession occupational therapy remained largely blind to the problem of people experiencing homelessness, providing a limited response framing homelessness as a individual problem and applying a therapeutic approach to overcome deficits in skills. An alternative understanding of homelessness from an occupational perspective is outlined by two authors. Petrenchik (2006) presents an overview of different perspectives on homelessness, and challenges occupational therapists to be critical of dominant perspectives of deficit models when working with

homeless people. Moving away from the development of programs within shelter settings, she proposes occupational therapists should aim to enable participation at national and regional levels by minimising barriers and constraints as well as through direct service by expanding opportunities for mastery and achievement in the natural environment. Similarly, in the presentation of an exploratory study of the occupational concerns of women with children living in a shelter, Van Leit, Starrett and Crowe (2006) recognise the marginalised position of homeless mothers and recommend the use of an occupational justice framework for interventions.

An occupational justice approach to homelessness is the basis of an article published in the initial stage of this study (Thomas, Gray, & McGinty, 2010; see Appendix A). Based on the principles of the *World Federation of Occupational Therapists Position Statement on Human Rights (2006)*, occupational therapists are mandated to support individuals, groups and communities experiencing homelessness to enhance participation and achieve occupational justice:

Achievement of this goal requires both an individual client centred approach and a broader political response to increase awareness and overcome the barriers to participation that currently exist. Current occupational therapy literature provides a basis for future service provision, however the focus of intervention must move away from skill development and training to encourage occupational engagement in culturally appropriate and socially valued activities (Thomas et al., 2010, p. 24).

Internationalisation of the occupational therapy literature has become more evident since 2000, with publications from Ireland (Boland & O'Mahony, 2002), Sweden (Heuchemer & Josephsson, 2005), South Africa (Glass, Sevitz, Williamson, Wink, & Duncan, 2006), Canada (Grandisson et al., 2009), the UK (Chard, Faulkner, & Chugg, 2009) and Australia (Lloyd & Bassett, 2010; Murtagh, Lloyd, & Bassett, 2010). The current and potential role of occupational therapy with people experiencing homelessness has been the focus of three recent articles; two describing the work of the Homeless Health Outreach Team in Australia (Lloyd & Bassett, 2010; Murtagh et al., 2010) and the third being a study of occupational therapists perceptions of their role (Grandisson et al., 2009). These articles suggest that there are emerging roles for

occupational therapy in advocating for structural change, providing outreach services and in case management. A need for further research and educational content within occupational therapy curricular is recognised.

The most recent additions to the occupational therapy literature illustrate the increased interest in homelessness research within occupational therapy. Chard et al. (2009) conducted a phenomenological exploration of the occupations of eight homeless men within a shelter situation where motivation and meaningful activity was stifled. Chapleau (2010) interviewed two individuals in hospice care with a homeless resident to explore the personal and structural factors impacting on wellbeing. This research suggests that work opportunities, training and placement provide opportunities for meaningful occupation. Both authors confirm a role for occupational therapists in encouraging opportunities for meaningful occupation, whilst identifying the prevalent individual and structural challenges. The current research suggests that there is a need for a wider appreciation of the benefits of occupation in homelessness policy.

As the focus on homelessness and social policy continues to develop across the world, there are increasing opportunities for occupational therapy research and practice in relation to working with people experiencing homelessness. In the initial stages of this project, a review of the evidence of the effectiveness of occupational therapy in providing interventions for people experiencing homelessness was conducted. Due to the lack of good quality experimental data, this review included publications that provided evidence of the occupational needs for those experiencing homelessness. The combined results of a systematic review of the quantitative literature and a meta-synthesis of the qualitative literature conducted in 2008 are provided below.

2.3 Literature Search Method

A literature search was conducted to identify publications pertaining to homelessness and occupational therapy from 1990 to 2008. The electronic databases CINAHL, OTDBASE, Psych Info, MEDLINE, and First Search were searched as these include peer reviewed occupational therapy publications. Search terms related to the focus of this review were developed in conjunction with a health-faculty librarian to maximise the effectiveness of the search. Searches included both the keywords ‘occupational

therapy' and 'homelessness' in all the databases. Additional terms were generated using synonyms and Medical Subject Headings and used with occupational therapy and homelessness literature separately and then in all possible combinations.

Identified articles were read and reference lists were used to obtain any additional articles and unpublished research dissertations not found in the initial search.

Additionally, hand searches of recent editions of the journals of the British, American, Canadian, Australian, and Swedish occupational therapy associations, as well as *Occupational Therapy Journal of Research*, *Occupational Therapy in Health Care*, and *Occupational Therapy in Mental Health*, were undertaken to ensure that articles were not missed. Searching continued until no new articles were evident.

2.4 Inclusion and Exclusion Criteria

Each article was screened according to specific inclusion and exclusion criteria to determine relevance for the review. It was initially intended that this review would be limited to research studies providing evidence for the effectiveness of an occupational therapy program. However, as the paucity of outcome studies became apparent, it was decided to revise the selection criteria to include research studies that identified occupational needs in the review.

The inclusion criteria for selection were:

- 1) Articles that described a research project with a clearly recognisable research methodology that supported the results and conclusions of the study
- 2) Research projects that included participants who were either currently or recently homeless
- 3) Articles that evaluated an occupational therapy program implemented for homeless people or the occupations or identified occupational needs of homeless people.

Articles were excluded from the review if the content:

- 1) Described services without providing an evaluation of their effectiveness
- 2) Only included expert opinion or narrative reviews

- 3) Contained studies of the perspectives of occupational therapists rather than homeless people
- 4) Was already published in another manuscript.

The heterogeneity of research methods in the studies reviewed utilised suggested the need to further discriminate between studies based on the level of evidence provided and the results of a critical appraisal process. According to Taylor (2007) the best research evidence for effectiveness studies in occupational therapy is obtained from systematic reviews of randomised controlled studies, followed by randomised controlled studies, experimental research such as clinical trials, and single subject design studies. Since there were very few randomised trials of occupational therapy interventions, an extended body of evidence was utilised including all qualitative and quantitative studies identified (Murphy, Robinson, & Lin, 2009). Evaluation of the quality and design of studies included in this review was ensured through the critical appraisal process.

2.5 Critical Appraisal Process

Critical appraisal of each article included in the systematic review was undertaken to identify the best available evidence, using the *McMasters University Guidelines and Appraisal Forms for Critical Review for Quantitative Research* (Law, Stewart, Pollock, et al., 1998) and *McMasters University Guidelines and Appraisal Forms for Critical Review for Qualitative Research* (Law, Stewart, Letts, et al., 1998). These critical appraisal tools are designed for use in evidence based practice in occupational therapy and have previously been used in allied health systematic reviews (Anaf & Sheppard, 2007; Barras, 2005; Steel & Gray, 2009).

All included studies were evaluated using the criteria suggested in the McMaster's (1998) appraisal tools. To ensure reliability of method, seven articles were randomly selected and independently reviewed by my supervisors using the same process. Agreement on scores between all reviewers was 80%. Subsequent comparison and discussion allowed for a consensus on the allocation of final scores. All studies were then ranked according to the level of evidence provided. The criteria and scoring system for each can be seen in Table 2.1 and Table 2.2.

Table 2.1 Critical Review of Qualitative Articles

Evaluation Criteria	Boland & O'Mahony (2002)	Davis & Kutter (1997)	Glass et al (2006)	Gutman et al. (2004)	Helfrich et al. (2006)	Helfrich an Fogg (2007)	Munoz et al (2006)
Study Purpose (1)	1	1	1	1	1	1	1
Literature (1)	1	1	1	1	1	1	1
Study Design (1)	1	1	1	1	1	1	1
Sampling (2)	0	2	1	1	1	1	1
Outcomes (2)	0	2	2	1	1	2	1
Intervention (3)	0	0	0	1	1	0	0
Results (4)	3	1	1	3	2	3	1
Conclusions (1)	1	1	1	1	1	1	1
Total (possible 15)	7	9	8	10	9	10	7

Table 2.2 Critical Review of Qualitative Articles

Evaluation Criteria	Aviles and Helfrich (2004)	Heuchemer & Josephsson (2006)	Johnson (2001)	MacDonald (2006)	Schultz-Kron (2004)	Swenson Miller et al. (2005)	Trysenaar et al. (1999)	Van Liet et al. (2006)
Study Purpose (1)	1	1	1	1	1	1	1	1
Literature (2)	2	2	2	2	2	2	2	1
Study Design (3)	2	3	3	3	2	2	2	1
Sampling (3)	1	2	2	1	2	0	2	2
Data Collection (6)	3	3	4	3	3	2	2	4
Data Analysis (5)	4	5	3	4	5	4	4	3
Trustworthiness (5)	1	2	1	3	5	2	0	1
Conclusions (2)	2	2	1	2	2	2	2	2
Total (possible 27)	16	20	17	19	22	15	15	15

2.6 The Systematic Review Results

2.6.1 Critical Appraisal Results

A total of 40 publications relevant to the provision of occupational therapy to people experiencing homelessness were identified from the literature search. Seventeen

research studies, including 16 journal articles and one doctoral thesis chapter, were identified using the selection criteria. Seven studies; three experimental studies and four descriptive studies, were appraised using the quantitative appraisal tool (Law et al., 1998a) and ranked according to the level of evidence provided (Table 2.1). The critical appraisal scores ranged from 7–10 of a possible 15 points (i.e. 50 – 66%) and therefore indicate evidence of moderate level. Articles with the lowest scores typically failed to outline the details of the research methodology used and reported descriptive statistics only. Eight qualitative studies were appraised using the qualitative appraisal tool (Law et al., 1998b, Table 2.2). Mixed method studies were allocated according to the analysis method primarily used.

There is considerable heterogeneity in the aims, methods and participants utilised in the quantitative studies as well as the evaluation tools used to collect data, making direct comparisons of findings impossible. Authors justified the use of assessment methods through previous research, however, as has been previously identified there is no unified or consistent assessment measure adopted (Herzberg et al., 2006). Lack of statistical results and the wide range of outcome measures used precluded meta-analysis of the existing evidence.

2.6.2 Methodological Quality

It is important to take into account the quality of evidence when interpreting the review findings as reported studies have not provided a high level of evidence to date thereby limiting the findings of this systematic review. Of the seven papers reviewed, only three attempted to evaluate interventions provided, while the remaining four provided descriptive statistics to highlight the needs of people experiencing homelessness. The hierarchy of evidence proposed by the National Health and Medical Research Council (1998) regards descriptive studies as the lowest level of evidence (Level IV). Occupational therapy frequently lacks higher levels of evidence and randomised controlled trials are rare. There is an urgent need for more research to be conducted to demonstrate the effectiveness of interventions with homeless people. In addition, heterogeneity across the outcome measures precludes the ability to directly compare study results. The results of the critical appraisal process demonstrate an average score across the studies of 8.3 out of a possible 15 (Table 2.1). These scores reflect a varying quality, tending to upper mid-range. This

‘medium’ quality research, combined with a low level in the hierarchy of evidence, indicates that available research is sufficient to inform future studies but cannot be used to confirm best practice in occupational therapy with people experiencing homelessness.

Cautious use of the findings of this review is also recommended due to the diversity of participants in the contributing studies. Five of the studies were conducted in the US (Davis & Kutter, 1998; Gutman et al., 2004; Helfrich, Aviles, Bandiani, Walens, & Sabol, 2006; Helfrich & Fogg, 2007; Munoz et al., 2006), one in Ireland (Boland & O'Mahony, 2002), and one in South Africa (Glass et al., 2006). Two of the studies focused exclusively on the experiences of women who were homeless and had experienced domestic violence (Davis & Kutter, 1998; Gutman et al., 2004), while the other study participants were primarily male. The populations represented may restrict the applicability of the results to Western developed countries. Many of the studies were undertaken utilising small sample sizes, limiting the potential to generalise to larger populations.

2.6.3 Outcomes of Occupational Therapy Interventions

Three articles reported on the effectiveness of occupational therapy interventions provided to specific client groups within the homeless population. First, Gutman et al. (2004) provided a range of 12 interventions to women experiencing domestic violence and homelessness in weekly sessions over the course of six months. Interventions were based on participants identified needs and were designed to address cognitive deficits that may have been the result of previous violence. Intervention involved breaking down clients goals into graded components and setting small achievable tasks using ‘compensatory strategies, repeated practice and adaptive devices’ (p. 76.). Interventions were provided in group and individual sessions to women and assessed using Goal Attainment Scale (GAS) scores that were converted to T scores for analysis.

Second, Helfrich et al. (2006) implemented and evaluated three life skills interventions based on the model of human occupation and empowerment theory. Each intervention was designed for different groups within the homeless population. An employment module was delivered to youths, a finance management module for

domestic violence victims, and a food and nutrition for adults with mental illness. In total 73 participants enrolled in the four week programs, although only 32 completed pre and post tests using the Ansell Casey Life Skills Assessment (Ansell & Casey Family Programs, 2005) mastery score.

Third, Helfrich and Fogg (2007) studied the effectiveness of life skills intervention provided by occupational therapy staff to 51 homeless adults with mental illness. Interventions were based on social learning theory and comprised 6 group sessions and 6 individual sessions. Four modules were provided including room and self care management, food management, money management and safe community participation. The results of this study used analysis of post intervention scores on the Practical Skills Test (Helfrich & Fogg, 2007) with those obtained at three and six months follow-up.

The outcomes for each of these studies demonstrate improved skills as a result of the occupational therapy intervention provided. Helfrich and Fogg (2007) report significant improvement between post intervention and 3 month follow-up results in room and self care management, and safe community participation modules. For money management and food management, continued improvement over time was not evident. Helfrich et al. (2006) and Gutman et al. (2004) report improvement rates post intervention of 62% and 81% respectively across the modules and participant groups. Further Helfrich et al. (2006) demonstrated statistically significant changes in the domestic violence victims group who were undertaking financial management intervention. In Gutman et al.'s (2004) study, small numbers in each intervention negates the value of further analysis, but raw GAS scores were provided for participants of each module.

2.6.4 Identified Occupational Therapy Needs

All seven reviewed studies for the quantitative analysis provided data that identified the occupational needs and goals of people who experience homelessness. Four areas of occupational therapy needs were identified: money management, coping skills, employment and education, and leisure skills

Money Management

Money management, banking skills and budgeting were identified as areas for occupational therapy intervention in all studies except Boland and Mahoney (2002), which focused on work expectations. Poor budgeting skills are compounded by extreme poverty resulting from lack of employment, as well as by alcohol and drug abuse. The need for basic knowledge in relation to banking and budgeting was identified (Gutman et al., 2004; Helfrich et al., 2006; Munoz et al., 2006).

Coping Skills

Interventions focused on increasing life skills were supported by Davis and Kutter (1998) and included stress management and developing coping skills. Similarly, Helfrich et al. (2006) supported a focus on stress management, anger management and assertiveness skills. While these interventions may arguably be provided by health professionals outside of occupational therapy, increasing these life skills supports the achievement of occupational goals and life roles. The value of setting goals and progressing towards them is illustrated in the use of GAS scores in one study (Gutman et al., 2004) and indicated in the habituation component in the study by Glass et al. (2006). High levels of mental illness and substance abuse are noted in some studies suggesting that occupational therapy interventions should also be aimed towards enhancing mental health and sobriety for those who identified these as a goal (Boland & O'Mahony, 2002; Munoz et al., 2006). Providing interventions that enhance personal safety and boundary setting for women who had experienced domestic violence was described in two studies (Davis & Kutter, 1998; Gutman et al., 2004).

Employment and Education

Several studies explored the value of occupational therapy to enhance employment opportunities through meeting work or education goals (Boland & O'Mahony, 2002; Glass et al., 2006; Gutman et al., 2004; Helfrich et al., 2006; Munoz et al., 2006). On a practical level, unemployment contributes to lack of financial security and inability to obtain more secure accommodation. In addition, unemployment is associated with a lack of occupational routines (Boland & O'Mahony, 2002), status in the community and hope for the future (Munoz, Reichenbach, & Witchenger Hanson, 2005). This review provides evidence to suggest that occupational therapy interventions should be directed to enhance the employment and educational opportunities for people

experiencing homelessness (Boland & O'Mahony, 2002; Glass et al., 2006; Gutman et al., 2004; Helfrich et al., 2006; Munoz et al., 2006).

Leisure Activities

Involvement in leisure activities was supported in two studies (Davis & Kutter, 1998; Gutman et al., 2004), with evidence from the latter suggesting that engagement in leisure activities reduced alcohol and drug use for four of the seven participants of a leisure module. Conversely, only 10% of all goals identified by participants of one study (Munoz et al., 2006) related to leisure activities or concerned interpersonal relationships, and quiet time.

Together these seven articles indicate an emerging role for occupational therapy for people experiencing homelessness, including the need to address a number of skill deficits, provide opportunities to support positive life experiences, and reduce vulnerability and disadvantage.

2.7 The Meta-synthesis Results

2.7.1 Critical Appraisal Results

The determination of adequate quality using a critical review tool (Law et al., 1998b) resulted in eight selected studies being included in this meta-synthesis. The qualitative studies included six exploratory/phenomenological studies (Aviles & Helfrich, 2004; Heuchemer & Josephsson, 2005; McDonald, 2006; Schultz-Krohn, 2004; Swenson-Miller, Bunch-Harrison, Brunbuugh, Kutty, & Fitzgerald, 2005; van Leit et al., 2006), a qualitative study using case studies (Johnson, 2001) and one mixed method descriptive survey (Tryssenaar, Jones, & Lee, 1999).

The critical appraisal of the qualitative studies included in this review demonstrates adequate quality of evidence used for this meta-synthesis. The appraisal process determined the quality of the eight studies as moderate, scoring from 15–22, out of a possible 27 scores (Table 2.2). In relation to the criteria, many authors failed to clearly outline data collection and procedural rigour criteria including a description of the participants, site and the researcher and procedures used for data gathering. Some studies failed to adequately outline the sampling methods and one study did not adequately describe the study design. Only one study adequately addressed the issues

of trustworthiness and achieved the highest score in the appraisal process (Schultz-Krohn, 2004).

2.7.2 Results of the Meta-Synthesis

Four main themes were synthesised from the findings of the review: occupational routines and choices; meaningful occupations link past, present and future; constructing identity and making connections; and ‘being’ occupations allow ‘time out’.

Occupational Routines and Choices

“...we’ve established a routine here, and that’s something that gets him [her partner] out there and gets me out there”

(Parent 9 in: Schultz-Krohn, 2004, p. 536).

“...just to go to the NA [Narcotics Anonymous] meetings doesn’t do anything. You have to work on your change. You have to practice, practice and practice”

(Eva: Heuchemer & Josephsson, 2005, p. 166).

Quotes from the articles reviewed demonstrate that while people experiencing homelessness have limited occupational choice, the establishment of simple routines provide opportunities to regain a sense of control and purpose. Moreover, positive experiences of meaningful occupations lead to a desire to increase occupational opportunities:

“Church is very important to me, I wish I could be more involved”

(Unnamed in: Tryssenaar et al., 1999, p. 191).

Swenson-Miller et al. (2005) reported that six of the seven participants in a work-readiness program including computer skills training intended to continue to access computers at the library at the end of the course.

The occupational routines of homeless people are often dictated by external factors, such as shelter rules and the availability of other services. In contrast to most of the population, what homeless people do and when they do it, is frequently out of their control and may lead to a sense of helplessness and resignation:

“I have nowhere to go so I’d rather put up with this stuff, ya know... it’s gonna be rules wherever you go...”

(Aviles & Helfrich, 2004, p. 336).

For some, living in a shelter discourages independence or normal routine domestic occupations and does little to optimise occupational performance in any area (Tryssenaar et al., 1999; van Leit et al., 2006). Conversely the shelter routines offer predictability and therefore safety and consistency for some:

“I’m grateful I’m here, I’m not sleeping in a lane or on the street, or matter of fact in a jail, there’s worse things for sure. This is heaven compared to being on a river bed”

(Unnamed in: Tryssenaar et al., 1999, p. 191).

The synthesis shows that the establishment of occupational routines, when these routines are consistent with the goals of the individual, provides a tangible foundation for homeless people to rebuild a sense of purpose through ‘doing’. Being able to make choices about occupational routines is consistent with regaining control and personal autonomy.

Meaningful Occupations Link Past, Present and Future

“I guess I am just repeating what my parents did with me you know. I had a good relationship with my parents. We had a very large family and we did a lot of family closure... blocking out the rest of the world and it was all about us. We did that and that’s what I try to do with them as well. That’s important...”

(Parent 5: Schultz-Krohn, 2004, p. 538).

“Traditional Native customs and spirituality are important to me and passing them on to the kids”

(Unnamed: Tryssenaar et al., 1999, p. 191).

Knowledge and skills from previous occupations are drawn on to adapt to new situations and provide the impetus for initiating new occupations. People experiencing homelessness engage in occupations that they recognise are helpful, either for themselves or for others that they care for. Parents pass on a family legacy by maintaining occupations from the past, in order for these to be carried on in the future (Schultz-Krohn, 2004).

In contrast, for some an inability to pursue plans or reflect on the past resulted in living for the present, with little consideration for the future. In the case for one participant, who was dealing with drug addiction, the same occupations were repeated on a daily basis with little expectation that this would change:

“...chasing money, chasing drugs, getting high, and trying to find a place to sleep”

(Sara: Heuchemer & Josephsson, 2005, p. 164).

Later in this paper, Heuchemer & Josephsson (2005) describe Sara’s transition from homelessness. Sara developed future plans to become a drug addiction therapist as a way to give a sense of meaning to her previous life and homelessness. In this way occupations can provide a sense of consistency with the past and hope for the future.

Constructing Identity and Making Connections

“Volunteering at the shelter helps me feel I am contributing ”

(Unnamed participant: Tryssenaar et al., 1999, p. 191).

“...[computers] lifted my self-esteem, gave me a positive outlook. Now I can do a number of things on computers... [computers] raised my expectations of myself”

(Participant 3: Swenson-Miller et al., 2005, p. 195).

This theme reiterates the previously recognised dimensions of occupation as doing, being, becoming and belonging (Hammell, 2004; Wilcock, 2006). The research demonstrates that engaging in meaningful occupations provides opportunities to construct new identities and build relationships. Engaging in productive occupations that require the use of new skills promotes self-esteem and a sense of mastery that influences the individuals' self-belief and ability to orchestrate their own life. A sense of personal identity and knowledge of personal strengths can be used to cope with problems. For instance participants in studies state: *"My own sense of determination is my biggest asset"* and *"I'm a patient man I can live day by day"* (Tryssenaar et al., 1999, p. 191) and *"I am my own boy"* (McDonald, 2006, p. 123).

Homeless people have few opportunities to engage in occupations that promote valued social interaction, and this leads to feelings of extreme isolation, particularly for women who have left social supports to escape domestic violence. Women in these situations feel entirely alone, without supports from other adults and the estrangement results in a sense of worthlessness or not mattering (Tryssenaar et al., 1999; van Leit et al., 2006). Engagement in social occupations provides much needed opportunities to meet new people and develop new relationships, which in turn generates a feeling of belonging. There is considerable evidence to suggest that group involvement and relationships with rehabilitation professionals can provide compensatory social supports, to meet this need.

"It's [the NA meeting] a new gang: I didn't feel ashamed any more when I understood that I am not alone in this situation, there are people existing that have experienced exactly the same things"

(Sara: Heuchemer & Josephsson, 2005, p. 165).

"Because I feel like people here care about me, they don't down me, and ... I feel comfortable. I feel better about myself, because sometimes when I was depressed or down, I can go and talk to them (staff) about my problems and they make me happy about myself"

(Angie: Aviles & Helfrich, 2004, p. 334).

'Being Occupations' Allow 'Time Out'

The final theme emerging from this synthesis demonstrates the value of 'being' occupations in providing people experiencing homelessness with 'time out'.

"I need to relax and be at peace with myself, I have to increase my self-esteem"

(Unnamed: Tryssenaar et al., 1999, p. 191).

"Being able to have your peace, that's wonderful. Sometimes I just take it easy and do nothing, and enjoy that"

(Sara: Heuchemer & Josephsson, 2005, p. 166).

Homeless people experience everyday life as a demanding and sometimes frightening experience, from which there is no escape. The importance of being able to relax when life is hectic is well recognised and commonly features in stress management programs. The frequency with which 'being occupations' were associated with positive feelings by study participants suggests that, for many, opportunities to relax and take 'time out' are rare. 'Being occupations' provide for recuperation and relief from the ongoing stress, which is in itself health promoting. The 'unmet need for exercise, relax, read, sleep or just be alone' allows homeless people to respond more effectively to the changes and stress in their lives (van Leit et al., 2006, p. 55).

"To me [personal health] means keeping yourself strong. You need to have like time to yourself ... and someone to talk to because if you just keep things inside they'll just stay there... like it effects your health and you're really sad and angry "

(Mary: McDonald, 2006, p. 120).

"... no matter how bad things are I know that when I go to church I don't have to worry about it "

(Parent 2: Schultz-Krohn, 2004, p. 539).

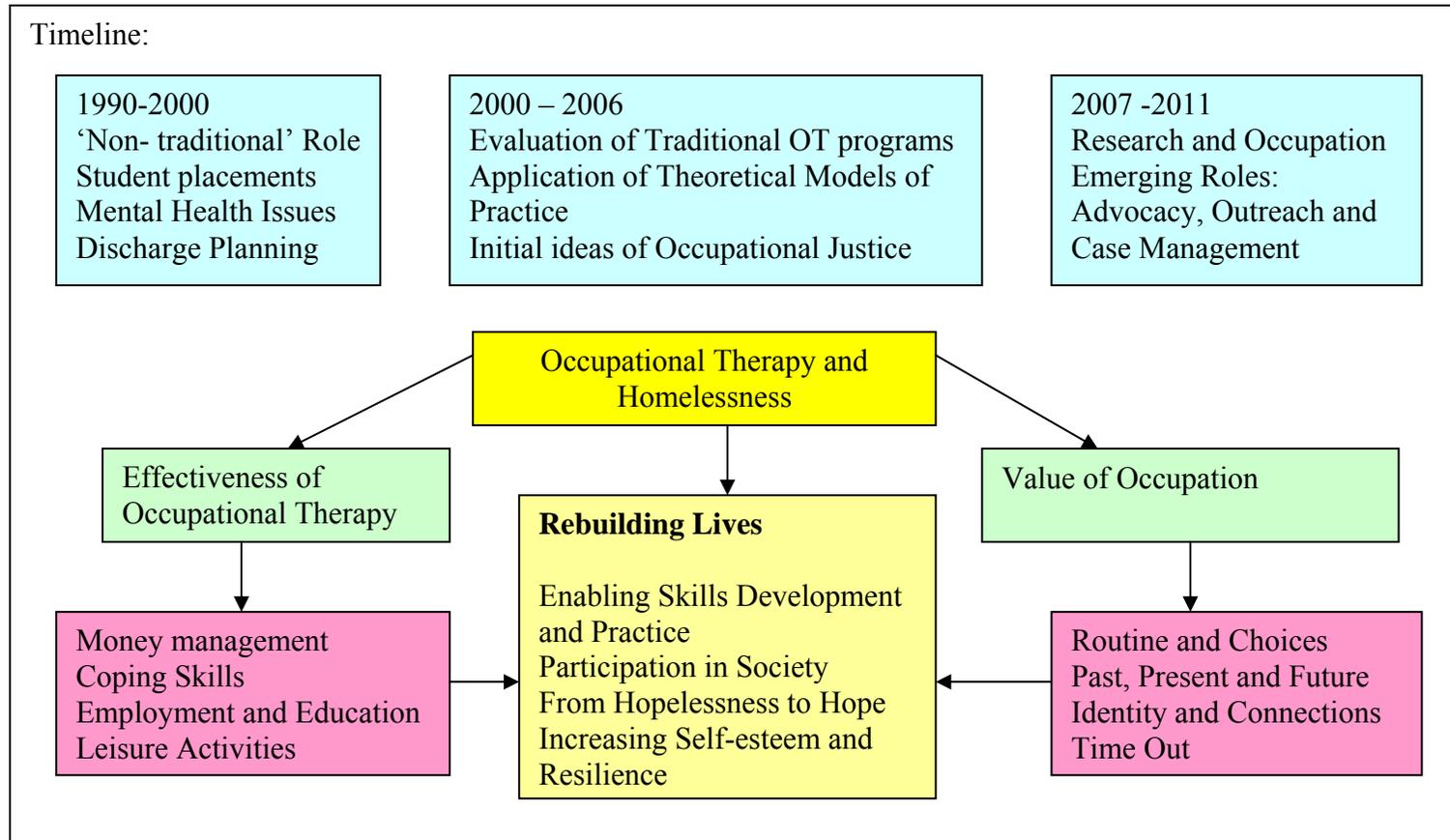
‘Time out’ (and engaging in occupations that allow people to relax and enjoy the moment) is associated with maintenance of good health. Living with stress is detrimental to an individuals’ wellbeing but opportunities to ‘de-stress’ are rare for people experiencing homelessness. An inability to manage stress may be linked to high levels of mental illness and substance abuse in the homeless population. The relationship between stress, mental illness, substance abuse and homelessness are worthy of further exploration.

2.8 Discussion

The aim of this discussion is to bring together the results of the systematic review and meta-synthesis to provide a coherent picture of the current basis for occupational therapy intervention with people experiencing homelessness.

Occupational therapy intervention related to homelessness is a relatively new and developing area of practice (Grimer, 2006). Despite this, 43 published articles outlining the involvement of occupational therapists with people experiencing homelessness were identified, of which 15 research studies provided the basis of evidence for this review. The critical appraisal processes used in this study highlight the mediocrity of these research studies, and the lack of ‘high level’ research obtained from randomised controlled trials. Utilising both a systematic review of the quantitative data and a meta-synthesis of the qualitative data this review provides a comprehensive picture of the available evidence of both the effectiveness of occupational therapy and the value of occupation. The following discussion aims to collate the results above and generates a concept of rebuilding lives through occupation (Figure 2.1).

Figure 2.1 Literature Review - Occupational Therapy and Homelessness



This review has identified that there is limited evidence of the effectiveness of occupational therapy interventions with homeless people. It is likely that the lack of outcome studies identified in this review is in part due to a lack of provision of occupational therapy to people who do not have a residential address (Grandisson et al., 2009), the transience of the homeless population affecting completion of programs and follow-up studies, and a low level of outcomes evaluation amongst occupational therapists generally. The three outcome studies identified in this review provide some evidence that effective occupational therapy services are based on individual goals, including specific skills and task achievement, and where interventions are conducted within individual and group programs over a number of weeks. Improvement rates vary according to the client population and intervention goals and may be sustained when opportunities to practice skills are available. The focus of occupational therapy includes enabling skill development and practice through traditional programs of intervention aimed at daily living skills and productive occupations.

The importance of money management and other life skill interventions for homeless people have been identified by this review. Lack of life skills amongst young homeless people may be the result of unstable home and family backgrounds, resulting in inadequate learning of basic skills. Moreover, homeless lifestyles may limit opportunities to develop or expand life skills (Aviles & Helfrich, 2006). The value of productive occupations has been demonstrated as an important area of need, although the effectiveness of employment programs is not evidenced. Work is perceived as a way to break the poverty cycle and to improve the potential for leaving homelessness. Occupational therapists skills in vocational assessment and rehabilitation are critical to enhancing and supporting employment opportunities for people experiencing homelessness. In working towards the employment and educational goals of homeless clients, occupational therapists are able to make a significant contribution to the social inclusion in their practice. Assisting individuals to maintain employment through advocacy with employers and, where possible, engage in work or education provides an important link with the community as a whole. However, if these skills are lacking or have been lost over time, there may be a need to address the issue of homelessness and basic wellbeing prior to addressing employment. Engagement with individuals to address occupational rights and opportunities to participate in meaningful occupations provide an entry point for rebuilding lives.

People who experience homelessness also experience abrupt changes to their occupations, their social networks and their ability to take control of their own lives. Over time this affects the individuals' sense of identity, self esteem and meaning in life. An initial step for many is to develop routines that create a sense of safety and control, having something to do during the day that is both meaningful and purposeful helps to rebuild a sense of identity and control. It is clear that homelessness creates numerous stressors for the individual and the cumulative effects of these stressors impact on the individuals' ability to plan for the future. A common experience of people who are homeless is the sense of hopelessness and perceived inability to change their circumstances.

Previous research involving people with disabilities has demonstrated the link between occupation and identity and hope (Iannelli & Wilding, 2007; Norweg, Bose, Snow, & Berkowitz, 2008; Reynolds, 2003; Stone, 2005). The current findings illustrate the power of participation in occupations as a medium through which individuals can move out of their homeless circumstances by regaining a sense of hope necessary to rebuild their lives. People who have positive occupational experiences look for more opportunities to participate and this includes opportunities to be part of established groups within the community (Swenson-Miller et al., 2005; Tryssenaar et al., 1999).

Participation in occupation provides a link between what has been in the person's past, what is now and what might be in the future (Heuchemer & Josephsson, 2005; Schultz-Krohn, 2004). This temporal aspect of occupation is a powerful agent that enhances a sense of meaning in life for people experiencing homelessness. Linking past, present and possible futures through occupations provides people experiencing homelessness with a sense of coherence (Antonovsky, 1979). In this way, occupation increases resilience to the inarguably stressful experience of homelessness, and acts as a resource with which to project into the future possible alternatives for living differently. Engagement in meaningful occupation can provide a mechanism for survival and coping with homelessness, through enhancing resilience (Christiansen, 2007; Wilcock, 2006).

Previous systematic reviews conducted to expand evidence related to homelessness demonstrate the effectiveness of intensive case management and community services, known as assertive community treatment, on the health of homeless people (Coldwell & Bender, 2007; Hwang, Tolomiczenko, Kouyoumdjian, & Garner, 2005). These previous reviews

confirm the effectiveness of coordinated and integrated health and support service delivery by multidisciplinary teams. However, the specific role of occupational therapy within these services is not identified. Moreover, the need for occupational therapists to evaluate service provision to ensure that services provided are effective and to promote the contribution of occupational therapy to policy makers is highlighted (Herzberg et al., 2006).

2.9 Limitations

Despite an extensive search strategy for this review, one limitation of this synthesis is the possibility of missed publications outside the occupational therapy literature. Further evidence of the value of occupation may exist from a range of disciplines that has not been included in this review. The following chapter (Chapter 3) provides a review of the non-occupational therapy evidence related to homelessness.

Evaluation of occupational therapy service provision is limited in the literature and the diversity of assessment tools used in the studies prevented any secondary statistical analysis of the results. Future research could aim to replicate the use of existing measures of occupational goals such as Goal Attainment Scale or Occupational Self Assessment to enable study comparison and enhance the level of evidence in this field.

The usefulness of meta-synthesis to determine an evidence base for occupational therapy has been supported, although this method presents a number of challenges (Fossey & Harvey, 2010; Gewurtz, Stergiou-Kita, Shaw, Kirsh, & Rappolt, 2008). To date, there has been multiple meta-synthesis processes used with no consensus regarding the most effective method. Therefore, the validity of the results of this meta-synthesis relates only to the method used and may not be replicated if an alternative approach were used.

Additionally, despite the comprehensive search strategy employed, relevant studies may have been missed, which may affect conclusions.

2.10 Conclusion

This review of occupational therapy literature, covering more than 20 years, demonstrates the development of the profession in a broadening approach to practice and a fledgling commitment to increasing the evidence base of the profession. There is clearly a need for

more research in relation to occupational therapy and homelessness. This review suggests that in line with current theory and practice an occupational justice approach may inform future practice and research, recognising the marginalised status of people who are homeless. This is discussed further in Chapter 3.

The findings of the review highlight the importance of holistic practice and research that aims to assist individuals and families to rebuild lives of occupation and meaning (Figure 2.1). As a basis for this study, the review supports the concept that engagement in meaningful and purposeful occupation should enhance the wellbeing of people experiencing homelessness through the development of skills, participation, hope, self-esteem and resilience.

Chapter 3

Perspectives of Homelessness from Other Disciplines

3.1 An Occupational Perspective of Homelessness from the Evidence

This chapter outlines the perspectives and previous research findings generated from a broad range of disciplines outside of occupational therapy that contribute to an occupational perspective of homelessness and provide a foundation of evidence for this study. To summarise the breadth of international evidence related to homelessness is far beyond the scope of this chapter, and the selection of literature has focused on issues related to occupations, specifically the occupational needs, engagement and successful intervention for people who experience homelessness. The aim of this chapter is to present a coherent argument to support the occupational perspective of homelessness underpinning this research study, from the research of other disciplines.

As previously stated, an occupational perspective of homelessness is based on a belief that humans are, by nature, occupational and participation in culturally defined and meaningful occupations is necessary for human wellbeing (Stadnyk et al., 2010; Wilcock, 2006). Restrictions of the opportunities and resources to engage in meaningful occupations that are otherwise afforded to members of society result in occupational injustice. The relationship between occupational justice and other concepts of justice, particularly social justice, is a focus for current discussion (Stadnyk et al., 2010). Stadnyk et al. (2010) suggest that occupational justice differs from social justice in its focus on individuals as well as groups, its value on diversity, and a 'focus on the relationship between occupation, health and quality of life' (p. 331). Similarly, occupational justice reflects broader definitions of justice as related to individual capacity to achieve wellbeing (Sen, 2009). Whiteford and Townsend (2011) claim that a focus on inclusive participation in meaningful occupation through the enablement of difference, contrasts with the concerns of both distributive justice in providing equal access and distribution of services and with restorative justice, which aims towards fair compensation for harm. However, Nilsson and Townsend (2010) propose that occupational justice will be achieved through the social inclusion of populations that routinely experience social exclusion. Given the interconnectedness of these concepts, broad parameters of both

social and occupational engagement of people experiencing homelessness have been included in this review.

This chapter begins with a review of literature regarding the social exclusion and marginalisation of people who are homeless; outlining the tensions inherent for those that live in public spaces and the demands by some members of the public to remove them. Such positioning and marginalisation is presented as a backdrop to the discussion on the occupational justice of those that are homeless and their opportunity to ‘take space’ through occupancy of public places to meet their needs. The chapter then focuses on the research that highlights the ways in which people respond to homelessness through their chosen occupations. The chapter concludes with a summary of the evidence of effective interventions that encourage occupational engagement and wellbeing.

3.2 The Positioning of Homeless People

The portrayal of ‘universal narratives’ of homelessness provide negative representations through which homeless people are talked about without reference to the real narratives of the people (Hodgetts et al., 2008; Zufferey & Chung, 2006). The most common perceptions of homelessness are of single, middle-aged men. Single women who experience homelessness are frequently perceived as ‘bag ladies’ who occupy a ‘cultural position’ of isolation, being physically alone and vulnerable to abuse and sexual harassment but often maintaining contact with housed relatives and friends (Radley, Hodgetts, & Cullen, 2006). Women with children hold a different position with a greater sense of public sympathy for their lack of protection; they spend less time homeless and maintain the routines of housed counterparts as far as possible (Chamberlain & MacKenzie, 2008; Snow, Anderson, Quist, & Cress, 1996). Stigmatised and excluded groups in society are more likely to become homeless, including minority or ethnic races and people with mental illness, with homelessness being a function of societal exclusion (Shinn, 2010). Discrimination in employment, lower wages and lower rates of housing access are evidence of the widespread undervaluing of minority races and ethnic groups throughout society (Shinn, 2010).

Public attitudes towards homeless people are mixed; some homeless people experience the public as caring and compassionate, while others perceive the public to be rude, superior and, at worst, abusive (Harnett & Johnson, 2008). Discrimination towards those experiencing

homelessness occurs around employment and housing and becomes internalised, resulting in reluctance to gain access (Harnett & Johnson, 2008; Snow et al., 1996). A study of 56 homeless individuals identified that 25% of homeless people have been the victims of crimes including muggings, theft and verbal abuse, which they perceived to be motivated by discriminatory attitudes (Harnett & Johnson, 2008).

Attitudes toward the police vary amongst those who are homeless. Women who had experienced domestic violence had ranging attitudes to the police; some saw the police as supportive in helping them leave difficult situation, while others felt let down by police who were unhelpful in dealing with frightening situations with their spouse (Trickett & Chung, 2007). Harnett and Johnson (2008) found people who were homeless rated the attitude of police to be slightly better than the attitude of business owners and that, although they had been frequently stopped and occasionally charged by police, they also experienced police assistance in obtaining food, transport and protection. Regardless of individual police attitudes, punitive control of homeless individuals who use public space is justified by media representation and public condemnation of homeless people as being disruptive, dangerous and lazy (De Verteuil, May, & Von Mahs, 2009; Herbert & Beckett, 2010; Hodgetts et al., 2008; Zufferey & Chung, 2006).

Urban spaces increasingly exclude homeless individuals who are regarded as ‘symbols of disorder’ (De Verteuil et al., 2009; Herbert & Beckett, 2010; Hodgetts et al., 2008). Laws that criminalise behaviours such as sitting on the pavement, camping in parks, public elimination and drinking in public through what are known as civility codes, effectively make homelessness an illegal activity (Dixon, Levine, & McAuley, 2006; Herbert & Beckett, 2010). Police powers have been extended in some cities in the US to banishment orders (or parks exclusion orders) whereby a person can be banned from a public space for up to one year. The Townsville City Council made public consumption and possession of intoxicating liquor illegal in 1996 under *Local Law 51* (Townsville City Council, 1996). This law gives the police and security guards the right to search for, and confiscate, alcohol belonging to any person in a public park.

In practice, although public consumption of alcohol occurs amongst the general population in Townsville, for people who are homeless, with no alternative accommodation or place to store their belongings, simply sitting in public parks may result in an unprovoked search and

prosecution. Similarly the routine closure of public conveniences in city parks from dusk till dawn, to discourage people sleeping in the park simultaneously increases the probability of arrest for public elimination or indecent exposure as a consequence. The implication of using legal powers to manage community concerns regarding homelessness inappropriately places responsibility on policing homelessness, increases the likelihood of imprisonment of people who are homeless and perpetuate the negative representation of individuals across the community. While a balance between the rights of all citizens to enjoy community spaces without intimidation is important, such laws are an affront to human rights as they are especially targeted at those that are homeless or otherwise stigmatised as undesirable within a community (Dixon et al., 2006; Herbert & Beckett, 2010).

Laws that criminalise homelessness provide blanket exclusions of public freedoms and neglect to discriminate between those that pose a threat to the public and those that do not (Dixon et al., 2006). In addition to laws governing public intoxication, police in Queensland have the power to ‘move-on’ people from public spaces under the *Police Powers and Responsibilities Act 2000* (Qld) (PPRA) (Taylor & Walsh, 2006). In 2006, this Act was extended to cover all public places and can be used at any time without any provocation. A police officer can direct a person to ‘move-on’, and remain away from a place for 24 hours under this Act, if they are suspicious that the person’s behaviour may: 1) cause anxiety; 2) interfere with trade; 3) be disorderly, indecent, offensive or threatening or 4) disrupt the peace. These powers, whilst universally applicable, are disproportionately used against marginalised people, such as youths, Indigenous people, people experiencing mental illness and those that are homeless, as a result of their use being based on the subjective perceptions of individual police (Taylor & Walsh, 2006). ‘Move-on’ powers are not only futile but constitute a breach of civil liberties (Memmott et al., 2003; Memmott, Long, Chambers, & Spring, 2004). Changes to these laws have been called for by the Crime and Misconduct Commission without effect to date (Townsville Bulletin, 2010, see boxed below). For those who are homeless, compliance with these rules is practically impossible and prevent the ability to maintain wellbeing, therefore resistance is the most likely response and perpetuates a lifetime of ‘ducking and dodging the police’ (Herbert & Beckett, 2010)

Police power shake-up

The Crime and Misconduct Commission yesterday recommended major changes to the powers after research found indigenous people, the homeless and youths were often marginalised against under current legislation.

The most significant of 11 recommendations was that police move-on laws be no longer used against a person for merely being present in a public place.

CMC deputy director of research Dr Rebecca Denning said the current legislation was broad and, coupled with the highly discretionary nature of the powers, would lead to confusion and uncertainty in its application.

"This has the potential to adversely affect those who use public spaces, particularly marginalised groups such as young people, the homeless, and indigenous people," she said.....

Source: Baskin, B., *Townsville Bulletin*, 22 December 2010, p. 3.

The positioning of homeless people as undeserving and undesirable, particularly in urban public spaces, is socially mediated by media representation and punitive controls that effectively make being homeless a crime against society. This results in occupational injustice as an outcome of systematic displacement, exclusion and alienation from the public spaces and social space. It is important to note that the occupational injustice experienced by people who are homeless is not a consequence of individual choices or behaviours, rather this negative positioning is indiscriminate and insensitive to the personal narratives and intentions of those affected. The overwhelming message being communicated is that homeless people are not welcome within our societies and homelessness is considered to be a criminal offence.

Banishment from public space and harassment by police and security mandated by council laws contravene the *United Nations Declaration of Human Rights* to liberty, freedom from inhumane and degrading treatment, and freedom from discrimination (Taylor & Walsh, 2006). Similarly, such measures remove occupational rights to participate in occupations and be 'included and valued as members of their family, community and society' and 'abuse the rights to occupation through exclusion' and control of access to venues where occupation takes place (World Federation of Occupational Therapy (WFOT), 2006).

3.3 Occupancy of Public Space as Home

By definition people who do not have a home, including those that stay in hostels overnight with no place to reside during the day, use public spaces as homes and the location of daily activities, despite the measures aimed to deter them. For some, choosing to live on the streets may be a haven from the violence or emotional distress associated with living at home (Radley et al., 2006). Living in public places rather than a hostel, can be a positive choice to have access to more of the elements of personal 'home' rather than submit to the control of shelter staff (Clapham, 2003; De Verteuil et al., 2009). The concept of home as haven or place of safety may be found outside a physical dwelling especially for nomadic cultures, where home is a space possessed by regularly living in that place (Mallett, 2004).

Public places frequently become part of a homeless person's social and spatial network, and the location of important attachments intricately linked with concepts of identity (Herbert & Beckett, 2010; Sheehan, 2011). Hodgetts et al. (2008) explored homeless men's perceptions of a public library as a socially sanctioned space where they can be like any other citizen. In this safe environment the men who are homeless comply with expectations in order to be less visible and more acceptable in this inclusive environment. Similarly, a study of homeless women's use of public places, such as art galleries, airports, shopping centres and parks, suggest that use of public spaces for daily living activities constitutes resistance to the notion of exclusion (Casey, Goudie, & Reeve, 2008). In many cases, access to such places is supported by mainstream individuals, who act as benevolent gatekeepers and legitimise the use of public space by homeless individuals (Casey et al., 2008). Access to public spaces provides opportunities for social contact, potential for practical support and the means for survival and security (Herbert & Beckett, 2010). Parks and gardens provide important spaces for homeless people to meet 'ordinary' people with whom everyday interactions can occur (Radley et al., 2006).

Recent emphasis on reducing homelessness in Australia through the introduction of new programs, while aimed at improving the wellbeing of homeless people by enabling access to affordable accommodation, may also be seen as a tactic for removing undesirables from public view (Phillips, Parsell, Seage, & Memmott, 2010). Specifically, in the case of Indigenous Australians, cultural traditions and values in relation to indigenous mobility and

extended kinship relationships may not be accounted for in these policies (Prout, 2009). Similarly, the cultural significance of specific public places may be overlooked by developers and local government (Herbert & Beckett, 2010). There is arguably a need for more than equal access to public space, so that people experiencing homelessness can be welcomed and assisted in public spaces such as libraries and parks rather than ‘cold-shouldered’ and ignored (Radley et al., 2006).

Participation in civic life gives people who are homeless a sense of belonging and enables them to move out of marginal spaces (Hodgetts et al., 2008). As citizens, Hodgetts (2008) asserts that homeless people have the rights to participate in prime places. Walking has been identified as a means to get from one place to another, but also an occupation in itself; as a purposeful activity with its own merits and meaning (Radley, Chamberlain, Hodgetts, Stole, & Groot, 2010). Walking provides an opportunity for interaction with domiciled people and to supportive environments that have been demonstrated to a strategy to gain a sense of belonging (Johnsen, Cloke, & May, 2005).

From an occupational perspective, public spaces provide a venue for day-to-day occupations for people experiencing homelessness in much the same way that it does for the rest of society. The use of public spaces such as libraries, shopping malls and parks allows for ‘engagement in occupations that enable people to flourish, fulfil their potential and experience satisfaction consistent with their culture and beliefs’ (World Federation of Occupational Therapy (WFOT), 2006). Access to public place is frequently at the discretion of ‘gatekeepers’, such access cannot be taken for granted, and may be conditional to acceptable appearances and behaviour. Under these circumstances people experiencing homelessness are confirmed as citizens and equals within the community in stark contrast to the discriminatory and alienating experiences of exclusion.

3.4 Occupations of Survival

The occupations of people experiencing homelessness have been studied from various perspectives outside of occupational therapy. Much of the research demonstrates how people spend their time and manage during periods of homelessness, although relatively few identify the meaning of their occupations outside of survival and identity. ‘Getting by’ on the streets involves ‘varied and creative tactics’ to ensure personal safety and wellbeing often at the

expense of intense isolation and loneliness (De Verteuil et al., 2009; Rokach, 2005). Fear of violence or having ones property stolen by other homeless people and members of the public makes finding a quiet place where you can stay on your own an important survival technique (Radley et al., 2006). People who experience homelessness have high rates of loneliness (Rokach, 2005) although relationships between those that are homeless are important vehicles for support. Homeless women may forge alliances with men to alleviate loneliness and gain protection (Finfgeld-Connett, 2010).

There is some evidence to suggest that social relationships are at least as important as basic material needs in terms of wellbeing (Biswas-Diener & Diener, 2006). Conversely, close relationships with other homeless people and loyalty to these relationships may be a barrier to moving into mainstream accommodation (MacKnee & Mervyn, 2002). Drinking in groups can be seen as a communal activity that facilitates a sense of shared purpose, reciprocity and friendship associated with positive health outcomes. By engaging in communal drinking in public spaces, the homeless group invert social order and power relationships by pushing out members of the dominant group who no longer feel safe to use that space (Hodgetts, Radley, Chamberlain, & Hodgetts, 2007).

Homeless day centres and hostels provide people with the means to engage in self care activities, eat and meet with others, provide a sanctuary from the streets and an element of daily structure and routine (Hodgetts et al., 2007; Johnsen et al., 2005). Most are run by non-government organisations, partially funded through public donation and volunteers; they are evidence of a society that cares (De Verteuil et al., 2009). There is limited research on the experiences of homeless people in these 'homeless spaces' compared to the experience of living on the street (De Verteuil et al., 2009). Such spaces may fulfil the ideal of 'places of care' where all people are accepted and can simply be and belong. Alternatively they may also be 'places of fear', where people exhibit unusual behaviours, abusive language and behaviour or normalise drug use (De Verteuil et al., 2009; Johnsen et al., 2005). Kryda and Compton (2009) found shelters and drop-in centres were considered dangerous by some people who were homeless, due to violence, theft and the presence of drugs. Single homeless women, doubly disadvantaged in systems targeting homeless men, may prefer not to frequent these facilities despite an identified need to keep clean, eat a healthy diet and do normal things (De Verteuil et al., 2009; Radley et al., 2006).

Accessing such services requires good time management to ensure being in the right place at the right time to carry out some of the most basic of daily activities (Parsell, 2010). In cities where there are numerous facilities available, people who live on the streets frequently schedule their lives to be able to access the services when available. Different groups within the homeless population may use different facilities, for instance drug dependant individuals may gather together in one facility while those that are drug free would prefer to stay away. In smaller locations where there is only one drop-in centre such divisions between different groups within the homeless population may not be possible. Critics of day care services and shelters suggest that provision of even these basic services may promote homelessness and complacency among the chronically homeless (MacKnee & Mervyn, 2002; Nino, Loya, & Cuevas, 2010).

Work opportunities, though rare, may provide the opportunity to earn extra money. Few homeless people are employed and the length of time on the streets correlates with decreasing orientation towards regular employment (Nino et al., 2010; Snow et al., 1996). Barriers to employment include low educational achievement, health problems, disability and lack of suitable clothing (Nino et al., 2010). Some homeless agencies offer limited work opportunities within their organisations, although very few homeless people are able to work in regular jobs or even obtain infrequent labouring work by the day (Snow et al., 1996).

Research in the US demonstrates that homeless people engage in 'shadow work' such as peddling (junk, drugs, plasma), panhandling (begging) or scavenging as 'bricoleurs' (Snow et al., 1996). A more recent ethnographic study of homeless 'recyclers' suggests that this kind of work not only provides money but becomes a focus for their existence on the streets (Gowan, 2009). Similarly, other studies demonstrate how selling homemade jewellery and reading tarot cards in tourists areas provide people who are homeless with a source of work and limited income (Sheehan, 2011). The longer a person is on the streets, the less likely they are to seek regular employment or have contact with housed friends and family (Snow et al., 1996)

Begging (panhandling in the US) is an option for a minority of homeless people to obtain financial resources but requires a level of sympathy from the public (Lee & Farrell, 2003). Generally, begging is a symbolic violation of the work ethic and is perceived as deviant behaviour (Lee & Farrell, 2003). To increase monetary success from begging, homeless

people have to present themselves in a way that matches public expectations of a ‘beggar’, for instance not shaving, having a sign, and being dressed appropriately (Hodgetts et al., 2007). While some researchers have suggested that begging undermines the homeless person’s dignity, in acting out a role this occupation may be considered to be active agency and performance of a purposeful activity (Hodgetts et al., 2007). It has been suggested that the costs associated with addressing panhandling in the US would be better used to provide effective support to access benefits that the homeless may be eligible to, or to provide employment possibilities for them (Lee & Farrell, 2003).

From an occupational perspective, people experiencing homelessness engage in a variety of basic occupations to meet their immediate needs and survive. The research demonstrates that there are few opportunities to participate in occupations that promote a sense of wellbeing or offer occupational fulfilment, suggesting occupational deprivation is widespread. The health repercussions of occupational deprivation have previously been noted in relation to people in prisons, institutions and refugee camps, where depression, mental illness and physical frailty is common (Stadnyk et al., 2010). The occupational deprivation of homeless people both at an individual level and as a subgroup within society is evidence of the occupational injustice experienced.

3.5 Occupations of Meaning and Identity

There is little evidence, outside of the occupational therapy literature that specifically identifies occupations of meaning or of intrinsic value to people experiencing homelessness. With the exception of survival occupations it is not clear how homeless people create meaning in their lives through occupation. Despite the focus on social inclusion and participation in the homelessness rhetoric there are few examples in the literature that provides an evidence base for occupational engagement, outside of education and employment. One contribution to the sparse literature that has arisen from this study is outlined in Chapter 6 (Thomas, Gray, McGinty, & Ebringer, 2011b) and identifies the value of an Art Program for homeless people. Another example was demonstrated in the televised series ‘Choir of Hard Knocks’ illustrated the formation of a street choir including mostly homeless people who eventually performed at the Sydney Opera House in 2007 (Reclink Website).

Some specific programs have been developed that afford opportunities for people experiencing homelessness to participate in culturally valued occupations. For example, the lack of opportunity to participate in and benefit from sport has been addressed through the Street Soccer Program in Australia, sponsored through the Big Issue (Sherry, 2010a). On an international level this program culminates in the Homeless World Cup, where representative teams made up of homeless participants from international countries compete together for fun and to promote their potential. Participation in Street Soccer has been shown to increase a sense of community and connectedness; links with sponsors, stakeholders and community volunteers including students provide links with the community (Sherry, 2010b).

In contrast to the scarcity of literature on the benefits of occupational engagement beyond survival, a number of studies have looked at sense of identity in homelessness and indicate maintenance of a sense of self as an important contributor to wellbeing. Some researchers claim that marginalisation of people who experience homelessness contributes to poor self-esteem, self alienation (detachment from self) and a self-as-homeless identity (MacKnee & Mervyn, 2002; Rokach, 2005). Loss of self concept and identity can be the result of past traumatic experiences and may increase vulnerability to mental illness (Philippot et al., 2007). Parsell (2010) contests this idea of homeless identity, claiming that study participants most frequently identified themselves in relation to significant family relationships or childhood experiences. Being a father or daughter or having experienced family trauma provided a consistent identity regardless of housing status, homelessness may be regarded as a symptom of their lives rather than part of their identity (Parsell, 2010). A sense of self and identity has also been connected to occupation, both in relation to what people do and to the places that they occupy.

Some occupations help to preserve identity in the face of homelessness and the threat of losing oneself, by holding onto core aspects of their being. The homeless 'recyclers' of San Francisco identified how engaging in work gave them a sense of pride, a 'moral capital' and a different identity to being homeless (Gowan, 2009). Women who are homeless may actively seek to present themselves in a way that is not visibly different from others, so as not to be seen as homeless and worthless (Casey et al., 2008). MacKnee and Mervyn (2002) found that accepting affirmations of others, discovering natural abilities in music, leadership or scholastics, and contributing to others development resulted in increased confidence and self-

esteem. There is notably little evidence regarding the potential of occupation to enhance and preserve a sense of identity for those that are homeless.

Another aspect of identity is achieved through connection to places of significance and meaning for people experiencing homelessness, in the same way that housed individuals identify with their homes (Herbert & Beckett, 2010). 'Place attachment' arises from residence, shared meanings and social belonging and may change rapidly when someone moves, while 'place identity' is a component of personal identity that arises from our interactions with a place and remains relatively stable (Hernandez, Hidalgo, Salazar-Laplace, & Hess, 2007). For some, public space becomes homelike and has connotations of family, intimacy and belonging far closer than ideas of camaraderie or community (Sheehan, 2011). Both place attachment and place identity influence personal identity.

Marginalised people adjust to living on the streets by being themselves and frequently refusing to live up to expectations of society and the invitation to fit into a society in which they are constantly reminded they do not belong (Radley et al., 2006). In this act of autonomy and control, independence and identity is asserted and a positive sense of self affirmed (Biswas-Diener & Diener, 2006). Visits to the library and to public galleries provide continuity between past domiciled lives and current homelessness; by doing everyday things that regular people do (Casey et al., 2008; Hodgetts et al., 2008). Access to books, music and art as objects of importance serve as reminders of who we are, when personal possessions are scarce. 'Being able to inhabit public spaces successfully, even when they go unnoticed, is to be a citizen' (Hodgetts et al., 2008, p. 945). Adopting practices by which people who are homeless can establish themselves in relation to both the housed and the homeless community affords independence and coping with the stresses of living on the streets (Radley et al., 2006, p. 458).

The research, or lack of it, in relation to occupations of meaning for homeless people, suggests that people experiencing homelessness live occupationally imbalanced and deprived lives, and that a disproportionate amount of time is allocated to survival occupation with little time or opportunity to engage in occupations that have inherent meaning (Stadnyk et al., 2010). Lack of employment and leisure opportunities results in a life focused on survival and living day-to-day, and there are few opportunities for community engagement. Maintenance of wellbeing may be enhanced by concepts of identity achieved through significant

relationships with people and places. This review of the literature related to identity supports the importance of occupation in both temporal and spatial terms. Using an occupational justice lens, the lack of meaningful and purposeful occupations has been described as occupational alienation, when people experience their occupations as repetitive, boring and lacking in meaning (Stadnyk et al., 2010).

3.6 Homelessness and Health

The evidence summarised above demonstrates that people who are homeless experience occupational injustices including occupational marginalisation, occupational deprivation, occupational imbalance and occupational alienation. From an occupational perspective of health, poor health and wellbeing outcomes amongst this population would be anticipated. Internationally when compared with domiciled citizens, homeless people have high rates of morbidity and mortality (Bhui, Shanahan, & Harding, 2006; Hodgetts et al., 2007; Reid, Vittinghoff, & Kushel, 2008). Life expectancy of rough sleepers is 30 years below the national average (Bhui et al., 2006). Severe mental illness affects approximately one third of people who are chronically homeless, with those living on the streets more likely to have severe and persistent psychosis (Christiansen, 2009). Homeless people are 34 times more likely to commit suicide, 25 times more likely to die at any point and 159 times more likely to be fatally assaulted than the general population (Bhui et al., 2006; Radley et al., 2006).

This high rate of mental illness may be partly explained by experiences of trauma, loss and early housing instability. Parsell (2010) found all participants in his study of public place dwellers mentioned traumatic family experiences such as child abuse, domestic violence and being in state care as children. Single women were found to have significant emotional health issues including panic attacks, post traumatic stress disorder, depression and attempted suicide, with issues of grief and loss being the most significant issues (Trickett & Chung, 2007). Homelessness frequently results in the separation of children from mothers into foster care arrangements, which in turn increases the risk of homelessness for the children in later life (Shinn et al., 2008). Loss of loved ones, particularly in Indigenous families may cause a family to 'fall to pieces', leading to homelessness for adults and children (Trickett & Chung, 2007, p. 9).

People who are chronically homeless were found to be more likely to have a drink to ‘steady nerves’ and to use drugs (Nino et al., 2010). Alcohol use is known to be high amongst homeless people (Kidd, Kirkpatrick, & George, 2011). Partis (2003) suggests that alcohol and drugs provide a psychological sanctuary where the individual can experience feeling at one with the world rather than a state of disconnectedness. The social aspect of drinking with others provides a shared identity with others who use the same substance, which may be more significant than fulfilling any physical addiction they may have (Parsell, 2010).

People experiencing homelessness have attitudes of stoicism and being able to cope with adversity when faced with health issues (Hodgetts et al., 2007). Medical care may be postponed due to unrealistic evaluation of the seriousness of symptoms or because of poverty and economic disadvantage (Reid et al., 2008). People who are homeless tend to live with illness, in the same way as they live with stress, hardships and stigma, without complaint until health issues ‘sneak up on you’ (Hodgetts et al., 2007).

Homeless people experience stigma and are afforded lower status, even in the health service and hospitals (Bhui et al., 2006). Low levels of trust in health workers, services and previous issues with authority result in dissatisfaction with, and reluctance to engage in, services (Bhui et al., 2006; Christiansen, 2009; Reid, 1999). Access for people who are homeless to sympathetic health professionals in special clinics within homeless centres can result in more frequent consultations and, for those with mental illness, medication compliance (Bhui et al., 2006; Christiansen, 2009). Multidisciplinary psychiatric outreach teams can provide comprehensive, integrated and holistic health care aimed toward building relationships, reconnection to community and recovery (Christiansen, 2009). The provision of health care to residents of transitional housing facilities demonstrated reduction in emergency department use but not a reduction in hospital admissions (Ciaranello et al., 2006)

Health worker attitudes are significant to homeless consumers; unsympathetic, unapproachable and ‘bossy’ health professionals create negative environments whereas bulk billing and accessible medical practitioners are valued (Trickett & Chung, 2007). The value of people sitting and chatting over a cup of tea or coffee reinforces the importance of informal interventions and the development of rapport (Bhui et al., 2006). Genuine empathy and listening helped to create trust, although homeless people consider most service providers do not know what it is like to be homeless and have stereotyped beliefs regarding homeless

individuals (Kryda & Compton, 2009). Frequent staff changes in social services and homeless teams mean that relationships of trust are inhibited (Bhui et al., 2006). Employing formerly homeless individuals as workers in homeless services has been recommended to overcome issues of trust (Kryda & Compton, 2009).

Assertive Community Treatment (ACT) differs from traditional psychiatric health service approaches by providing multidisciplinary, intensive, community based services (Coldwell & Bender, 2007). There is evidence to show that ACT clients are more likely to become housed, have improved mental health symptoms and improved quality of life when compared with conventional case management models (Coldwell & Bender, 2007; Nino et al., 2010). Hospitalisation rates, however, were similar, although length of hospitalisation may be shorter (Coldwell & Bender, 2007). Integrated housing and mental health services have been shown to improve housing stability, greater life satisfaction and reduced mental health symptoms (Martinez & Burt, 2006; McHugo et al., 2004).

Finfgeld-Connett (2010) suggest three stages to assess, accept and finally utilise social services:

- crisis (lack of trust and concern for loss of freedom)
- assessment (make judgments regarding the services ability to meet needs)
- sustained action (housing, empowerment and action).

Realisation of the seriousness of one's circumstances through sickness, hunger, life threatening situations or hitting 'rock bottom' create the impetus for some people to want to choose alternative options to living on the streets (MacKnee & Mervyn, 2002). However, having contact with someone who offers support, respect and encouragement, counselling, or going through drug rehabilitation are also powerful motivators (MacKnee & Mervyn, 2002). Finding hope is critical in this process and can be inspired by relationships with others who believe in you, and results from a sense of accomplishment, attainment and the ability to manage negative emotions (Finfgeld-Connett, 2010; Herth, 1996).

3.7 Resolving Homelessness

Preventing homelessness, or 'turning off the tap' is a current strategy for reducing the number of people who experience homelessness in Australia (Australia. Homelessness Taskforce,

2008). Six strategies for homelessness prevention have been identified including housing subsidies; supportive services coupled with permanent housing; mediation in housing courts; cash assistance for rent and mortgage arrears; and rapid exits from shelters (Burt, Pearson, & Montgomery, 2005). More specifically, preventing discharge from mainstream services, such as hospitals and prisons, into homelessness is one strategy that has been instigated (Australia. Homelessness Taskforce, 2008; Moses, Kresky-Wolff, Bassuk, & Bournstein, 2007). However, providing housing that does not meet the aspirations and needs of the individual, provides inadequate support, and without policies to address entrenched poverty will not provide long-term results (Moses et al., 2007).

Resolving homelessness is a 'lengthy multipronged process' (Finfgeld-Connett, 2010, p. 466) involving multiple individuals and agencies to work towards housing, health improvements, work or education, effective parenting and negotiating a place in mainstream society (Finfgeld-Connett, 2010). Maintaining resettlement is often difficult due to lack of affordability, social isolation, loneliness and lack of community integration (Hodgetts et al., 2007). Long-term support is required in anticipation of progressive-regressive and progressive cycles through housing and homelessness (Finfgeld-Connett, 2010).

Homeless services such as shelters, drop-in centres and soup kitchens while not a solution to homelessness, provide a stepping stone for people to move from the streets and provide much needed support long-term (De Verteuil et al., 2009). Providing accessible support for people who live on the street was a recommendation of the Indigenous Homelessness Forum (Australia: Commonwealth Advisory Committee on Homelessness (CACH), 2006), and affirms the rights of individuals who are commonly marginalised from mainstream services and whose health and welfare is compromised by the realities of homelessness. However, these services are not aimed at resolving homelessness and can be seen as 'band-aid approaches' rather than long-term solutions to homelessness and the provision of affordable independent housing (Kryda & Compton, 2009).

Outside of housing and subsistence services, some occupational programs have been shown to be beneficial in resolving homelessness. Work therapy programs have been shown to have positive health and wellbeing outcomes for veterans that are homeless, including active management of drug and alcohol addictions, and reductions in episodes in prison (Kashner et al., 2002). Involvement in meaningful work or educational programs facilitates an exit from

homelessness by accomplishing an increase in the confidence and skills needed for mainstream living (MacKnee & Mervyn, 2002). The Street Soccer program has resulted in improvements in alcohol and drug abuse, and treatment seeking by some addicts (Sherry, 2010a).

Assertive outreach such as the 'street to home' programs facilitate rough sleepers to move into and sustain independent, long-term accommodation (Phillips et al., 2010). Assertive outreach models work through long-term relationships and rapport building between workers who go out to the streets and the people who live in them. In contrast to traditional outreach, assertive outreach moves away from the traditional social welfare models that encourage self-determination and towards an approach that essentially coerces and controls rough sleepers in order to remove them from public places (Parsell, 2011; Phillips et al., 2010). Some homelessness has been associated with Indigenous mobility and transience and has been tackled through displacement. A specific feature of outreach services to Indigenous people who may have become stranded in urban areas is to return them to their local communities (Phillips et al., 2010). However, the appropriateness of this practice for the individual or the community has been questioned (Phillips et al., 2010).

Housing First and Common Ground are two models to ending homelessness that have been imported from the US. Both redirect people who are homeless into supported permanent housing, following engagement through an assertive outreach service. The most vulnerable and 'difficult to house' people are identified and offered accommodation and support that is voluntary and client focused, without the requirement to give up substances or other stringent conditions. The Housing First model has been shown to achieve greater housing stability, although without evidence of reductions in substance abuse (Stefancic & Tsemberis, 2007; Tsemberis & Eisenberg, 2000). Similarly, the Common Ground approach provided integrated long-term supported accommodation and social services, similar to assertive outreach services in Australia (Phillips et al., 2010).

Providing affordable housing correlates to improvements in housing satisfaction and housing stability, however there is conflicting evidence regarding other quality of life improvements such as improved health and reduction in substance abuse (Hwang et al., 2011). Preferred quality of housing include being in good repair, compatible landlords, safe neighbourhoods, and convenient access to transportation (O'Connell, Rosenheck, Kaspro, & Frisman, 2006).

Having a sense of choice and control in housing was positively associated with psychological wellbeing and quality of life (O'Connell et al., 2006).

3.8 Conclusion

This review of literature on homelessness from a broad range of disciplines demonstrates the precarious position of marginalised people experiencing homelessness that results in poor health and high mortality. The growing political interest in homelessness has resulted in burgeoning research and the development of innovative models of service provision, including integrated housing, health and support services. There is growing recognition of the importance of participation in community, through access to place and space and to the identity and wellbeing of people experiencing homelessness. This is largely through the work of human geographers, who raise issues of social and occupational justice. It is therefore disappointing that this line of research has not been more actively pursued by occupational therapists and scientists who are well positioned to contribute to the evidence using the model of occupational justice.

From an occupational perspective the right to access and participate in community life is fundamental to a just society and has direct implications to health and wellbeing. The World Federation of Occupational Therapy position statement on human rights in relation to occupation and participation articulates this belief through its principles (World Federation of Occupational Therapy (WFOT), 2006). As previously identified in the findings of Chapter 2, much of the previous occupational therapy research emphasises the individual deficits and personal problems of people who are homeless and has ignored the social structures that restrict occupational participation and engagement – although some important exceptions have been identified. There is a need to consider the experiences of homelessness from an occupational justice perspective and direct the expertise of the profession at a societal level to support the participation of homeless people in community valued occupations.

Chapter 4

The Researcher and Research Journey

Behind [the ontology, epistemology and methodology] stands the personal biography of the researcher, who speaks from a particular class, gender, racial, cultural and ethnic community perspective. The gendered multiculturally situated researcher approaches the world with a set of ideas, a framework (theory, ontology) that specifies a set of questions (epistemology) that he or she then examines in specific ways (methodology, analysis)... Every researcher speaks from within a distinct interpretive community that configures, in its special way, the multicultural, gendered component of the research act (Denzin & Lincoln, 2005a, p. 21).

4.1 Introduction

This chapter utilises the concept of the research pathway (Fredericks, 2007) to separate the research design (see Chapter 5) from the research journey. The concept of the research pathway was used to understand the methodological challenges of the study (Fredericks, 2007). The ‘path’ is the structure or plan for the study outlining the methodology and methods to be used, and ethical approval. The research ‘path’ provides sign posts that demonstrate the study’s progress and conformity to the requirements of academia.

Alternatively the ‘way’ is the process of how the research is achieved and includes the significant learning from my engagement with this study. The ‘way’ involves implementing a journey into the self, responding to the landmarks through reflection and interpretation, seeking help and advice and exploring my role and progress as a non-Indigenous researcher. The ‘path’ and the ‘way’ are intertwined and connected at the ‘cultural interface’ between the researcher and the participants of the research. Based on my research journal and my reflections on the process undertaken, this chapter positions me as the researcher by identifying personal history, essential learning and a range of landmarks that have influenced the project. The chapter is purposefully narrative and reflexive, and aims to illustrate the process of change that is inevitably part of any research process.

4.2 Personal Intentions and Purpose

I am a full time staff member at James Cook University and have been working in occupational therapy education since 1994. In the 10 years of clinical practice prior to this, I have worked almost entirely with people with mental health issues. I have enjoyed clinical roles in three countries and worked in acute mental health wards, rehabilitation and in the community with people who are suicidal or unable to cope. My clients have included people with psychotic disorders, major depression, anxiety, drug addiction, eating disorders, and post natal depression. Most recently I have been involved in a program for returned service men and women with post traumatic stress disorder. I have drawn on my previous experience of working with people with mental illness throughout this research.

As an academic I am committed to preparing graduate occupational therapists to work in rural and remote areas and Indigenous practice. The health and wellbeing of Indigenous Australians is significantly lower than that of other Australians, particularly in rural and remote areas (Commonwealth of Australia, 2008a). Indigenous Australians experience higher levels of disadvantage in the social determinations of health including the conditions in which people are born, grow, live, work and age (CSDH, 2008). In my role as an educator of future health professionals I am committed to cultural awareness education for students and in increasing opportunities and cultural safety of Indigenous students in the occupational therapy program. As a non-Indigenous educator I consider my responsibility is to promote non-racist and inclusive practices within health professional education. While I position myself as a learner in this capacity, I draw on my 14 years experience of working in New Zealand where I gained an understanding of biculturalism through formal education, cultural competence and bicultural training and experience.

As stated previously, before this study I had no experience with people experiencing homelessness. My ignorance meant that I did not bring into the project a particular agenda or set of beliefs about what needed to be done, and therefore I could approach the project from a position of relative neutrality and use reflexivity to gain insight into my unconscious assumptions, since while I had no experience of homelessness, I was not without opinion (Patton, 2002). Being a novice would allow me to truly position myself as the learner in this study and thereby enjoy the luxury of being guided by my research, my participants and my supervisors.

This aim of this chapter is to reflect on the research process and on the planning, opportunities, dead ends and some of the major decisions that have directed the study over the five years. The research journey has inevitably had its ups and downs, although progress has continued steadily throughout. This chapter is guided by the use of reflection throughout the journey and provides some of the contextual factors that have influenced and contributed to the study overall.

4.3 Positioning Myself as a Researcher – Journey into the Self

My previous research experience has been largely independent or funded through small competitive grants, in the area of professional education and rural and remote practice. I had supervised a number of Honours students conducting qualitative research projects. I did not arrive at the PhD with the traditional training of Honours or Masters research, rather my professional background and my research experience provided the foundation for this study.

I moved to Townsville, Australia, in 2000, after living for 14 years in New Zealand. I was born and brought up in a small village in Warwickshire, England where I lived with my parents until the age of 19 when I commenced occupational therapy training in the South of England. Looking back I realise that my experience of home is founded on a loving family environment, where everyone was respected and cared for, where interactions were generally positive, where visitors were welcomed and often fed, in a community where I was safe and accepted. Over the years I have experienced many different homes in different cities and countries but these initial experiences of home have provided the mould for the homes that I now create for myself. I recognise that home is an integral part of my life and my wellbeing, and the context for many of my daily activities of living.

For me, work is highly valued and has contributed not only to my material wellbeing, but to my sense of identity and competence. I have always considered myself very fortunate to have chosen a career that I love and believe in and that has given me so many opportunities to travel the world and to grow and develop as a person. Life and work are inseparable to me: the satisfaction that I gain from my work directly effects how I experience the rest of my life. Similarly if things are unsettled at home it effects how I perform at work. While this is not unique to me it leads to the question: ‘If I had no home and no work, who would I be?’

Apart from home and work the third significant aspect of my life are the relationships that I hold dear. I am married and have maintained close relationships with my family, who live in different parts of the world. I have friends, colleagues, networks and neighbours all of whom play a role in my ongoing creation of life. I have innumerable contacts and professional relationships across the world and I find the challenge of keeping in touch very real. Increasingly I find myself reliant on technology and the internet to maintain those relationships that are important.

4.4 Reflections from the Past

During the course of this research I remembered two separate stories from my childhood, which when unburied and reflected on appear to have some bearing on my role as a homelessness researcher.

Throughout my childhood my family lived in a council house (public housing). We moved to that house when I was one year old, when my family had unexpectedly been evicted from a property 'ear-marked' for demolition to allow a new bypass to be built. My mother once confided that she had been very frightened because they could not initially find another house to live in. She had been advised that if a council house did not become available, her children would be taken into care and herself and my father would be on the streets. This story was often told as a story of good fortune that resulted in the family being housed by the council. However, my mother's horror and distress at the thought that the family might be broken up and homeless remains with me.

Much later one of my older siblings, who was married with two children, was evicted. There had been no warning when the bailiffs arrived and literally turned them out of the house. My parents brought the family to live with us, and later organised the loan of a caravan that was positioned in our garden. I remember this situation was stressful for everyone, there were arguments and tears and it was with some relief to everyone when my sibling's family finally moved into their own house again.

Reflecting on these personal brushes with homelessness has served to remind me that homelessness can happen to anyone and the consequences of homelessness are measured in terms of disruption and distress. From these recollections it is clear that being at risk of

and/or losing your home is frightening, the future quickly becomes insecure, the normal routines are halted and personal resources are stretched to breaking point. Having a supportive family can be helpful, but even the most caring and loving families are vulnerable.

4.5 Preparing for the Journey - Becoming a Researcher

... the challenge will still be to integrate all the aspects of this project that are relevant and to eliminate those that, though interesting, do not directly contribute to the project. In relation to Homelessness, as my topic, I need to integrate concepts of occupation and the meaning of 'doing', with concepts of social connectedness and engagement, together with an understanding of public health. What is also necessary is to gain a better understanding of Indigenous research and how this project can both involve and accurately represent the issues of Indigenous homeless persons. My personal challenge is to focus my enthusiasm on this project and learn to say 'no' to other projects and ideas (Journal Entry, 12 February 2007).

My official start date was 30 March 2007, the first year was spent reviewing literature and establishing the parameters of the project in preparation for the confirmation of candidature presentation 12 months later. I met with my supervisors regularly to report progress and to discuss potential research methodologies and methods. In this early stage of the project my role as researcher was infantile, I felt I knew nothing, was keen to learn but quite incapable of being independent in decision making. Through ongoing supervision, the research project began to take shape through a process of metamorphosis.

Contact was made with service providers and organisations involved in homelessness in Townsville, with the aim of building a network of stakeholders for the project. I was invited to talk to the 'Responding to Homelessness' group instigated through the Department of Communities and involving all of the major organisations in the Townsville area. From that initial introduction a series of visits and meetings were conducted and provided foundational knowledge for this case study. There was clear interest in my project from three individuals: Anthea Peachey (Spiritus); Danny Clarke (the Drop In Centre); Ruth Stainbrook (FEAT), who provided initial approval for the study and opportunities to recruit participants from

within their organisations. Without the initial support and encouragement of these key individuals the project would not have gotten off the ground (see Appendix M).

I applied for funding for the research from different organisations and this process helped to solidify the parameters of the research project. Three separate applications for research grants were submitted, each requiring a different focus and direction to meet the funding criteria, eventually all were unsuccessful. Two proposals specifically targeted youth homelessness, a priority area for a Government funded program of research. The third application focused on rural and regional homelessness, including a study in Mt Isa, a rural town 1000km West of Townsville. Ultimately the lack of funding and the process of preparing these detailed documents provided greater clarity for this project.

In 2008 I was able to commit myself fulltime to the research study for a 6 month period of fieldwork during which I conducted a pilot project (outlined in Chapter 6). Looking back at this initial phase of the project I am reminded that despite being given this opportunity to truly engage in the researcher role, I was very reluctant to leave the safety and familiarity of my academic role. I negotiated to continue to work one day a week and maintained my involvement in a number of other projects. In short I was not yet a researcher, but rather an academic that was doing research as work, and therefore in a very different role. I have come to realise that becoming a researcher does not occur at the point of enrolment, not even after candidature is confirmed, in fact it is not signaled by any deducible external marker. The process of becoming a researcher is an internal one, a change in perspective, a belief in the process as a way to learn, an integration of the journey and the journey-er. This process didn't occur on a particular day when some significant event occurred, for me the process has been gradual, although integrally linked to the act of 'doing' research, 'being a researcher' initially felt like playacting, and impostership, which slowly disappeared as I became more familiar and experienced in the role, and results in a sense of 'becoming' a different person, personally and professionally changed through this process.

4.6 Responding to the Landmarks

Although unsuccessful in obtaining funding for the project, the knowledge gained through the process of grant applications was helpful in formulating a plan for the research study. From reviewing the literature on youth homelessness I made a clear decision to exclude youths

from my study. The literature demonstrates that young people often leave home to escape difficult situations, they often ‘couch surf’ for a while, try returning to their home and leave again and gradually move onto the streets. In Australia, youths are not expected to be independent of parents and family or to be able to survive alone, therefore homeless youths are catapulted into independence, though lack the skills to look after themselves and maintain their own wellbeing. Unable to obtain employment because of limited education, experience and a lack of skills, they fall into a trap of neither being dependant nor independent. Simply put, homeless youth are severely disadvantaged in their ability to look after themselves and as a result I felt their situation to be separate from the experience of adults. For this reason I decided that the focus of my research would be on adult homelessness, initially anticipating 25 years to be the minimum age, but after meeting a number of homeless mothers with children who were in their early twenties and responsible not only for themselves but also for their children, I changed the minimum age to 22 years.

The upper age limit of 65 years reflects the retirement age in Australia. In setting this upper limit, the aim was to exclude people who were unable to engage in some activities due to poor physical health resulting from the aging process. This upper limit is inappropriate for Indigenous Australians whose life expectancy remains significantly lower than for other Australians, and older Indigenous people are defined as those that are 45 years and over (Waugh & Mackenzie, 2011). Indigenous Australians between 45 years and 65 years were not excluded from the project but it was anticipated that it would be unlikely for Indigenous participants to reach the upper age limit.

The other clear decision made as a result of the grant applications was the location for the research. While a two centre study had appeal, without the funding to support the travel the study became focused on Townsville. I was also aware through this process that proposing research with organisations and communities with whom I had not developed relationships and had no prior involvement would be problematic. In retrospect, this decision has allowed me to become more involved in the services in Townsville and to include more participants than originally planned. More significantly, the research was framed as a case study of homelessness in Townsville and therefore the study is bounded by a geographic border and a research approach.

4.7 Locations for Data Collection

In developing relationships with the three key individuals mentioned previously, three specific services provided approval for the study. Initially, I was offered the opportunity to conduct an evaluation of the Spiritus Art Program that had been running for two years at the 'Drop In Centre'. The process of the evaluation involved participant observation of the Art Program over a period of six months and gave me a legitimate purpose for visiting the Drop In Centre. I continued to attend more irregularly throughout the study and began to develop relationships with individuals who later became participants in the research project. The Art Program evaluation pilot study provided an opportunity to explore the proposed design for the larger study, a point of access to a previously unknown area, and an opportunity to determine the feasibility of participant observation and interviews in this setting (Kumar, 2011). The aim of the pilot project was separate from the aims of the main project as its specific focus was on the meaning of art to people experiencing homelessness. As such, the pilot project supported the case study as a whole.

During the study, some homeless services have undergone a number of changes. In contrast to the services that have been stable for many years, others have experienced major changes in their management, funding and physical location. Support for the research and access to clients was understandably restricted when organisations were challenged by such changes. Several requests to organisations for permission to access clients were rejected or unanswered as a result of these changes. However, the change in management at the 'Reverend Charles Harris Diversionary Centre' and the appointment of a new manager opened a significant door for this project. The new management (Yumba-Meta Housing) was supportive of the project and gave permission for me to visit the centre between 7.00am and 9.00am, after breakfast and before those that had stayed in the hostel were taken by bus back to the city. Inclusion of this shelter on the outskirts of Townsville, specifically for people who are intoxicated and need a safe place to sober-up and sleep, gave me access to many more Indigenous people than would otherwise have been participants in the study.

Another opening for the study came in permission to spend time at the 'Family Emergency Accommodation Townsville (FEAT) play group', a weekly community play group that was held in a city park and facilitated by a mobile play bus and two excellent early childhood educators. Women with pre-school children who were living in FEAT accommodation were

invited and transported to the park so that they could meet each other and the children could play together under the guidance of the staff. The play group offered the opportunity to talk informally to women and to the staff while participating in the play group. Although no research interviews were conducted with the women, the information gained and observations made from being involved in this setting highlighted some of the issues faced by homeless families. Attending the playgroups and meeting with staff members regularly resulted in a number of direct referrals to other women who agreed to be interviewed for the research.

With the support of these three organisations providing different services across Townsville for people experiencing homelessness, I was encouraged that the study would be able to proceed and, following the successful outcome of the pilot study, I continued to make regular visits to conduct the research over the next four years. In these settings I have met with many homeless people, some of whom I have got to know well and interviewed three or four times, others who have refused to be involved with me or the research project, a decision that I respect. In a strange way I feel that I have become part of the community of people, clients and staff that deal with homelessness in their lives. This is a community I now have a relationship with and feel a responsibility to; people I meet from time to time in town, in supermarkets and by the beach who greet me as a friend, with a smile and conversation. When my visits to the Drop In Centre stopped because of work commitments, these people asked where I have been and when I am coming back, and why I haven't visited. In the project these are some of the most significant landmarks, the affirmation that as a researcher I have established meaningful relationships of trust and friendship with the people I am researching.

4.8 Preparing for Research with Indigenous Australians - Seeking help and advice

One initial concern in conducting this research project was the need to learn more about researching with Indigenous Australians. This research is at least in part Indigenous in its goal to make space for Indigenous stories to be told ethically and sensitively from the perspective of Indigenous knowledge (Tuhiwai Smith, 2005). Appreciating the history and potential of research as a colonizing force and oppression (Bishop, 2005; Rigney, 1999), the research design, researchers conduct and the final reporting of this research has been tested and guided by the input of a number of cultural advisors along the way. As a white, middle

class professional woman I was anxious about the acceptability of my research project to Indigenous men and women within the homeless population in Townsville. Therefore, a significant aspect of preparation for the research involved increasing my cultural competence as a researcher. The remainder of this chapter will focus on the processes, support and outcomes of this preparation.

Research supervision is a requirement for all PhD students; however the opportunity to discuss issues related to Indigenous culture has been highly beneficial. I have two supervisors; Associate Prof Dr Marion Gray is an Occupational Therapist with a background in public health research and Professor Sue McGinty works in the School of Indigenous Australian Studies and has a background in education and social science. Both supervisors have worked at the cultural interface in their own research studies and have shared their knowledge and experience with me. Supervision has challenged me to reflect and explore my cultural assumptions and to listen actively to the voices of Indigenous participants with the awareness of my cultural biases. Throughout, I have been encouraged and supported to read, reflect, discuss and attend training to develop as a culturally safe researcher of Indigenous ways of knowing, being and doing (Martin, 2008b).

4.8.1 Ethical Considerations

Ethical approval for the study was granted through the James Cook University Human Research Ethics Committee (approval number # H2905) and required adherence to the *Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Research* published by the National Health & Medical Research Council (NHMRC, 2003). These guidelines provide both protection and representation of Indigenous community interests and are a vehicle for voicing Indigenous interests (Dunbar & Scrimgeour, 2006). The guidelines support participatory orientations to Indigenous Australian research with an emphasis on partnerships between researchers and the Indigenous community, which inform the design of research, its implementation and the reporting and dissemination process from a values approach (Dunbar & Scrimgeour, 2006; NHMRC, 2003). Six values are outlined:

- Spirit and integrity
- Reciprocity
- Respect

- Equality
- Survival and Protection
- Responsibility.

The first of these values, Spirit and Integrity, is ‘an overarching value that binds the others into a coherent whole. It has two components. The first is about the continuity between past, current and future generations. The second is about behaviour, which maintains the coherence of Aboriginal and Torres Strait Islander values and cultures.’ To ensure that this research fulfilled the intent of these guidelines and protected the values and culture of Indigenous Australians, I drew on the collective wisdom and guidance of cultural advisors, mentors and community members throughout the project.

4.8.2 School of Indigenous Australian Studies, James Cook University

The study was conducted jointly within the School of Public Health Tropical Medicine and Rehabilitation Sciences (SPHTMRS) and the School of Indigenous Australian Studies (SIAS). An annual three day workshop for post graduate students provides ongoing education and peer supervision with other researchers through SIAS, and has been an essential component of my preparation and reflection on researching with Indigenous Australians. Through my association with SIAS, I gained unrestricted access to senior Indigenous researchers and academics at various stages of the research project. The support and gentle questioning of my research plan and implementation has provided regular cause for reflection on, and refinement of, the study.

Prior to completing the project proposal and ethics application, I was able to attend a workshop on research with Aboriginal and Torres Strait Islanders, facilitated by Yvonne Cadet-James, at the School of Indigenous Australian Studies, James Cook University. This workshop explored the history of Indigenous research and provided insight into the ways in which I could engage Indigenous Australians into the project.

I have attended four annual SIAS post graduate workshops. These three day intensive research education and training opportunities prioritise Indigenous Australian research methods and practice issues as an academic discourse, conceptualised as the cultural interface (Nakata, 2002). For me, the opportunity to discuss with Indigenous and non-Indigenous peers

engaged in Indigenous research opened my eyes to the cultural influences of the profession and of my own interpretation of the world. These workshops were integral to expanding my understanding and awareness of alternative world views and cultural considerations in Indigenous research. Reflecting on occupational therapy research and practice at the cultural interface gave rise to an article published in the *Australian Occupational Therapy Journal* in 2011 (see Appendix B). Excerpts from this publication are included below and outline the critical learning gained from participating in the SIAS forums.

At the cultural interface, Western knowledge meets Indigenous knowledge and recognises that these two knowledge systems co-exist and provide a place of learning for both. For Indigenous people life, whether remote or urban, is lived at the cultural interface where both knowledge's are interwoven and compete for priority in the context of everyday life. The melding of traditional ways of knowing and western ways is a way of life for Indigenous Australians. According to Nakata (2002):

At the interface, traditional forms and ways of knowing, or the residue of those, ... inform how we [indigenous people] think and act and so do Western ways, and for many of us a blend of both has become our lifeworld (p. 28).

For those of us that are not Indigenous, the cultural interface is a place of continual questioning of what is thought to be known and learning of an alternative knowledge system that is continuous with, and embedded in, the cultural experience of Indigenous Australians. Just as Western knowledge is plural, with arguments for and against all aspects of life, within Indigenous knowledge similar conflicts exist. The cultural interface is not then negotiated by determining what is right and what is wrong, but by the understanding that knowledge is culturally relative and unique to the given culture or society (Nakata, 2007). It is not my place to outline Indigenous knowledge or to presume to have understood this concept effectively, I would however direct those interested to read the work of Karen Martin, an Indigenous researcher and author who has influenced me personally and professionally by her writing (Martin, 2003).

Colonisation of Indigenous knowledge has been achieved through the systematic privileging of western scientific and historical frameworks, whilst regarding Indigenous knowledge as that depicted and recorded by non-Indigenous anthropologists in the name of science

(Tuhiwai Smith, 1999). Western knowledge, and in particular academia, has perceived Indigenous knowledge as non-scientific and different, and researched Indigenous culture as 'other' in relation to the dominant culture (Nakata, 2002). For non-Indigenous researchers and occupational therapists, the effects of colonisation in terms of the undermining of Indigenous knowledge are ingrained and unconscious. Considerable effort is required to become aware and then question assumptions that contradict or are challenged by contact with Indigenous peoples.

To further illustrate, two critical incidents encountered in the process of my research may be of relevance to other occupational therapists working at the cultural interface. Both involve the understanding and interpretations of specific terms that are used commonly in the profession, which were challenged by respected Indigenous peers in the context of a mentoring process.

The first challenge focused directly on the use of the word 'occupation' as the foundation of practice. The term occupation has different connotations to indigenous people who understand this term as an act resulting in dispossession of land and loss of cultural identity (K. Martin, personal communication, 20 July 2008). Further reflection of this idea and subsequent research highlights the three meanings of occupation as an activity in which one is employed, the act of possessing a place and an invasion, conquest or control of territory. Within the profession, the meaning of occupation is clearly confined to activities in which a person is engaged. However, the profession understands that occupation occurs within a context, both physical and social, and therefore the process of occupation involves space and place. In this way it is easy to understand how the different meanings of the word occupation have evolved over time. As occupational therapists our role is to promote meaningful occupations that are actions in space and time, and through these actions participants realise their potential for control of themselves and their environment. The link between occupation as action and occupation of territory is therefore not as remote as we might like to think.

The second challenge came in questioning of the term 'empowerment' in the context of Indigenous communities. Previously, Nelson (2009, p. 98) questioned the use of the term empowerment in the profession as indicative of a presumed position of power. This term suggests that it is possible to give people power through our interventions, and undermines the potential of individuals to become empowered through their own efforts. In light of this, I

was not surprised when an Indigenous peer questioned the appropriateness of the term empowerment in an Indigenous context. His observation proposed that Indigenous people and communities talk about self determination as the mechanism for gaining power (A. Miller, personal communication, 5 May 2010). Whilst I don't profess to understand the meaning of self-determination as it is used in the Indigenous communities, there has been a significant shift in my understanding of how occupation has the potential to change power relationships, to support self determination for individuals and communities as a mechanism for social justice.

These two incidents provide tangible examples of how working at the cultural interface requires critical questioning of professional assumptions based on Western knowledge whilst simultaneously being open to learning about Indigenous knowledge. The process requires deep reflection on assumptions and the ability to navigate a pathway that respects both knowledge systems. The remainder of this chapter will highlight some of the specific strategies to assist in researching at the cultural interface and their applicability to the occupational therapy practice context.

4.8.3 Cultural Advisors and Mentors

I do not claim that this research is truly Indigenous research, 'conceived, shaped, governed and understood within Indigenous knowledge traditions' (Christie, 2006); as a non-Indigenous novice researcher the aim of this project was explicitly to explore the occupations of people who are homeless. The context of this study on homelessness in North Queensland inevitably includes the lives and voices of Indigenous people, and necessitates a deliberate and conscious attempt to appreciate the influence of culture and colonisation on the occupations and wellbeing expressed within Indigenous lives and voices of homelessness. Overwhelmingly, previous occupational therapy literature and research on the homeless, predominantly from the US, omits to specify the ethnicity of participants in the studies and neglects cultural influences in the observed patterns of occupational needs and intervention results. By omission these studies suggest that despite over-representation of African-American (42%), Hispanic (20%) and Native Americans (4%) within the homeless population of the US (U.S. Conference of Mayors, 2007 cited by National Coalition for the Homeless, 2009), culture and knowledge traditions are insignificant to studies of occupation and occupational therapy. In contrast, the original conception and design for this study

included Indigenous participation and Indigenous knowledge through discovering appropriate ways to place Indigenous voices in the findings.

The construction of knowledge concerning Indigenous people requires a central role for Indigenous experience and interests in the research processes and outcomes (Porsanger, 2005). Academic researchers have been criticised for silencing Indigenous voices and de-humanising Indigenous lives (Fredericks, 2007; Tuhiwai Smith, 1999). There are dangers that research produces ethnocentric, culturally inept and flawed outcomes when it fails to incorporate and prioritise Indigenous cultural perspectives and such outcomes further marginalise and erode Indigenous knowledge (Christie, 2006; Foley, 2000). Indigenous centered methodologies, according to Martin (2003), reflect Indigenous ways of knowing, Indigenous ways of doing and Indigenous ways of being and recognises that all knowledge is socially situated and grounded in the subjectivities and experience of everyday life (Moreton-Robinson & Walter, 2009). To ensure the centrality of Indigenous knowledge in this project I sought advice and ongoing education from a number of Indigenous advisors and mentors.

The importance of cultural advisors and mentors for me, a non-Indigenous researcher cannot be underestimated, contrary to claims that such roles relegate Indigenous expertise and power to a subordinate role in the research process (Roe, Fredericks, Coffin, & Adams, 2010). In addition to formal and informal education available from within the University, cultural mentors played a critical role in helping me to understand the situation of homeless people from an Indigenous perspective. Relationships with my mentors allowed me to continue an ongoing dialogue aimed towards developing a cultural lens through which I could understand the situation of Indigenous people who are homeless, as pertinent to Indigenous ways of knowing, doing and being (Martin, 2003) and a response to the dispossession and colonisation of Indigenous people in Australia. An integral component of this education resulted in a simultaneous awakening to the historical and contemporary privilege and power attributed to being a white academic (Martin-McDonald & McCarthy, 2008). At times throughout the project these two aspects on my learning left me emotionally and intellectually challenged, looking back at the past and trying to forge a different path ahead created doubts and deliberations in the research process that I was incapable of addressing alone. The wisdom and guidance from my cultural mentors at these critical times played a crucial role in the research.

Through the course of this project I have engaged with four cultural mentors. The first, Albert Abdul-Rahman, is primarily familiar with the homeless culture having worked in the sector for many years and was able to introduce me to people on the streets. Albert's wisdom and his reflections on the research process shaped my understandings of participants' behaviour and the data collected. It is important to add that this cultural mentor is not an Indigenous Australian but is originally from Papua New Guinea, however his understanding and insights into homelessness and social issues such as racism has provided powerful learning. He has previously worked with the Queensland State Indigenous Affairs Minister, he has been a member of the Townsville Catholics Church Aboriginal and Islander Council and he is currently a regular elder of the Townsville Aboriginal and Torres Strait Islander Court.

In the initial stages of this project, Albert took me on a tour of Townsville camps and places frequented by Indigenous Australian public place dwellers. Despite living in the city for more than seven years, this tour gave me a new perspective on these public spaces. Later, he took me to Happy Valley and to the Townsville Aboriginal and Islander Health Service. Through Albert I met with the Aboriginal and Torres Strait Islander Catholic Council in Townsville and was able to gain approval for the study from this organisation.

Over the course of the first two years of the project Albert and I met on a regular basis and shared our different individual perspectives on homelessness. It is these conversations that have broadened my understanding of the issues of racism and exclusion foundational to this study. As I began to encounter Indigenous Australians in my fieldwork and observed interactions between them, I was able to reflect on these situations in mentoring sessions. Albert provided mentoring following the first interviews with Indigenous Australian participants, and helped with interpretation of the data. Most of these conversations were recorded and transcribed and allowed me to return again to the knowledge given over the course of the study. I have repeatedly gone back to these documents to make sense of situations that arose in this research.

Listening to Albert's perspective on Indigenous Australian homelessness in Townsville provided an alternative worldview and helped me to question assumptions and the dominant views portrayed in the media, and by peers and even some of the service staff. It is important to add that this was not a process of indoctrination, but rather allowed a careful dismantling of preconceived understandings leaving me more open to hearing the perspectives of the

Indigenous Australian participants. As examples I have included two quotes from these transcripts that challenged my beliefs and values and opened my eyes to the complexity of issues for which I had little prior knowledge that were inherent to this study:

“When you hear them crying out, when you see them inflicting pain, when they kill each other, punch each other up, stab each other and then they still come under that tree together, they still look after each other, it’s incredible, it’s incredible. Not many people do that. They have been down-trodden, they have been dispossessed, their sense of pride has been taken away and when you lose all that and you live on the fringes of all that nature, what do you do? Some do survive by stealing from the rich but it’s all temporary, or you may steal from the poor, still temporary, but all in all they still come back together and enjoy those resources that they have got.”

(A. Abdul-Rahman, personal communication, 13 July 2008).

“Every park person comes from a tribal group, every park person comes from a community, every organisation should come under the umbrella-ship of a tribal group. They should go to the park to search for their tribe people and then employ those people in the organization or look for some economic sustainability to support these people. But then the communities that these people come from, terribly dysfunctional! But are you going to blame the people for that, absolutely not.”

(A. Abdul-Rahman, personal communication, 25 March 2008).

In the later stages of this study I engaged with three additional cultural mentors from the Townsville community; all were both were government employees working in local services and had direct contact with the homeless community in their roles.

Chris Henaway is an Indigenous Occupational Therapist working with the Queensland Health Alcohol, Tobacco and Other Drugs Service (ATODS) with a primary role in the Queensland Indigenous Alcohol and Drug Program (QAIDP), a court based alcohol diversion program for Indigenous offenders. Chris is affiliated with the Juru people whose traditional land includes the Burdekin Region and extends from Cape Cleveland, south of Townsville to Cape Upstart, south of Bowen. His family is also traced to Vanuatu, where his great grandfather came from

during the early settlement of the Burdekin. A practice of 'blackbirding' or forcibly taking people from the South Sea Islands to Australia to work on agricultural properties was common in the later part of the nineteenth century. With the introduction of the White Australia Policy, Chris's grandfather was given a choice to either return to his homeland or to marry a local Indigenous woman. He married into the Juru tribe and had three sons before he was murdered. Chris's great grandmother then had another family and lived on Palm Island. As a consequence, Chris's family have married people of different cultural descent and now includes people who are Aboriginal, South Sea Islanders and Torres Strait Islanders, a situation that is extremely common in this area. Learning about Chris's family provides insight into how over the last century kinship relationships amongst Indigenous Australians have become complex.

Chris provided mentoring on the initial interpreting of the Indigenous interview data and on the presentation of findings. During the project, Chris also enabled access to the Queensland Court process, which provides the opportunity for Indigenous offenders to divert into alcohol detoxification and rehabilitation prior to sentencing. I met with Chris on numerous occasions to talk about the research project and he provided an Indigenous perspective on some of the interview data. Towards the final stages of the project Chris reviewed and discussed the analysis of data from Indigenous participants and contributed to the development of the collective narrative. He generously shared his knowledge and experiences of the meanings of occupations to people who are drinking in the park.

Robert Cedar is a project officer for Aboriginal and Torres Strait Islander Services, North Queensland Region, Department of Communities. In this role he has specific responsibility for Happy Valley, a small Indigenous town camp on the outskirts of Townsville and is working actively with the Indigenous community living there. He has initiated a Midnight Basketball Team in Townsville for Indigenous youth. Robert's cultural affiliations are Torres Strait Islander; his father came from the Darnley Island (also known as Erub Island). Prior to missionary days the island attracted pearl divers and sea farers from the Philippines, Malaya and the Pacific Islands. His mother came from Lifou Island, which is now part of New Caledonia, Loyalty Islands. Robert's cultural background includes Torres Strait, Malaysian and PNG. Born on Thursday Island, Robert has lived in Townsville for almost all of his life and worked in a number of government positions, including working in the adolescent detention centre where he conducted cultural competence training with staff. Coincidentally I discovered that

almost 11 years previously, as a recent immigrant to Australia, I had been a participant in one of these workshops, where I had begun to learn about Aboriginal culture and history.

During the project I met with Robert three times to discuss the research. His encouragement and wisdom was invaluable to understanding the cultural connections and history of the people who are meeting in the parks. On the second visit Robert took me to Happy Valley to interview two residents who wanted to contribute to the research. On two of our meetings Robert invited a colleague, Peter Malouf, to join us. Peter and I had previously met at the University and we had worked together in developing a workshop for Occupational Therapy students. Peter became the fourth cultural mentor and contributed to the research mentoring sessions with Robert by providing feedback and assistance in the development of the narrative case study. Peter is an Aboriginal man from Central Queensland, his mother is a Wakka Wakka and Wili Wili woman from Central Queensland, his father is Australian of European and Lebanese descent.

Together these four cultural mentors have made significant contributions to the research and have patiently and generously listened, read, discussed and guided the ideas that have taken shape through the research. Without the assistance and guidance of these cultural mentors this research would have been culturally deficient and flawed.

4.9 Participants and Service Providers

The relationships developed with homeless people over the last four to five years have provided the greatest learning. Observations made through many hours of fieldwork, engagement in a range of contexts and in-depth interviews have taught me what I now know about homelessness in the context of real relationships. Participants have challenged my perceptions of living on the streets and have given me an insight into how people who do not have a home maintain a sense of wellbeing in the face of marginalisation.

Discussions with staff members from a range of services have also shaped my understanding. Staff members have shared their thoughts and frustrations with me and through these conversations I have been able to explore issues of occupational injustice inherent in the systems and service funding that surrounds homelessness. In the final stages of data collection I made a decision to include the voices of staff members from the service provider

organisations in Townsville through conducting a series of focus groups. The timing of this decision is relevant, as it was at the point when the data collection from people experiencing homelessness was finished and most of the analysis complete. Consequently, the collection of staff opinion and experiences provided a means to triangulate the existing data and to extend the research in a new direction related to the current national homelessness agenda. The results of this aspect of the project are reported in Chapter 10.

The focus groups of service staff also allowed for an update on the current service provision and included additional services in Townsville, providing a more complete picture of homelessness in Townsville. I was aware that this final stage of research would be a diversion from the original goal of exploration into occupation and potentially could provide conflicting opinions, which may question the participants' stories. I decided to 'test out' my initial findings related to wellbeing with the staff and explore perceptions evident of journeys towards wellbeing that had been observed by the staff. While a different perspective was what I wanted to achieve, I particularly wanted to avoid discussions focusing on the problems of homeless people and reaffirming deficit perceptions of homelessness. A more forward thinking and positive approach was required and resulted in the selection and use of an Appreciative Inquiry model for the focus groups (Cooperrider, Whitney and Stavros, 2008). The focus group methodology therefore began with positive stories of success from each staff member and concluded with ideas for how the national agenda could be achieved in Townsville.

4.10 The Journey Continues

In narrating my own journey through the research project in this chapter my intention was to demonstrate the journey of inner discovery as separate from, though integrally connected with, the research process undertaken. Through my reflections, the separateness of the 'path' and the 'way' becomes less evident over time, the researcher and the research intertwine and become a 'knitted' whole. The personal and the professional aspects of the exploration feed into each other in both dramatic and subtle ways, with both aspects of self changed by the other. When I started the project I was overwhelmed by the difference between my own life and that of my participants and struggled to find common ground. As I write the end of this chapter I recognise that in the relationships I have made with participants I have come to new understandings of aspects of myself and of my profession, and opened my eyes to the shared

hopes, needs and fears that are integral to human life and expressed in infinitely different ways.

This chapter cannot be brought to a neat conclusion because the journey continues, hopefully for many years to come. Throughout the analysis and write up of the project many small decisions and landmarks have evolved and been reflected on and continue to shape the research project and the researcher's journey. In the preparation and revision of articles, the presentation of conference papers, and the writing of the thesis my thinking about the research and its meanings continue to develop. The thesis outlines the results of this project to date, which like any and all occupations is bounded by space and time, but it doesn't necessarily signify the end. I anticipate future research opportunities around homelessness will build on what I have learnt so far and extend my knowledge in new and different directions. I know that the voices and stories shared in the process will reverberate and be added to in the future, as my current relationships with participants and with cultural mentors will continue and new relationships develop and redirect my interests and learning.

Chapter 5

The Research Path

Structural Features of the Research Process

...constructivism adopts a relativist ontology, (relativism), a transactional epistemology, and a hermeneutic, dialectic methodology. Users of this paradigm are oriented to the production of reconstructed understandings of the social world. The traditional positivist criteria of internal and external validity are replaced by such terms as trustworthiness and authenticity. Constructivists value transactional knowledge. Their work overlaps with several participatory action approaches.....Constructivists connect action to praxis and build antifoundational arguments while encouraging experimental and multivoiced text (Denzin & Lincoln, 2005b, p. 184).

5.1 Introduction

In this chapter I outline the research methodology, methods and interpretative processes utilised in this study, reflect on issues of validity and trustworthiness, and discuss the limitations of the research. The research methodology and methods provide the structural features of the research journey, or the path, and relate to the external landscape of the study on homelessness (Fredericks, 2007). The research is contextualised physically by its location of Townsville and theoretically by the occupational perspective of health. As has been identified in the literature review, the precarious position of marginalised people experiencing homelessness results in poor health and raises issues of social and occupational justice. Therefore, the research design aims to incorporate broader perspectives of social justice and to support critical concepts of empowerment and strengths perspective (Kemmis & McTaggart, 2005; Saleeby, 2009). The methodology, methods and interpretive practices were chosen to ensure the voice of those experiencing homelessness were prioritised and to address issues of justice (Charmaz, 2005).

The research path was grounded in a constructivist paradigm aimed to produce reconstructed understandings of the social world of people experiencing homelessness in Townsville (Denzin & Lincoln, 2005b). As such, the research path provides the basis for the research design (methodology) and the research practices (methods). In this study, analysis and

interpretive practices result in the production of new knowledge based on socially relevant and constructed meanings arising from the activities and agency of the community under study. Rather than an absolute truth, the results of this study comprise multivoiced reconstructions of social meaning (Guba & Lincoln, 2005).

The design of this study evolved over time as the multifaceted and complex nature of homelessness became more apparent. As I continued along the research path, discovering and gaining insights into the policies, practices and perspectives of homelessness, it was obvious that prescriptive and rigid research methods were inadequate for achieving a deep understanding of the occupations that contribute to wellbeing for the homeless community in this region. I was continually challenged to think more broadly and critically to integrate knowledge from multiple sources to interpret and understand the homeless experiences I was being exposed to. As such, research methods could not be applied in a ‘universally prescriptive’ or ‘painting by numbers’ way (Stronach, Garratt, & Piper, 2007, p. 196), rather an ongoing process of reflexivity and innovation was necessary throughout the study (Chamberlain, Cain, Sheridan, & Dupuis, 2011).

5.2 The Research Paradigm

I decided that a broad and pragmatic methodological approach was required for this case study to allow for inclusion and recognition of different experiences of homelessness in Townsville (Patton, 2002). Pragmatism links the experiences of people to their social world such that the world cannot exist outside those experiences, or that the experiences cannot exist outside of this context (Greenwood & Levin, 2005; Morgan, 2005). The pragmatic approach allowed me to make ethical decisions regarding the most effective and appropriate methods for answering the research questions (Morgan, 2005). Underpinned by the concept of the qualitative researcher as ‘bricoleur’ (Denzin & Lincoln, 2005a, p. 3), a range of methodological strategies relevant to the specific context were used in order to produce an emergent construction.

The case in this study is defined in a general sense as adult homelessness in Townsville; however the nature of homelessness is not a ‘specific unique bounded system’ (Stake, 2005, p. 445) as indicated by the identified problems of defining homelessness and its boundaries. A pragmatic definition of ‘the case’ here includes the users, and providers, of homeless

services, together with the complex system of structural and social administration that collectively influences the experience of homelessness. The research aimed to describe and interpret the experiences that constitute homelessness in Townsville with explicit reference to the social, cultural, situational and contextual environment that frames this particular case (Stake, 2005). Simultaneously, the study aimed to contribute to the theory of occupation and occupational justice as it relates to homelessness through generating new knowledge with reference to existing knowledge and theory (Mjøset, 2009). Understanding the causal relationships between an occupational perspective of wellbeing within the context of diverse experiences of homelessness was the overall aim (Yin, 1993). Although initially conceptualised as a single case, as the study progressed new units of analysis became apparent and nested case studies emerged within the primary case study (Figure 5.1).

The case study draws on a range of methods that are connected within a constructivist paradigm with assumptions that individuals construct their own knowledge and reality and, as such influence their lives and interactions with others (Denzin & Lincoln, 2005b; Patton, 2002). I used methodological procedures that were contextualised to the study of homelessness in Townsville and integrated through a variety of interpretive practices to give voice to multiple perspectives as opposed to a singular objective reality (Denzin & Lincoln, 2005b; Patton, 2002). Elements of critical theory and participatory research were incorporated in the case study design and constitutes a ‘blending of paradigms’ that resonate comfortably with each other (Guba & Lincoln, 2005, p. 226). In this way a ‘montage’ of interpretive processes was utilised to better understand the relationship between occupation, wellbeing and homelessness and provide depth to the case study (Denzin & Lincoln, 2005a, p. 7)

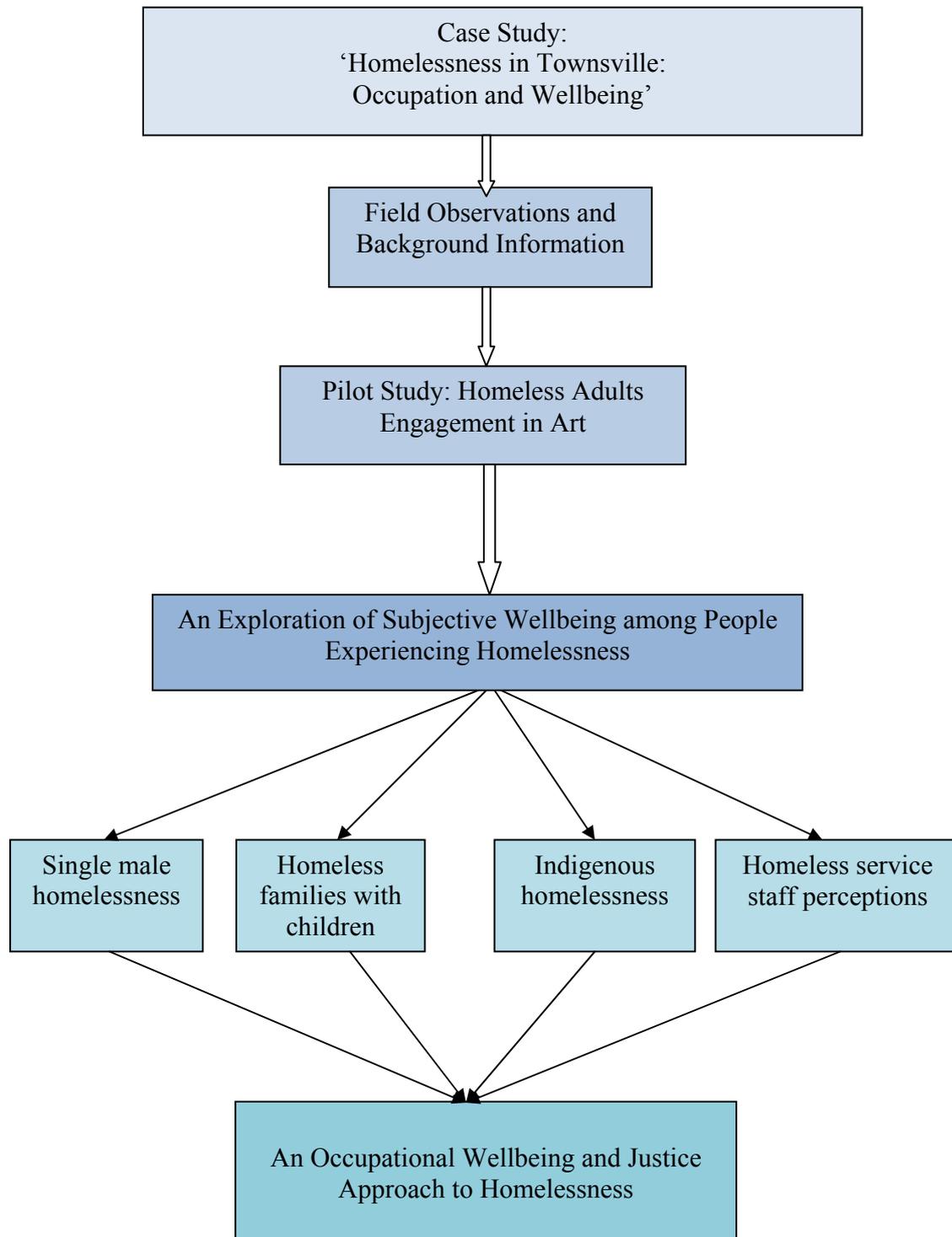
A case study approach provided the framework for the research project, and supported the research design and data collection processes to be tailored to the research questions (Merriam, 1988). This allows for multiple sources of evidence in data collection, continual reflection on methodological choices, and a range of analytic processes to achieve increased credibility of the findings (Stake, 2005; Yin, 1993; 2009). Simmons’ definition of case study (2009) provides a foundation to the methodological approach used:

Case study is an in-depth exploration from multiple perspectives of the complexity and uniqueness of a particular project, policy, institution, program,

or system in a 'real-life' context. It is research-based, inclusive of different methods and is evidence-led. The primary purpose is to generate in-depth understandings of a specific topic, program policy or system to generate knowledge and/or inform policy development, professional practice and civil and community action (p. 21).

The ultimate aim in case study research is to understand the causal relationships between a particular phenomena, in this case an occupational perspective of wellbeing, within a specific context, that is homelessness in Townsville, rather than simply describing a situation (Yin, 1993). These two aspects form the boundary of the case (Stake, 2005). Such boundaries are important for case selection and definition of the case to be studied. This study comprises an instrumental case study of empowerment & justice for people experiencing homelessness in Townsville, constructed from a practical occupational perspective using data on how homeless people live and create meaning in life (Stake, 2005).

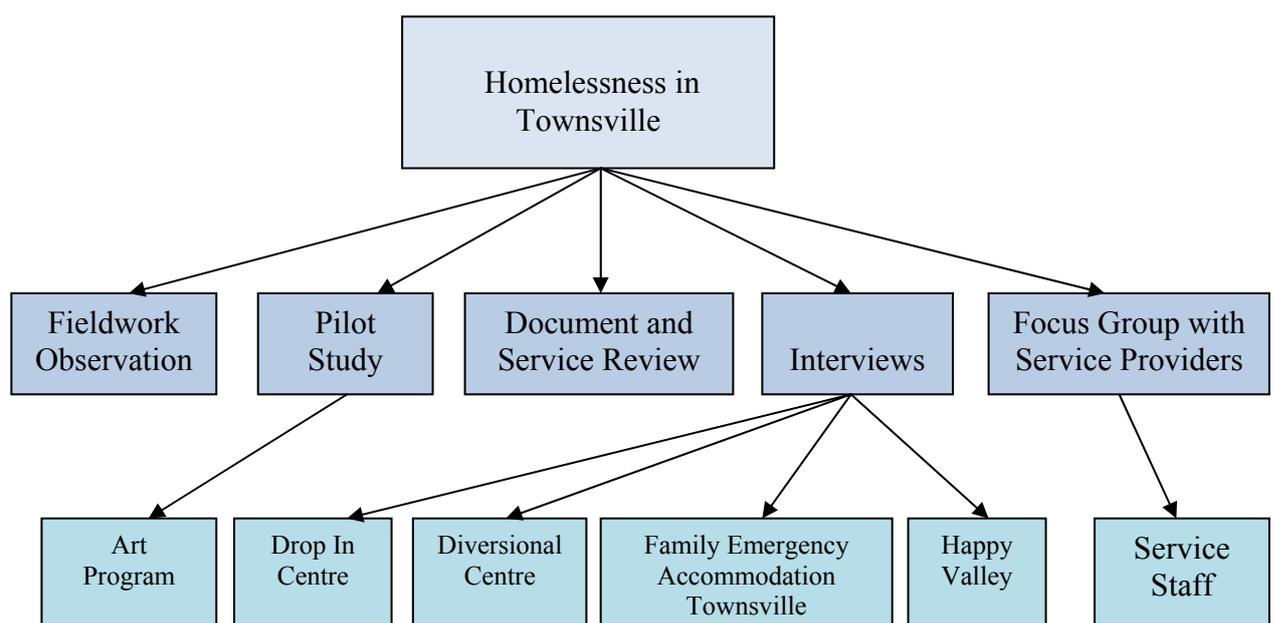
Figure 5.1 Research Process: A Nested Case Study



5.3 Preliminary Research Methods

Five case study methods were utilised for this study (Figure 5.2, second row of boxes) including fieldwork observations; a pilot study; document and service review; interviews; and focus groups. Data collection was conducted with participants in a range of settings (see third row of boxes, Figure 5.2).

Figure 5.2 Research Methods and Sites



5.3.1 Fieldwork Observations

In this study, fieldwork observations provided opportunities to engage and become familiar with people experiencing homelessness in Townsville and to gain firsthand knowledge of the setting used by homeless people (Patton, 2002; Yin, 2009). Fieldwork varied from one-off visits and events to ongoing regular attendance at specific services and facilitated a process of recruitment of participants directly into the research process (Simmons, 2009). Opportunities for participant observation evolved throughout the study, adding breadth to the data and increasing knowledge of the community (Fetterman, 2009). The main settings of the study are identified in Table 5.2 and the geographical locations of these settings are shown on the map provided in Figure 1.4.

Fieldwork observations required repeated negotiation for permission to participate in organisations and ongoing communication with the people within these organisations. As the presence of a researcher may change the action of those that are being observed, my observations were generally scheduled to occur at regular routine times when people were ordinarily participating in activities that would be of interest to the study. My presence and the purpose of the research were explicitly disclosed to staff and clients with no attempt to hide the goal of participation (Patton, 2002). To ensure that everyone was aware of my intention, a polo-shirt with James Cook University (JCU) logo and name was worn at all times and I continued to introduce myself as a JCU researcher to new staff and new clients throughout the four years to encourage their engagement in the research project. In my explanation I told people that I was an occupational therapist working at the University and that my research was to do with how people look after themselves when they were homeless, showing clearly that I was the one who wanted to learn from the participants.

As a participant observer I tried to become involved in shared experiences with participants and to develop relationships with as many people as possible through open communication (Simmons, 2009). I realised that my presence in the research setting may change the actions of participants and therefore maintained regular times when I knew that people were participating in activities that would be of interest to the study. Over time people began to expect to see me and I became part of the community in this way.

An observation diary was kept throughout this process, initially written up after the visits in a personal journal and summarised in a brief reflection that was discussed with my supervisors. Over time I moved from writing a journal to using a digital recording of my observations in the car after each appointment. I found this enabled immediate reflection and subjective interpretation of events, and allowed me to return to the journal entries at a later stage to write up and employ a more detached reflexivity to the fieldwork experiences. Reflexivity was an integral aspect of the data analysis and was achieved through rereading the journal entries and interpreting the meaning of significant aspects of everyday occupation (Alvesson & Sköldbberg, 2000). In subsequent fieldwork visits and interviews these interpretations were tested out and expanded on or refined in light of new information.

Another useful method of collecting data was to talk through situations with supervisors and then journal the combined reflections on the possible meanings of the events discussed. At

different times all three methods were found to be useful and provided the basis of a reflexive process that continued throughout the study.

To gain access to the different settings for data collection I negotiated with each organisation an acceptable participant role to be undertaken within each of the services (see Table 5.1).

Table 5.1 Fieldwork Settings, Frequency and Researcher's Roles

Setting	Frequency	Researcher's Role
The Drop In Centre Drop-in centre providing breakfast and lunch, showers, laundry facilities, and programs	Weekly attendance at the Art Program (Wednesday 9am–12 noon) followed by lunch, over four years. Irregularly at other times to meet staff and participants and observe other programs	Participant in Art Program and assisted facilitator with set up and wash up. Visitor and member
Rev Charles Harris Diversionary Centre Overnight hostel for intoxicated public place dwellers providing dinner, bed, breakfast, showers, laundry, programs and transport back to town.	Weekly attendance (Thursday 7am–10am) for approx. a year	Visitor to communal areas only, provided cakes and biscuits for morning tea and occasional participant in art program
Family Emergency Accommodation, Townville (FEAT) Crisis accommodation and support to homeless families with children	Weekly attendance at FEAT playgroup, conducted in a local park, (Wednesday 9am–12noon) for 6 months.	Volunteer helper with play activities and informal conversations with parents
Happy Valley Indigenous community (town camp) where service providers visit on a regular basis	Irregular visits arranged through cultural mentors	Visitor (accompanying invited providers)

The initial focus of these fieldwork observations related broadly to occupation i.e. what people do and the meaning inherent in their occupations; its relationship to concepts of doing, being (identity), belonging (relatedness), and becoming (potential) (Wilcock, 1999). The settings allowed me to be temporarily immersed in the world of potential participants in a relatively safe way, and to establish rapport with participants through conversations and shared experiences. Moreover, the fieldwork experiences provided opportunities to observe

and interact with people who were experiencing homelessness whilst they were involved in occupations. As the research progressed, fieldwork continued outside the specific program times as a result of the rapport and relationships that had been established.

5.3.2 Pilot Project

During the initial participant observation period a pilot project was undertaken to evaluate an art program held at a drop-in facility for people who are homeless. Undertaking this pilot project gave me a legitimate purpose for attending the art program and enabled me to establish relationships with the participants of the program over a period of time. The evaluation methods comprised participant observation and interviews with clients and staff and have been fully documented in Chapter 6 and so won't be repeated here. The results from this pilot project can also be found in Thomas, Gray, McGinty, & Ebringer (2011).

5.3.3 Document and Service Review

In addition to reviewing research on homelessness, this case study required review and analysis of a large volume of documents, reports, and local newspaper articles relevant to this study (Stake, 2005; Yin, 2009). From a methodological perspective, this review of archival records provided background to the case study and highlighted the influence of government and local policy on the experience of homelessness in Townsville. Importantly, these documents illustrate the changing context of homelessness research and agendas over the recent past. As previously identified, the Australian Homelessness Taskforce, established in 2007 by the Australian Government to reduce homelessness, resulted in the release of National and State government policy and funding directions and has significantly influenced the services available for people experiencing homelessness in Australia. Data collection from documents built a chronological picture of changing trends in service provision and direction.

Local services were visited and meetings with service providers provided a background for the case study. This aspect of data collection provided an understanding of the context of homelessness in Townsville and the provisions that were available. These preliminary meetings were crucial to the development of ongoing relationships with some providers, and the availability of possible research sites for the study. A list of all services identified and visited in the initial phase of the project has been provided in Appendix L.

Most services are funded by contracts with Department of Communities (Housing and Homelessness). As government policy and priorities change, services adapt and these contracts change. Over the course of this project some services closed and others commenced and where possible I met with new providers as their services became established. During these meetings we discussed the services they provided and some of the managers provided copies of additional documents that would not have been readily available through other sources.

5.3.4 Interviews with People Experiencing Homelessness

In-depth qualitative interviews were conducted at each of the settings identified in Table 5.1 to understand the meanings and interpretations that people ascribe to their experiences of homelessness (Rice & Ezzy, 1999). The interview design aimed to explore the positive strengths, resilience, sense of agency and ability of participants to maintain and sustain wellbeing while homeless (Saleebey, 2006). The interviews were conversational, co-constructed and aimed to elicit participants' situated accounts of their occupations and the factors that contribute to their wellbeing (Lysack, Luborsky & Dillaway, 2006; Roulston, 2010; Silverman, 2006). Interviews were conducted after discussion of the research aims and a suitable time and place was negotiated, generally this was in relaxed surroundings in quiet places, either within the service facility or public spaces or, for the women with children, in their homes. Initially an interview prompt sheet was developed to provide a loose structure for the interviews (see Appendix J).

Prior to commencing the interviews the prompt sheet was discussed with a cultural mentor and wording was revised accordingly. For example, after prolonged discussion the term 'wellbeing' was substituted for a more general question 'what makes life good for you?' in the initial part of the interview. The process was piloted with a key informant and the transcription discussed at length with supervisors, however, over time the flow of the interviews was adapted to allow each participant to engage with the research topic in their own way. This was particularly important with Indigenous participants. In the interview 'space and place' few questions were asked, rather the participant's Indigenous knowledge was respected by the researcher and participants were encouraged to talk about their views and opinions in the context of a natural conversation or as information being 'gifted' to the researcher (Roulston, 2010; Schostak, 2006, p. 13). Two Indigenous participants volunteered to be interviewed repeatedly to add additional facts, relevant historic and cultural contexts

and to provide insights into their own lives (see Table 8.1). These interviews allowed me to understand their ‘words with views into different worlds’ (Schostak, 2006).

In contrast, most non-Indigenous participants approached the interview with an openness to find out what I wanted to know, waiting for the questions in order to gauge how much information I wanted. The interviews allowed me to understand the otherness of the interviewee (Schostak, 2006). As I listened and responded to participants, reflecting on what they were saying, and creating ‘space and place’ for their views to be expressed, they were encouraged to say more about their current and past lives. Whereas sticking to the set prompts would have restricted the flow and direction of the conversation, using well practiced interview skills many participants willingly provided additional information, adding information that had not been anticipated.

Sample Size and Selection

Selection of participants was purposeful, to ensure maximum variation sampling (Patton, 2002). In the course of extended visits and conversation with clients and staff, individuals were identified (see below for selection criteria) and invited to participate in the research through an interview. After an explanation of the aims of the project, verbal consent was obtained. An arrangement was then made to meet with the participant, where possible, at a future time to allow potential participants the opportunity to reconsider their participation (see below). At the commencement of each interview, the aims were again repeated and written consent obtained. All participants were adults of working age (22–65 years) and were legally able to consent to interviews.

Selection criteria for participation in the study included people who are homeless as outlined in the AIHW definition; people aged between 22 and 65 years (i.e. mature adults of working age); and people who have used one of the local services identified.

The age criteria for inclusion in this study (i.e. 22–60 years) purposefully excluded people who could be seen as being in a transitional stage in life. At the younger end of the age spectrum when adolescents transition into adulthood, they gradually become established in adult autonomous roles and take increased responsibility for their own wellbeing through their occupations. At the older end, full participation and therefore interpretation of occupation and wellbeing may be influenced by decreasing physical ability and ill health.

There were a number of men who had obvious signs of mental illness and dementia. Such conditions may question the ability to participate in interviews due to levels of concentration, cognitive abilities and fatigue, and the ability to provide informed consent may also be questioned. If symptoms were apparent participation was not invited.

Owing to the vulnerability of people who experience homelessness (e.g. serious mental illness, previous experiences of trauma and abuse) every effort was made to ensure participant safety. Service staff members were consulted prior to the interviews if the researcher was unsure of a potential participant's suitability to be interviewed. Any concern for the individual's emotional state following the interview was immediately reported to service staff, and provision was made for referral to a specialist health service for consultation if required, with the participant's permission.

Issues of Consent

Where possible, a future time and place was arranged for the interview to allow potential participants the opportunity to reconsider participation and ensure that consent was freely given. Assurance that the interview could be discontinued whenever requested was stated initially and repeated during the interview. Participants were given verbal and written information about the study and, as literacy was predicted to be an issue for some, the purpose and process for the interview was outlined in conversation. Once verbal information and consent was obtained, participants were asked to sign the consent form. This approach aimed to ensure that at all times the participants felt in control of the length and direction of the interview, that their knowledge and experience was being sought.

At the end of the interview participants were given a token of appreciation for their time and involvement in the research. No attempt was made to coerce participation with the promise of a gift and participants were asked not to inform others to ensure that participation was voluntary. The form of these gifts was negotiated with the service provider as part of the approval process. At the Drop In Centre these gifts took the form of a \$20 credit card for a major supermarket retailer, for the women with children the gift was a complimentary pass for a local child friendly visitor attraction. The Diversionary Centre's management requested that participants were not individually rewarded and as an alternative the researcher provided cakes and biscuits for everyone at the hostel to have with a drink before they departed at 9.00am. In hindsight, this latter agreement, based on concerns that the money could be used

to support substance abuse, could be seen as patronising (O'Brian & Madden, 2007) and inequitable. In fact these gifts appeared to have no influence on the number of participants or their satisfaction with the process, as indicated by two participants requesting to be re-interviewed on several occasions.

These tokens of appreciation were not sufficient to constitute inducement but on the other hand they allowed for a practical compensation for the time and information provided to the researcher. In the current study, cash payment was not administratively feasible without some form of contractual arrangement between the participant and the University, therefore a small gift token, purchased from a JCU research allowance or donated by the local attraction, allowed the individual to purchase an item of their choice rather than giving a gift that may be of limited use to a person who was homeless and poor.

5.3.5 Focus Groups with Service Providers

A series of service provider focus groups conducted towards the end of the data collection stage aimed to understand the perceptions of staff members involved on a day-to-day basis with people who are homeless. The timing of the focus groups at the end of the project ensured that the voices of staff did not take precedence over the voice of people experiencing homelessness and simultaneously provided an opportunity to obtain feedback on the preliminary interpretations and thereby add to the trustworthiness of the findings (Simons, 2009). The process also challenged initial interpretations and generated another level of reflexivity to the eventual story told from this case study. A detailed description of the process and findings of this phase of the study is included in Chapter 10.

The focus group process was based on 'Appreciative Inquiry', a strengths-based philosophy originally developed for research that has been widely adopted for organisational development (Reed, 2007). Theoretically grounded in social constructivism, Appreciative Inquiry focuses directly on the interpretation of social action through the creation of stories of success (Cooperrider, Whitney & Stavros, 2008). The use of Appreciative Inquiry in a research context encourages collaborative power sharing in community-based research (Reed, 2007). Consistent with the limited aims and purpose of this final aspect of the study, these stories of success and perceptions of future needs from service providers formed the basis of data collection.

The focus group process used in this study can be described as having three phases. Phase one invited participants to share ‘stories of success’ from their experiences working with homeless people and aimed to elicit knowledge of positive strategies for interventions. Phase two involved the presentation of the initial findings of the research on wellbeing to facilitate feedback and discussion on the experience of wellbeing in homelessness. The last phase of the focus groups highlighted the National Agenda to end homelessness and invited participants to ‘dream’ their vision of future services that would meet local needs and offer solutions to homelessness in Townsville. Focus group questions are provided in Appendix K.

Within these focus groups I took on the role of a moderator as opposed to an interviewer and encouraged an atmosphere of sharing knowledge between participants (Patton, 2002). My years of experience in facilitation of therapeutic groups and in teaching group facilitation and evaluation processes were useful in this aspect of the research, to negotiate the pre-existing dynamics of workgroups and differential status and power of staff members. Initial focus and positive feedback was provided to the most junior and unassertive staff, to encourage their input and give value to their contributions. Turn taking ensured that all participants were given an opportunity to share success stories, whilst being mindful to allow for group interactions and responses to the shared stories. Differences in opinion were recognised and implicit in questions and prompts, promoting reflection on the individual skills and attributes that helped to achieve success.

The focus groups were often scheduled for a regular staff meeting or training time, suggesting that the organisations considered participation in the research to benefit the staff and the organisation. Issues of ethics in relation to voluntary participation were challenged by the enthusiasm of managers to ensure high attendance. This was openly discussed at the beginning of each group, prior to signing consent forms and the voluntary nature of participation was clarified with explicit permission for people to leave the focus group or to request that any information they contributed be deleted from the data if required. Confidentiality was discussed as a condition of the focus groups and assurance given that if any identifiable information was provided this would be deleted from the transcripts. A period of 10–15 mins was allocated at the beginning of each focus group to ensure participants were comfortable with the aims of the study and their rights to non-participation. An important ‘ice breaker’ for the focus group included providing cakes or similar finger

food, often home-baked, to set a positive and friendly tone. The focus groups were recorded and verbal and observational data transcribed.

A pilot focus group was conducted to practice the use of questions and prompts and refine the use of an appreciative enquiry approach. Following the pilot group the focus group interview schedules were reviewed and refined, to ensure that the process could be conducted within a 60–90 minute time frame. Through piloting the process and reviewing the recording, redundant questions and prompts were identified and the wording of questions was practiced in a permissive and helpful environment. Data from the pilot groups was coded immediately and discussed with supervisors, this process provided direction for the study process, confirming the usefulness of an appreciative approach. The results of the pilot group are included in this study and contribute to the findings outlined in Chapter 10.

5. 4 Data Analysis and Interpretation

Taken as a whole, the quantity of data obtained through the different case study methods outlined above added complexity to the analytic processes used in this study (Stake, 2005). Case study analysis has been described as ‘dancing with the data’ and involves moving between successive data; Analysis progressed through a non-linear process drawing on fieldwork observations, multiple data sets from interviews and service reviews to develop story lines which informed collective short narratives and evaluation to construct the outcome of the research process (Simons, 2009, p.141–142). Analysis and interpretation of the data continued throughout the project and included multiple strategies to integrate the evidence from different methods (Yin, 2009). Through ongoing analysis, reflection and interpretation of fieldwork observations, public documents, service provider perspectives, interviews with people experiencing homelessness, cultural mentors, and staff focus groups I worked as ‘bricoleur’ to deploy a range of interpretive strategies, choosing those most applicable to the questions being asked (Denzin & Lincoln, 2005; Stake, 2005).

Over the course of this study, the questions underpinning the analysis changed as my understanding and knowledge increased. Initially the pilot project followed conventional methods of interpretation to discover the meaning and value of art as an occupation, as outlined in Chapter 6. Following on from this, my intention was to conduct an analysis of preliminary data to explore the meaning of wellbeing and its relationship to occupation

evident in the in-depth interviews. I commenced this process deductively looking for the specific data and insights that would answer my question, however as I progressed the nature of my analysis became increasingly inductive as I discovered the voice of participants in the data highlighting the relationships between wellbeing and their life world (Chamberlain et al., 2011; Gupa & Lincoln, 2005). The analysis of data specifically focusing on the experience of wellbeing has been documented separately in Chapter 7 and has been submitted for publication. I have described the sequential process of analysis of the interviews in detail below.

Initial data analysis of the interviews began using a process of coding the transcripts by looking for phrases and content specifically related to occupation, i.e. the things that participants did. The initial aim was to use deductive analysis to generate themes from the data through coding, comparison and categorisation and of data (Rubin & Rubin, 2005). Using NVivo version 8 to manage the vast quantity of data, I began to separate and condense the data into codes related to the goal of my research. Throughout this process the analytic lens was based on the questions: ‘What are the occupations of people who are homeless?’ ‘What occupations are perceived to be related to wellbeing?’ ‘What meaning is ascribed to occupation? However, this initial process resulted in the exclusion of large amounts of the peripheral data and the significant contextual influences and meanings of specific activities were not apparent. I returned to the transcripts repeatedly to understand the possible interpretations that I felt were missing by my first attempts. In this rereading I used an inductive approach, to look for things that were not apparent in the research questions.

As the interviews progressed it became increasingly clear that there were three separate stories of homelessness evolving from the participants, each of which appeared to have common threads but were sufficiently different from each other to suggest the inappropriateness of amalgamating the findings. As a result, a decision was made to conduct the analysis of interviews so as to represent these three different perspectives of homelessness: single homeless males; women with children; and Indigenous homelessness. The transcripts were read and grouped according to these three groups. Data analysis for each grouping was inductive and broadly defined, each transcript was again coded but this time a more interpretive stance was utilised that included the significant context of activities as well as the meanings of those activities. In short, a different question was asked of the data; not simply **what** do participants do to look after themselves, but rather **how** do the occupations of

people experiencing homelessness create meaning and personal identity in the context of homelessness and social exclusion?

Separating the data for each group allowed the collective codes to be categorised and interpreted within the concept of homelessness and with reference to the significance of gender, culture and social position and identity to create separate narratives. Aggregating the data collected from multiple individuals goes some way to maintain anonymity, however when data is collected in a localised geographical area with a highly identifiable subgroup of the population, additional measures need to be taken to ensure anonymity (Smith & Pitts, 2007). The use of collective stories (Richardson, 1990) maintains the anonymity of individual participants but allows the researcher to narrate the experiences of a collective group as a central and recognisable character and potentially provide a new plot with a potential of transformation (Richardson, 1990). Therefore, the results of this study are presented in Chapters 8 and 9 as collective stories of homelessness in Townville. Before presenting these results, a final aspect of the methodological journey is included in this chapter and outlines the trustworthiness of the study and its limitations, as identified through my ongoing appraisal of study procedures.

5.5 Trustworthiness

The quality of the evidence generated through this study is important both to ensure the usefulness of its results and to support the theoretical understandings that will potentially inform future occupational therapy and practice. Appraisal of research quality is frequently determined from the rigour of the research process and its relevance to the study aims. Validity in qualitative research has been discussed, contested and refined and refers generally to the trustworthiness of the claims and inferences that can be drawn from the data (Freeman, deMarrais, Preissel, Roulston, & St.Pierre, 2007). Curtin and Fossey (2007) suggest that trustworthiness is ‘the key to determining whether the findings of qualitative research article are acceptable for practice’ (p. 89). Trustworthiness is a dimension of research rigour that includes both the methods used and the competence of the researcher (Patton, 2002). The appraisal process therefore requires reflection on both the methods and on the self as researcher.

Three aspects of trustworthiness recommended by Curtin and Fossey (2007) have been specifically addressed in this section:

1. Thick Description
2. Triangulation
3. Reflexivity

5.5.1 Thick Description

Case study methods provide challenges to the goal of thick description through the extensive and unlimited data collection methods potentially involved. In this case study, three contextual descriptions are relevant:

- 1) The geographical context of Townsville and its political and social history
- 2) The professional context and occupational philosophy underlining the research aim and the assumptions of the researcher
- 3) The specific contexts in which data collection occurred and facilitated observations and interviews with people experiencing homelessness.

In the forthcoming results chapters further descriptions of the research context are provided through narratives and vignettes that support the findings of the study. In addition, a clear rationale for the study methods and the use of participants' direct quotes add to the descriptive nature of this thesis.

5.5.2 Triangulation

As previously stated, case study methodology allows for multiple data collection processes, which in turn allow for convergence or triangulation of the findings. Several triangulation strategies have been incorporated in the research design as proposed by Patton (2002):

Data triangulation

Involves the use of multiple samples and sources over time, space and person (Curtin et al., 2007). This study includes participants recruited from a number of different services in Townsville, data collected over a substantial period of four years and inclusion of participants representing a broad cross section of the homeless population, as well as service staff.

Methods of analysis and interpretation aim to highlight the comparisons between data sets and allowed for both consistency and difference in the research results to be determined.

Researcher Triangulation

This was achieved through the supervision process and additionally through cultural mentoring. Data such as interview transcripts and fieldwork journal entries were shared with supervisors and mentors as part of the analysis process. Independent coding of the selected transcripts was conducted by one or both supervisors and results were to ensure agreement prior to the thematic analysis.

Methodological triangulation

The use of two or more research methods in one study (Curtin & Fossey, 2007). As demonstrated above, the use of a case study approach allowed employment of multiple research methods to understand different perspectives and experiences of homelessness. Specifically the use of service provider focus groups to provide a method of feedback on the initial results aimed to increase the trustworthiness of this study. Finally, the results of the research strategies were explored in relation to occupational therapy theory and literature on the evolving theory of occupational justice (Stadnyk et al., 2010).

5.5.3 Reflexivity

Reflexivity is the conscious experience and reflection on the self as the inquirer and learner in the research process (Guba & Lincoln, 2005). Through a process of critical reflection, I have engaged in systematic and ongoing questioning of my interactions with participants, research strategies, and the writing of the research through which a more complete understanding of the research was achieved. Within the structure of this doctoral thesis the inclusion of the researcher's voice is purposely constrained to certain chapters, and plays a subsidiary role to an intention to provide the voice of people who are homeless. For the most part reflectivity is demonstrated in Chapter 4 and throughout the thesis in the vignette and quotes used to demonstrate the depth of reflection engaged throughout the study.

5.6 Study Limitations

In essence, this case study is at best a reading of the homelessness in Townsville based on a significant but incomplete sample of individuals, collectives and services and does not claim inclusivity of all potential homeless populations. As previously stated, several subgroups or nested case studies within the homeless population were excluded from the criteria, such as children and youths under 22 years, and people older than 65 years.

In addition, those that are homeless but staying with friends and relatives were not evident in the sample population presumably because they were not using the services of organisations that approved data collection for this study. Similarly, only one single female was interviewed and very few single non-Indigenous women were encountered in the four years of the project. Finally, people who were observed to be acutely unwell as a result of untreated mental illness were not invited to participate for reasons of consent and potential health risks of the interview process. Decisions were made on the basis of observation and experience rather than a medical diagnosis and may have excluded people unnecessarily.

In total, the 29 participants represent a cross section of the homeless population in Townsville and allowed for comparisons to be drawn from the analysis of data across three nested cases identified; single males (10 participants), women with children (5 participants), and Indigenous homelessness (14 participants). The diversity and number of participants in both the Indigenous group and for single males provided for data saturation, and therefore the claims made for these two nested cases may be considered sufficiently trustworthy. Fewer women participants raise issues in relation to data saturation and suggest cautious use of the evidence, despite the depth of interview data. Additional cases may have been evident if approval had been given by other services approached initially, for instance one temporary hostels, and an emergency shelters for women who have experienced domestic violence were reluctant to be involved in the study.

The specific location of Townsville, with a tropical climate, and a particular history in relation to colonisation makes this case study unique and therefore the results may not be generalisable to other locations. While the occupations and opportunities for people experiencing homelessness in Townsville may be different to those in other locations, this in-depth study of the relationship between occupation and wellbeing within this marginalised group of people may have significance more widely than was first anticipated. The specific focus on occupation and wellbeing may be relevant to other marginalised groups who struggle to survive and maintain routine and purposeful occupations. From the occupational justice perspective this study offers new evidence on the experience of disenfranchised and excluded populations.

5.7 Conclusion

This chapter has outlined the research methods used and identified the structural features of this study. The chapter describes and outlines the ‘path’ taken during this research journey and compliments the previous chapter, which has a more reflective stance related to the researcher and the significant learning that has underpinned the methodological choices (Fredericks, 2007). While written here as separate chapters, I recognise that the path and the way are integrated and are considered as two continuous aspects of the whole research journey. The path and the way inform each other and influence the research and myself as the researcher. This journey is not finished, nor is it possible to convey every aspect of the journey to date, on-going reflection will inevitably bring about new understandings and learning for years to come.

Together chapters 4 and 5 provide sufficient foundation from which the results of the study can be understood and discussed. As already stated in the following chapters 6 to 10 outline the results of the case study as depicted in Figure 5.1.

- Chapter 6: Homeless Adults Engagement in Art (published article)
- Chapter 7: An Exploration of Subjective Wellbeing among People Experiencing Homelessness
- Chapter 8: Single Male Homelessness and Homeless women with children
- Chapter 9: Indigenous Homelessness
- Chapter 10: Homeless Service Staff Perceptions

The presentation of these 5 results chapters follows a chronological order and includes two published articles, three composite narratives and the findings from service providers’ focus groups. The chapters demonstrate the progressive stages in the analysis and interpretation of the findings. Together they demonstrate the breadth of the case study and highlight the contextual, social and cultural understandings of both occupation and wellbeing for people who experience homelessness in Townsville.

Part Two

Journey Highlights

Chapter 6

Homeless Adults Engagement in Art: First Steps towards Identity, Recovery and Social Inclusion

This chapter describes the pilot study undertaken at the beginning of the project to facilitate fieldwork observation and engagement with potential participants. The study allowed an opportunity to explore in-depth an art program for people experiencing homelessness as an example of occupational engagement. This chapter is based on a publication in the *Australian Occupational Therapy Journal* (Thomas, Gray, McGinty & Ebringer, 2011) and has been reproduced here with minor changes (see Appendix E for full publication). This chapter demonstrates that art occupations provide a starting point for participation in community and a positive experience that encourages the construction of new identities, routines and roles. Further, art provides an alternative from the problems associated with homelessness, mental health and substance abuse and allows for public recognition and social inclusion.

6.1 Introduction

Occupational therapy philosophy is based on a belief that participation and engagement in personally meaningful occupations contribute to health and quality of life (Wilcock, 2006). Creative occupations have been used therapeutically by occupational therapists since the beginning of the profession, although popularity has waxed and waned (Griffiths & Corr, 2007; Wilcock & Steedan, 1999). Art as therapy is commonly used in mental health settings to promote intrapersonal and interpersonal skills, functional performance and to facilitate personal growth (Griffiths & Corr, 2007). Cinahl, OTDBase, and Scopus databases were searched for occupational therapy literature related to art interventions. Search results demonstrated an increasing interest in the value of art occupations for wellbeing in recent years. Previously there had been declining use of art in occupational therapy, purportedly due to a lack of evidence (Lloyd & Papas, 1999; Perruzza & Kinsella, 2010). A recent literature review of creative arts occupations in occupational therapy from 2002–2008 showed that creative art contribute to health and wellbeing by providing enhanced perceived control, building a sense of self, expression, transforming the illness experience, gaining a sense of purpose and building social support (Perruzza & Kinsella, 2010). Several authors have explored the value of art and creative occupations to clients in a range of settings, including

mental health recovery (Lloyd, Wong, & Petchkovsky, 2007), neuro-rehabilitation (Symons, Clark, Williams, Hansen, & Orpin, 2011), women with arthritis (Reynolds, Vivat, & Prior, 2011), and retirees (Bedding & Sadlo, 2008). These authors affirm the value of art occupations in enhancing a sense of achievement, increasing self worth, providing a distraction from symptoms and contributing to social belonging through group participation. Over the past decade Reynolds, a key contributor to the occupational therapy research related to artistic occupations, has demonstrated that artwork contributes to health and wellbeing in diverse and subtle ways; by filling occupational voids, promoting a positive identity, enabling the expression of grief, encouraging attention to the outside world and using colour and imagery to escape reality (Reynolds, 2003; Reynolds & Prior, 2003; Reynolds et al., 2011).

There are few previous studies that specifically explore the value of art occupations for people experiencing homelessness, although a number of descriptive articles were identified (P. Bryne, Raphael, & Coleman-Wilson, 2010; Connor & Donohue, 2010; Feen-Calligan, Washington, & Moxley, 2009; Kidd, 2009; Siddiqui, Astone-Twerell, & Hermitche, 2009). Collectively, publications suggest that art can provide opportunities for people to express themselves and their trauma, to communicate with staff and others, to develop personal strengths and identity and to facilitate survival. Kidd (2009) explored the use and meaning of art for homeless youths during a recent study and found artistic expression as transformative, self exploratory, communicative, and a direction for emotional energy. A common theme in the literature is the perceived value of providing art experiences to homeless people as an opportunity for participation in a meaningful activity. Examples of the use of art by homeless people exist through public exhibitions (see <http://artfromthestreets.com/> and <http://www.qpilch.org.au/>). In this way art provides an opportunity for people experiencing homelessness to gain public recognition of their skills and therefore participation in the wider community.

The aim of this exploratory study of an art program conducted within a non-government service for homeless people was to gain an understanding of the ways that art as a structured activity benefits people who are homeless.

6.2 The Setting

The Art Program is a three hour weekly activity provided by a non-government organisation and held at a drop-in facility for people who are homeless. The program had been running for two years at the time of this study and was facilitated by Sally, a nurse and an artist. Sally developed the model underpinning the Art Program to increase the art skills of children. Initially the Art Program was devised to teach art skills to homeless people; adapting the program previously used and focusing on sketching and drawing. As the program progressed, the focus changed from teaching specific drawing skills to providing opportunities for participants to paint using their own style and art skills. Specific assistance with art skills is provided on request but otherwise participants are encouraged to participate in any way they choose.

Participants are able to access a range of media for sketching and painting on paper or canvas. The range of artistic styles included landscapes, still life, portraits and traditional Aboriginal artwork, each participant is encouraged to participate in their own way and assistance is provided as required. In addition to painting some participants create necklaces and bracelets with beads and fishing line. All the materials are provided free of charge and the products can be taken home by participants or kept safely on the premises for exhibition or sale.

Attendance in the Art Program is entirely voluntary and demonstrates a level of motivation and for some participants forms an important weekly routine. For other participants attendance is intermittent and punctuated with periods of absence due to transience or health issues. Art works are kept on the premises between sessions. A condition of attending the Art Program is sobriety.

6.3 Methods

6.3.1 Study Approval

The evaluation of the Art Program was approved by the coordinator of the program, the manager of the facility where the program occurs and the CEO of the organisation responsible for the program. Ethical approval for the study was obtained through the James Cook University Human Research Ethics Committee (#H2905). All participants were

provided with information regarding the study and required to sign consent forms prior to interviews and to consent to the audio-recording of their interviews.

6.3.2 Data Collection

A qualitative methodology was utilised for the study to understand the characteristics and dimensions of the Art Program and its benefits to participants. Qualitative research includes a range of interpretive methods to better understand the experience of the participants and processes under study (Denzin & Lincoln, 2005a). I attended the Art Program over a two month period as a participant observer and interviewed participants and staff connected with the program. Through observation and participation in the program I aimed to gain firsthand experience of the setting and to understand and capture the context of the program necessary for holistic enquiry (Patton, 2002). Observations were conducted with full and complete disclosure with no attempt made to hide the goals of my participation. I recorded fieldwork observations in a research journal and discussed these in detail with my supervisors weekly. As the participants became more familiar with me a level of trust was achieved that facilitated the willingness of some participants to consent to being interviewed.

Semi-structured and conversational purposive interviews were conducted with four participants to explore the value of the Art Program to people experiencing homelessness and ascertain the meaning of the participants' experience, drawing on a phenomenological approach to enrich the participant observations recorded (Patton, 2002). Participant interviews included questions about the artwork, why they attend, how they first became involved and the perceived benefit of art. Interview participant selection was purposive and voluntary; targeting those who had regularly attended and actively participated in the program. Interviews were completed in a public space close to the Art Program venue and were recorded and transcribed verbatim. As the literacy skills of homeless participants were unknown, member checking of the transcripts was not undertaken, however, a process of reflecting back the responses of interviewees for clarification was utilised to confirm meanings. Through ongoing participation in the Art Program I was able to clarify ideas with participants throughout the research period.

Initial plans to include up to eight participants were modified when it became clear that the level of disability experienced by participants, specifically acute psychosis and cognitive impairment, meant that some intended interviews were neither appropriate nor ethical. The small number of interview participants was supplemented by a longer period of observation

by the researcher and by the inclusion of stakeholder interviews; which provided a breadth of perspectives. Stakeholders were asked about the history of the program and their perceptions of the benefits of art for clients. The key stakeholders had been involved in the Art Program since its inception and provided a means of triangulation of the participant data to increase trustworthiness.

6.3.3 Data Analysis

The interview transcriptions and field notes were analysed inductively to identify benefits of the Art Program as ascribed by the participant population without making prior assumptions about the relationships between practice and theory (Patton, 2002, p. 56). Data was initially coded separately by identifying key concepts that emerged from each interviewee and journal entry. These codes were then compared and contrasted across data items and grouped into categories that were reviewed by my supervisors. The final stage of the analysis involved identifying themes that emerged from combining the codes and comparing interviews and journal entries against each other (Rubin & Rubin, 2005). The themes emerging from the data captured the multiple meanings associated with participation in the Art Program across the range of participants.

6.4 Results

Four Art Program participants (pseudonyms allocated) and three stakeholders (the facilitator, the Drop In Centre manager, and a nurse involved in homelessness services) were interviewed. Although the Art Program was regularly attended by Aboriginal and Torres Strait Islanders the four male homeless interview participants were raised in non-Indigenous families. One interviewee, Bob, identified as Aboriginal and this was evident in his art work. All four were middle aged (between 40 and 65 years). The homeless participants were all in temporary but stable accommodation at the time of the interviews and continued to use the services of the Drop In Centre on a regular basis for meals and social interaction. The interviews ranged in duration from 20 mins to 1 hour.

The results of this evaluation are presented below as three major themes:

- 1) Beginning to engage and participate
- 2) Seeing the Benefits
- 3) Respect and Public Recognition.

6.4.1 Beginning to Engage and Participate

This first theme highlights the value of belonging to a group in providing motivation to participate on a regular basis. Three subthemes were noted: Getting started; Attendance and motivation; and Continuity through doing artwork.

Joining In the Art Program – Getting Started

Observation, informal conversations and participant interviews reinforced that joining in the Art Program was a process that takes time. Most interviewees stated they had had no previous interest in art and did not expect themselves to enjoy it, but were gradually encouraged to have a go:

“I was approached to do artwork and well reluctantly at first I accepted the offer”.

(Sam)

“And while I was sitting there one day, I saw them all painting, I thought I wouldn’t mind painting (subject of picture) so that was my first attempt”.

(Ted)

Attendance and Motivation

A high level of motivation towards the Art Program was exhibited by interviewees. For many regular participants, the Art Program was a significant event in their week and provided both routine and continuity in their lives:

“It’s just on a year now, the regular weekly art group has cemented the routine and regular part of it, whereas before it was hit and miss, it has kept the momentum going”.

(Sam)

For some participants with more transient lifestyles, the Art Program was something they attend for a few weeks, while in the locality, and to which they would return when in town again. It was rare to meet people who only attended once.

Many of the regular participants arrived early and were frequently reluctant to stop at the end of the session. The possibility of more frequent participation was expressed by numerous participants:

“It’s something to look forward to ... I rather hope eventually that maybe there’d be two sessions that’s what I’d like to see”.

(Pete)

Continuity through Doing Artwork

For many Indigenous participants artwork was a familiar activity that they were keen to continue. In this way, the Art Program connects them to previous achievements, culturally valued activity and a sense of identity. Some members started painting during spells in prison and were proud of their skills. A regular participant brought several sketches into the Art Program one day to show to the facilitator and to use in his painting. The sketches had been well looked after although they were obviously old. The participant explained that they were completed years ago while he was in prison. Other participants also talked about painting in “*the big house [prison]*” and confirmed the sense of pride in their past achievement. Attending the Art Program affirms their skills and brings a sense of continuity through life. For most participants the artwork is completed over a period of weeks, and left at the centre between sessions.

6.4.2 Seeing the Benefits

The benefits of participation in the Art Program include four subthemes: A process of discovery; Decision making/ moving forward; Diversion from alcohol and other addictions; and Relief from mental health issues.

A Process of Discovery

The individual benefits of the Art Program related to the person and their life journey. For one interviewee, the Art Program was the event he looks forward to each week to both use his skills and for time out from the continuous state of anxiety in which he lives:

“Everything that is buzzing around up here in my brain just disappears when I sit down there and pick up those brushes”

(Ted)

For another interviewee the benefit of the Art Program was apparent by what he saw happening to other people:

“It brings out the spirituality in people as well. I found that people find themselves they discover, they explore, they tap in to the inside of them and then eventually it comes out on canvas”.

(Sam)

There was a general sense of discovery for many participants to find out what they could achieve.

Decision Making/Moving Forward

Engaging in artwork requires participants to make small manageable decisions about what they are going to do, what colour and style they are going to use, how big, etc. During the interview with the facilitator, a poignant connection was made between the artwork and life in general:

“To me it’s like life, we all make mistakes we can’t change but this is very forgiving and I think it flows over into life, I have made a mistake but I am going to start again ... , if I can have control over this thing then maybe I can have control over something else”.

(Facilitator)

Involvement in the Art program allowed participants to make life decisions and begin to make plans. For one interviewee their very first experience with the Art Program lead to a dramatic decision to visit family:

“I was probably in a rut and Sally gave me five words on a piece of paper... to cut a long story short I looked at the five words and all of a sudden I am in a travel agent and I am going home for a week”.

(Bob)

Diversion from Alcohol and other Addictions

Several of the current members have problems with drug and alcohol use or other addictions. There was, however, no evidence of intoxication during the sessions by participants; although some discussed being drunk at other times:

“He was a hoverer at the beginning, then he said ‘I can’t paint anything because I am shaking too much’ and then worked out that if he came in sober or didn’t have a hangover, or not much of one, he could paint”.

(Facilitator)

Three of the four interviewees equated art directly with moving away from addictions and towards more positive lifestyles. Engagement in art helped participants by transcending day-to-day issues and developing a greater sense of self:

“...helped me to expand my thinking to lift myself up out of a homeless drinking life and realise that I do have these abilities”.

(Sam)

“I need a better outlet and I’ve found that painting fills in a real gap for me”.

(Pete)

Relief from Mental Health Issues

Within the homeless population many people suffer from chronic mental health conditions making social relationships difficult and increasing isolation from the community. The Art Program provided relief from the symptoms of mental illness and opportunities to engage:

“He’s been impossible for everyone to break through to... but through the art program I was able to say last week “(name) that picture looks really good” ... he actually turned around and started talking to me”.

(Drop In Centre manager)

6.4.3 Respect and Public Recognition

This final theme includes three subthemes: Mutual respect and recognition; Cultural inclusiveness and respect; and Public acceptance.

Mutual Respect and Recognition

One of the advantages of the Art Program being held in the Drop In Centre is the availability of an audience including Art Program members, other users of the Drop In Centre, and staff. Participants offered frequent positive feedback to other members and during the eight weeks of observation there were no negative comments or signs of conflict between members. All participants were considered equal and were respected as artists, regardless of their ability to engage with others. The feeling of the group was one of sharing with and learning from each other. Each participant was respected for the skills and abilities they have and the willingness to be part of the group:

“I have seen many Aboriginal and Islander people brilliantly come out, with some brilliant art, paint the land that they walk upon, live upon and respect and they show me how to live in this land of Australia. They teach me it’s a learning experience”.

(Sam)

Cultural Inclusiveness and Respect

The Art Program involves both Indigenous and non-Indigenous members, each have their own individual style of artwork and beading, however in this group everyone is valued equally:

“... and I was watching them, all the Aboriginal people, guys and girls, they get some really good art out of them, they know how to paint and its good that they are showing it through painting”.

(Bob)

Public Acceptance

The Art Program facilitator was planning the next public exhibition at the time of the study and had previously organised successful public exhibitions for the group. For some, this event provided additional motivation and meaning for their participation.

For one interviewee the effects of previous exhibitions were continuing to have a positive effect on their sense of identity and confidence as an artist. The experience of involvement in

a public art exhibition provided a very different experience for people who have previously been excluded from and shunned by mainstream society:

“... the exhibition it broke down that us and them mentality for the general public from all walks of life to come to the centre and feel comfortable and be accepted”.

(Sam)

6.5 Discussion

The results of this study help provide an understanding of the benefit of art to people who are homeless and demonstrates how participating in these meaningful activities contributes to the goal of community participation for people who are chronically homeless. The three themes that emerged are discussed separately with reference to previous studies on art occupations.

The first theme ‘Beginning to Engage and Participate’, is a first step towards a goal of community engagement and social interaction. The non-threatening approach of the facilitator and opportunity to freely engage at any level helped individuals who were often socially isolated and influenced by alcohol use and mental illness to become actively involved and accepted members of a group. Art is a safe way to begin to express oneself and to construct a new identity not based on homelessness (Lloyd et al., 2007). Unlike other life skills programs, art programs are not explicitly aimed towards skills development and leaving homelessness but provide an informal opportunity to learn and demonstrate artistic skills through participating in personal projects (Bryne et al., 2010).

The art program stimulates an inherent pull towards occupational engagement with others, which may be neurological or social in origin (Whiteford, 2007). This ‘pull’ is demonstrated by participants’ motivation to attend regularly and gain some continuity and routine in their lives by working on an art project over a number of weeks. Wellbeing has previously been linked to routine behaviours and relates to a sense of self that is perpetuated by continuity in occupational engagement (Ludwig, 1997; Whiteford, 2007). The development of positive routines provides consistency and coherence to life, in a purposeful and goal direct way. Regular participation is particularly relevant for people who are homeless, who have few commitments and routines to orchestrate their lives and gain a sense of wellbeing (Yerxa et al., 1990; Zisberg, Young, Schepp, & Zysberg, 2007).

As each artwork is a 'work in progress', the concept of personal projects as goal directed pursuits, which extend over a period of time, is illustrated in the Art Program (Christiansen, 2000). Participation in an ongoing art project brings about a greater sense of positive identity and correlates with subjective wellbeing and happiness. As the pull of the activity encourages participation in a group program, once involved in an ongoing art project, continued engagement provides opportunities to increase individual identity and enjoyment.

The second theme 'Seeing the Benefits', demonstrates that art has a positive effect on peoples' lives and encourages taking steps towards wellbeing. The chronically homeless experience high rates of mental illness and addictions and constitute some of the most disadvantaged people in society (Christiansen, 2009). Breaking the cycle of homelessness is only possible when the individuals perceive their own potential to have a different future (Australia. Homelessness Taskforce, 2008). The transformative power of art and creativity as a way to express and redirect emotions and negative experiences has been noted previously (Bryne et al., 2010; Kidd, 2009; Perruzza & Kinsella, 2010). People who are homeless have few resources or relationships for dealing with emotional issues, and frequently use alcohol and other drugs to cope. Group members were sufficiently motivated to choose to abstain from drinking in order to participate in the art. While the goal of the Art Program is not specifically therapeutic, it influenced the addictive behaviours of participants, and provided an alternative and diversion from addictions. Providing such opportunities for artistic expression has been recommended as a way to support individuals in addiction recovery (White, 2008).

The perceived benefits of 'doing' art included relief from symptoms of mental health conditions and highlighted the possibility of reclaiming a positive identity through self discovery (Lloyd et al., 2007; Reynolds, 2003). There is a high incidence of mental illness amongst the homeless population and many remain untreated due to mistrust or inability to access regular health services. Engagement in the Art Program may be the first step towards seeking treatment and referral to an outreach health program or addiction service.

The final theme 'Respect and Public Recognition' is directly connected with the development of identity as discussed above. The importance of respect and recognition cannot be underestimated for people who have experienced lengthy periods of homelessness;

characterised by marginalisation and social exclusion (Kidd, 2009). The outcomes of the Art Program contradict the notions of what it is to be homeless and replace feelings of worthlessness with opportunities to gain social recognition of the skills they have. The interviewees of the Art Program realised a new and positive self image, an ‘artistic identity’ that enabled the development of new roles and relationships. Through this new artistic identity they experience their own sense of mastery, social connection and continuity (Perruzza & Kinsella, 2010; Reynolds, 2003; Whiteford, 2007).

In contrast to the frequently observed marginalisation of homeless people and exclusion from community (Christiansen, 2009), the study suggests the need for the development of increased opportunities for homeless people to engage in art. Regular exhibitions of homeless people’s artwork in public venues provide opportunities for face-to-face contact with the community and reduce the stigma and marginalisation of homeless people. This current study has shown that the benefits of exhibiting and selling artwork are more than financial; rather it provides opportunities for positive recognition and acceptance in local communities. In future, the use of web-based galleries will enable artists to exhibit and sell products while motivating participants to develop computer skills.

6.6 Limitations

The results of this qualitative evaluation are not meant to be generalised to other situations or to other art programs. A description of the Art Program and the facilitation approach are provided to demonstrate the contextual factors of the program. A limitation of this evaluation is the small number of interviewees and therefore saturation of data was not achieved.

Furthermore, the four people interviewed were not fully representative of the Art Program group, as all were in temporary housing and further exploration of the Aboriginal and Torres Strait Islanders participants’ experiences would have been beneficial. Where possible, the voice of Aboriginal and Torres Strait Islanders participants has been added through fieldwork observation notes. These issues indicate some of the difficulties of researching homelessness, where developing trust and credibility with the research population can be particularly challenging. The inclusion of the Art Program facilitator and Drop In Centre manager in the evaluation could have created a bias towards the positive benefits of the program. No attempt was made to include the views of people who attended the Drop In Centre but did not participate in the Art Program.

Future evaluations should be conducted over the length of the program and include pre and post program interviews. There is a need to establish evidence of outcomes of participants of engaging in art programs, including involvement with other agencies, housing status and attainment of client centred goals. The utilisation of third party informants (such as case workers and individual support workers) may enhance the evaluation process if available. Similarly, participatory action research may be a useful framework for further studies, involving the participants themselves in the design of the research process.

6.7 Conclusion

This study provides evidence of the benefits of art programs to people experiencing homelessness and supports previous research linking engagement in meaningful occupation to wellbeing. Findings highlight the value of art in overcoming adversity, constructing positive identity, routines, occupational roles and community participation. For homeless people opportunities to engage in socially valued and productive occupations are limited, due to poverty and marginalisation. Engagement in structured art activities provides a non-threatening environment where people were able to interact and express themselves through their artwork whilst becoming involved in a positive and affirming group experience.

The Australian Social Inclusion Agenda (Commonwealth of Australia, 2009) identifies the need to ensure ‘...all Australians have the capabilities, opportunities, responsibilities and resources to learn, work, connect with others and have a say’ (p. 2). Participation in meaningful occupations can be a first step towards breaking the cycle of homelessness and social exclusion and encourage community participation (Australia. Homelessness Taskforce, 2008). Service providers including occupational therapists and other professionals have a responsibility to address disadvantage and social exclusion through collaborative practice aimed towards community engagement and inclusiveness (Lloyd, Tse, & Deane, 2006; Thomas et al., 2010).

Typically services provided for homeless people focus on addressing immediate needs for survival, such as food, accommodation and health care. However, for people who have experienced episodic or chronic homelessness, the multitude of economic, psychological and social challenges inhibit the goal of engaging in the community through employment or

education (Chard et al., 2009). Once basic survival needs are met, there are few opportunities available for a more progressive approach to enable community participation. Becoming part of a group, and participating in art activities allows development of a positive self image and opens up new possibilities for a future away from homelessness. This research has shown that it is through non-threatening, supportive and encouraging opportunities that individuals can develop the abilities, confidence and inspiration to move towards meaningful participation in communities.

6.8 Summary

This chapter evaluates a weekly art program provided by a non-government agency for homeless adults. The use of art as a means of expression and transformation for homeless people has previously been espoused; therefore the aim of this study is to gain an understanding of the benefits of art to people who are homeless. Qualitative methods including participant observation and interviews were used to determine the participants' experience of art and its value. The results indicate that art benefits the individuals as a starting point for participation in community and is a positive experience that encourages individual identity. Further, art provides an alternative from the problems associated with mental health and substance abuse and allows for public recognition and social inclusion. The need for health professionals to work towards social inclusion of homeless people through providing such occupational opportunities is discussed.

Chapter 7

An Exploration of Subjective Wellbeing among People Experiencing Homelessness: A Strengths-Based Approach

This chapter comprises an article that has been accepted for publication and currently in press with the international journal *Social Work and Health Care* (Thomas, Gray & McGinty, in press – see appendix F). This chapter outlines the preliminary findings of the research, which aimed to identify the perceptions of wellbeing for people experiencing homelessness. The chapter introduces and outlines two new concepts in the study: strengths perspectives and subjective wellbeing. Based on the analysis of twenty interviews, the results of this study are presented as four themes: Keeping safe; Being positive and feeling good; Connecting with others; and Staying human and normal. The chapter demonstrates that social exclusion experienced in homelessness has a negative effect on subjective wellbeing. The discussion of the findings supports the need for services that provide opportunities to experience social inclusion and develop community and cultural connections.

7.1 Introduction

The marginalisation of people experiencing homelessness has been previously discussed in the literature (Cosgrove & Flynn, 2005; Harnett & Johnson, 2008; Melnitzer, 2007; Schiffer & Schatz, 2008). Negative representations of people experiencing homelessness create stigma and support notions of homogeneity, inferiority and dysfunction; perpetuating a negative image of those who are homeless (De Verteuil et al., 2009; Parsell, 2010). Health professionals may inadvertently contribute to deficit perceptions of homelessness through using labelling language and focusing on individual problems and conditions, whilst ignoring socio-political contributors to homelessness and individual capacities (Healy, 2005; Zufferey, 2008). Discrimination towards those experiencing homelessness occurs around employment, housing and social services and become internalised, resulting in reluctance to gain community access (Harnett & Johnson, 2008; Snow et al., 1996). Homeless people experience stigma and disadvantage in the health service and hospitals contributing to low levels of trust in health workers, services and reluctance to engage in services (Bhui et al., 2006; Christiansen, 2009; Reid, 1999). The portrayal of universal narratives of homelessness provides negative representations, depicting homeless people in ways that negates their life

experiences, perceptions and strengths (Hodgetts et al., 2008; Zufferey & Chung, 2006). Such representations of homelessness are particularly prevalent in research and policy on homelessness and influence social work practice (Parsell, 2011).

In contrast, a strengths-based approach emphasises collaborative processes that aim to discover homeless peoples' strengths and resources and exploit these positive characteristics to achieve their wellbeing (Saleeby, 2009). The adoption of strengths perspective by social workers and other health professionals counters a focus on problems and pathology and promotes personal and community capacity (Fawcett & Reynolds, 2010; Saleeby, 2009). Interventions based on individual goals and strengths rather than deficit models of care affirm the right to self determination and wellbeing of homeless individuals (Morris, 2002; Saleeby, 2009). Regardless of housing status, the freedom to pursue the aspects of life that are meaningful and valuable to the individual contributes to wellbeing (Sen, 2009).

A focus on strengths and empowerment is also relevant to the conduct of research requiring collaborative strategies for investigating positive attributes such as coping and resilience (Kidd & Davidson, 2007). The concept of a strengths perspective underpinned this study, which aimed to explore and analyse the subjective experience of wellbeing, as it is defined and perceived by people experiencing homelessness.

The study involved extensive data collection in the field within services for people experiencing homelessness in a regional city and in-depth qualitative interviews with 20 participants. Interviews were designed to capture the participant's perceptions of wellbeing and the strength of individuals to achieve wellbeing despite poverty and marginalisation. Using a strengths-based approach the concept of subjective wellbeing was used to explore the ways that people who are homeless and marginalised experience satisfaction with their lives and the strategies performed to sustain positive experiences.

7.2 Defining Wellbeing

The concept of wellbeing is often used in conjunction with health, and together these concepts are considered to be important outcomes for health and social service consumers. There is general agreement that wellbeing is more than the absence of disease and pathology; however definitions of wellbeing are contested (McAllister, 2005). Two views of wellbeing comprise hedonic and eudemonic perspectives (Ryan & Deci, 2001). The former view

focusing on happiness as the measure for wellbeing, including life satisfaction, the presence of positive emotions and the absence of negative emotions, is termed 'Subjective Wellbeing' (SWB) (Tov & Diener, 2009). The latter perspective is based on Aristotle's views of virtue, separates wellbeing from pleasure, emphasising the importance of personal growth and fulfilment and is discussed as 'Psychological Wellbeing' (PW) (Ryff & Singer, 2008). Achievement of both SWB and PW is influenced by access to adequate resources, including economic, environmental and social support (Helliwell & Putnam, 2004; Ryff & Singer, 2008).

SWB is linked to life satisfaction and results from the fulfilment of human needs, although the precise definition of constituent human needs remains a topic of debate (Costanza et al., 2007; Zikmund, 2003). Maslow's (1943) theory of motivation identifies physiological needs as the most basic of human needs, which if unsatisfied takes precedence over other hierarchical needs ordered as safety, love, esteem and self-actualisation. An alternative to this hierarchical approach is presented in Human Scale Development that identifies human needs as subsistence, protection, affection, understanding, participation, idleness, creation, identity, and freedom (Max-Neef, 1991). This theory proposes human needs are dynamic and systematic, with no fixed order provided the absence of extreme deprivation of any need. Regardless of which constituent needs are to be satisfied, a state of wellbeing has been defined as 'the satisfaction of material, biological, psychological, social, and cultural needs and demands of an individual, which are necessary for his satisfaction with life' (Zikmund, 2003, p. 402). In this current study on wellbeing among people experiencing homelessness, a focus of satisfaction with life is based on subjective assessment and definitions, rather than the rating of achievement of personal, social and economic status.

It is important to note that SWB is not directly linked with wealth or social achievement; despite increases in economic wealth over the last 50 years SWB has remained consistent (Cummins, 2010; Helliwell & Putnam, 2004; Schmotkin, 2005). Happiness with educational, economic, and social achievements is relative to cultural expectations and the achievements of others within a social environment (Diener, Oishi, & Lucas, 2003). Despite poverty and disadvantage, individuals' satisfaction with life is sustained by positive self assessment of morality, intelligence and physical appearance and relationships with family and friends (Biswas-Diener & Diener, 2006). In comparison with rough sleepers in America, people who are living on the streets in Calcutta reported higher general life satisfaction, higher

satisfaction with income and significantly higher satisfaction with social lives. This suggests that these factors may counteract the disadvantage of poverty and supports a systemic concept that human needs are influenced by contextual factors in contrast to the hierarchical approach (Biswas-Diener & Diener, 2006). Previous studies of wellbeing within Indigenous Australian populations demonstrate the importance of strong connections to culture and land (Dockery, 2009; Ganesharajah, 2009).

The evidence highlights that extreme poverty, deprivation and disadvantage negatively impacts on both material and SWB (Cummins, 2010). In such circumstances universal definitions and objective measures of wellbeing are not useful and serve only to identify the degree of disadvantage, rather than to explore the meaning of wellbeing and opportunities to increase wellbeing experiences. Sen (2009) argues that the distribution of primary goods is the means to wellbeing, not the measurement of it and he supports the concept of capabilities, or the ability to achieve personal wellbeing goals. To this end 'agency', or a person's capacity to achieve the things that are valued and meaningful, is important in defining wellbeing (Hicks, 2004; Sen, 1993). An important distinction can be made between wellbeing and agency, when, for example, agency is directed towards meaningful goals unrelated to personal wellbeing, such as altruism (Sen, 2009). However, if personal and social circumstances prevent an individual from achieving their wellbeing goals, injustice is apparent, requiring interventions to address capability or the ability to achieve what is important (Morris, 2002).

For people experiencing homelessness, agency is limited by inequality and lack of opportunity to participate in society, however the experience of wellbeing under such circumstances is worthy of further study. Therefore a strengths-based approach allows exploration of how people who are homeless and disadvantaged in Australian society use their individual discretion and agency to act in ways that are perceived as beneficial to their wellbeing. The aim of this study was to explore and analyse the subjective experience of wellbeing, as it is defined and perceived by people experiencing homelessness in Northern Australia. This study uses the strengths-based approach to identify the ways in which SWB is experienced and sustained in the everyday lives and activities of people who are homeless.

7.3 Methods

This study was undertaken as part of a broader project exploring homelessness and focusing on the use of time and its link to wellbeing for people who are homeless. Approval for this study was obtained through James Cook University Human Research Ethics Committee prior to data collection (# H2905) and from a number of service provider agencies that supported this study. A constructivist methodology was utilised to explore participants culturally and historically situated knowledge and its influence on their lives and interactions with others (Crotty, 1998; Patton, 2002). Prior to data collection I undertook more than 100 hours of fieldwork and observation were undertaken to establish trust and rapport within the homeless community.

Data was collected from three facilities that provide services for people who are homeless: 1) a daytime drop-in centre; 2) a night hostel specifically catering for people who are intoxicated and at risk of offending; and 3) emergency family housing catering for people with children. The users of these three services represented heterogeneity within the homeless population including single males, Indigenous people and families with children. All participants were adults of working age (22 – 65 years) and were legally able to give consent to interviews. The sites were chosen to provide diversity in perspectives and experiences and therefore maximum variation in participant selection (Patton, 2002). Participants were informed of the aims of the study and invited to participate in an interview. Participants were approached either directly by the researcher or by staff members and informed of the requirements of participation prior to the interview.

A pilot interview was undertaken with a key informant to practice the wording of questions. A full transcript of this interview was provided to the key informant and to the other researchers for comment prior to continuing with data collection. To ensure appropriateness for Indigenous participants, the initial recordings were reviewed by an Indigenous mentor who provided cultural understandings of the data. The interviews in this study were conversational, co-constructed and aimed to elicit participants' situated accounts of the factors that contribute to their wellbeing (Lysack, Luborsky and Dillaway, 2006; Roulston, 2010; Silverman, 2006; White & Drew, 2011). Although a guide of questions was used initially (see Appendix J), once familiar with the main questions, the guide was not referred to during interviews and the flow of questions was spontaneously changed to suit the individual. During the interview participants were asked; 'What does wellbeing mean to

you?', 'What do you do to survive - day by day when you are homeless?', 'What makes life good when you are homeless?', 'On a scale of 0–10 where 10 is the best life has ever been and 0 is the worst, what number would you rate yourself today?' Participants were given the space to talk about a range of information about their homeless lives, their previous living arrangements, and their hopes for the future. A small number of participants requested a second and third interview over a number of months. Data collection continued until there were no new concepts added.

The interviews were recorded and transcribed verbatim. Analysis commenced prior to the end of data collection and involved both inductive and deductive phases (Patton, 2002). To manage the large volume of data QSR International's NVivo 8 software was used to analyse each transcript and journal entry. The items were read carefully with a view to discover the ways in which participants viewed wellbeing and the factors that influence their personal wellbeing (Coffey & Atkinson, 1996). Open coding of the items was conducted and codes were compared across different items (Patton, 2002). The codes were categorised into convergent groups through an interpretive process, which resulted in the emergence of broad themes that demonstrate the factors that influence wellbeing (Coffey & Atkinson, 1996; Patton, 2002).

7.4 Results

Participants were aged between 22 and 65 years old (i.e. normal working age). In total 24 interviews were conducted with 20 different participants including 14 males and 6 females of whom 12 (9 males and 3 females) identified as Indigenous. The ages of some participants was estimated as this was not specifically asked for or on occasion was not given. Three participants were mothers with children, who were temporarily housed in emergency accommodation and waiting for permanent housing. Four participants had been housed in units or temporary hostels managed by homeless services and one had been living in a shared house for two months. The remaining 12 participants were living on the streets. Table 7.1 outlines the demographic information obtained during the interviews of the 20 participants, who have been allocated pseudonyms. Key concepts of wellbeing discussed by each participant and their individual self rating of wellbeing, on scale of 0 to 10 (with 0 being the worst ever experienced and 10 being the best they had experienced) were also included.

Table 7.1 Demographic data and key wellbeing concepts of study participants

Name used	M/F	Age	Culture	Accommodation	Key Concepts of Wellbeing	Self rating
Alan	M	37	Indigenous	Unit	History, social family	Not asked
Bert	M	50's		Street	Trust and respect, dignity	4
Chad	M	40's	Indigenous	Unit	Relationships	> half
Doug	M	50's		Street	Safety, not? fighting, trust	10
Eric	M	40's		Unit	Sharing, relationships, being content	5 or 6
Fran	F	22		Emergency housing	Looking after the children	About half
Greg	M	42	Indigenous	Street	Political, rich and poor	It's getting worse
Heidi	F	24		Emergency housing	Being a good Mum	Not asked
Ian	M	52		Street	Being able to manage	9.5
Jack	M	30's	Indigenous	Unit	Support of the system	Not asked
Kate	F	23		Emergency housing	Role of Mother, safety	6
Lisa	F	40's	Indigenous	Street	Clothes, DV, alcohol, God	3 or 4
Mick	M	49	Indigenous	Street	Alcohol, racism, culture	Not asked
Neil	M	40	Indigenous	Street	Talking, family, fishing	Not asked
Pete	M	54	Indigenous	Street	Keep my mind occupied	Not asked
Ruth	F	48	Indigenous	Street	Safety, getting a place	Not asked
Stan	M	30's	Indigenous	Street	Safety, being somebody	0
Tom	M	50's	Indigenous	Street	Alcohol and work	Not asked
Ulna	F	30's	Indigenous	Streets	Having a home, alcohol	6
Vince	M	64		House share	Being fed and supported, money/work	3 or 4

Twelve participants rated their SWB and provided ratings that ranged from 0 – 10. Two non-Indigenous males rated themselves at 9.5 and 10, and one Indigenous male rated his wellbeing at 0. The remaining self-ratings varied from 3 – 6 and generally indicated low

levels of SWB in the homeless group (see Table 7.1). This question was included in interviews of participants who indicated that they understood and were willing to discuss wellbeing directly, while for others a broader focus of the interview limited the appropriateness of this specific question. While not of any statistical significance, the range of ratings demonstrated the diversity of experiences of participants of the study.

The concept of wellbeing was viewed in a variety of ways by participants in this study. Some individuals had difficulty expressing what they thought it was and many did not try. The participant's responses ranged from physical health to personal attitude and a sense of satisfaction. Few participants specifically identified the link between wellbeing and health. The majority of participants related wellbeing to subjective feelings of happiness; Chad summed this up as 'Being happy, feeling good in side yourself'.

The factors that influence wellbeing are outlined below:

Keeping Safe

Although some positive aspects of being homeless were discussed, the majority of individuals indicated a high level of uncertainty and insecurity, resulting in decreased wellbeing. Keeping safe from the threat of physical harm was paramount; participants emphasised the dangers of sleeping on the street, relating stories of others being "*bashed... murdered, just for sleeping out*" (Bert). Harassment and bullying required participants to be vigilant and prepared to look after themselves if required. The police were not always helpful and therefore surviving on the streets for any length of time required being "*tough and cunning*" (Mick) and was a source of pride and identity.

Theft was a concern for many; most had few possessions and worried that what little they had could be taken by other homeless people or opportunist thieves, especially if intoxicated. Participants were often the victims of crime contrasting common perceptions of homeless people being the perpetrators of crime. Despite the dangers, people mostly talked positively of the camaraderie amongst homeless people and support received from each other:

"Homelessness is a society eh, you know, it's different, they will share things with you, but you have just got to make sure that you pay them in smokes and drink, most of them understand they share, they are not greedy people."

(Chad)

Finding a safe place to sleep was not always easy and most participants had a number of places where they slept alone, often called camps, which they kept secret. Going to the same place too frequently was considered dangerous because other people would learn where to find you, so moving around from camp to camp provided greater protection. People sleep outside “*in the gutter or on a bench*” (Greg) or close to city centre buildings, where there may be shelter. Occasionally an unused building is used for makeshift accommodation, despite the risk of being caught:

“...it’s like squatting, it’s a place that you feel safety, gets you away from everybody, you know but at the same time, but it’s a serious charge if they catch you. You face the consequences eh.”

(Stan)

For those that had a place to stay, security of housing remained important for families in temporary accommodation with short-term leases although “*...they do give you that bit of extra time, if you can’t get accommodation*” (Fran). Lack of security impacts negatively on SWB, as it becomes an overriding and immediate priority for people who are homeless. Without security, homeless lives were lived in the present, concerns for the future or plans for making changes were subjugated to the immediate concerns and risks to survival.

Jack and Tom spent time in the bush or rural locations away from town to increase their sense of wellbeing. Feeling more relaxed away from the city was echoed by other participants who had spent much of their life in the bush, or working on stations, and were more familiar with living in the country. Although dependent on the facilities available in town, the bush provided a greater sense of safety.

Being Positive and Feeling Good

Participants identified a broad range of personal, environmental and social resources that contributed to wellbeing through maintaining a positive attitude to life. Participants used their personal strengths, daily activities and opportunities to maintain wellbeing in the face of homelessness and disadvantage. Intrinsic resources contributed to wellbeing such as being lucky, positive and “*just happy*” (Ian).

Two participants rated their wellbeing as high (9.5 and 10), and exhibited positive attitudes, high levels of independence and enjoy having a joke and laugh with others. For both,

wellbeing was a state of mind and required conscious adoption of positive attitudes to living on the streets. Conversely Stan, who rated his wellbeing as low (0), expressed his struggle to remain positive and cope with difficulties:

“It’s a hard thing but that’s kind of life you know but we try not to worry about it, the only thing we got to worry about is ourselves”.

(Stan)

Participants found pleasure and positive experiences in simple everyday activities that provided opportunities for immediate satisfaction. For some, keeping clean and maintaining personal appearances was an important part of their wellbeing: *“...if you are clean, you feel clean, you feel better, better about life”* (Bert). When achievement of life goals through work or education, social relationships and acquiring status was impossible for people who are homeless, wellbeing was attributed to experiencing a sense of self satisfaction and esteem in the present. Doing activities that resulted in feeling good in the present became a focus, rather than investing in an uncertain future.

Positive feelings are associated with being engaged in purposeful activities such as going *“to the beach, that’s where I have always gone, so I can be with myself, keep my mind occupied”* (Pete) and getting work *“it [cleaning the parks] gives me something constructive to do. It’s only an hour or so work, but when I’ve finished you can think well I’ve cleaned these parks up”* (Bert). For one Indigenous man there was a clear link between his artwork, his cultural identity and wellbeing:

“That painting it keeps me occupied, and I am proud of what I do, the painting it gives me a lift every time I sit down and paint, it’s in my blood you know”.

(Mick)

Connecting with Others

Amongst homeless people there was a sense of a community and of belonging together. Although most clearly identified by Indigenous participants, all participants enjoyed opportunities to meet up with others for a chat or a joke. The Drop In Centre and hostel provided valued opportunities for social interactions and maintaining connections with others. For the women with children who did not frequent drop in centres, social connections with friends and families were important; although the main source of belonging was

achieved through the women's relationships with their children. Most participants talked about the importance of having friends, contact with family or belonging to a group of people.

While most people felt it was good to make friends with people in the same situation, trust was an issue for some. Bert made a clear distinction between social interactions and trust saying *"I just treat everybody the same. Oh I can sit down here and have a coffee and a smoke with everyone but I don't trust anyone"* (Bert). Other participants were more trusting and felt it was good to have friends and people they could talk to.

It was particularly evident for Indigenous participants that being part of a group was important to a sense of wellbeing. Participants organised their days to meet up with friends and family and find places to sit and talk and often to drink together. Being with others provided a sense of belonging, which increased their sense of wellbeing:

"...this is all part of family because wherever we go, we go with the mob, you know like families, and we have a laugh and yarn, play music, play guitars and that, and you feel at ease there, you feel really at ease there".

(Stan)

"I'm married to the mob in the street; they are all my cousins and brothers in the street and all my mob from Palm Island and all kinds of places, in-laws from everywhere."

(Greg)

Amongst the single homeless people, being part of a community was exemplified by sharing the limited resources they had, including money, tobacco and alcohol. An informal system of sharing and paying back created relationships of obligation, reciprocity, and interdependence. These relationships affirmed a sense of belonging and economic community that enhanced survival. Pension day was the day when debts were settled and money shared. Knowing that money was unlikely to last until the following pension day, people were generous to each other when they had the capacity to be, thus ensuring the likelihood that others lent or shared their money later.

Having friends, family and kinship relationships contribute to a sense of shared identity and

esteem and mitigate the danger of loneliness. Being connected with others through social relationships and obligations provided a sense of belonging and community for those unable to belong in mainstream society.

Staying Human and Normal

This final theme emphasised the experience of homeless people as being ‘other than’ and outside of the rest of the community. The participants in this study experienced their own lives as different to those of their housed friends and family. They recognised how being homeless is viewed negatively by the majority of people in the community, therefore limiting access to participate in normal community life. Some participants took care to either hide their homelessness from others or to appear as normal as possible through their actions:

“...just trying to keep human ...you can lose yourself when you are homeless, you can go all the way down to the bottom and just be an animal”.

(Bert)

For homeless people, being treated like anyone else was viewed positively and contrasted with negative experiences of being judged on their appearance. Casual conversations with members of the public confirmed acceptance and resulted from appearing normal. One participant talked of having a close friend and a brother in the same city but neither knew he was homeless. It was accepted that being homeless was generally seen as a negative thing and leads to attitudes that are degrading or being treated negatively by others. Being normal was directly related to the subjective experience of wellbeing for people who are living on the street. For one participant: *“Eat, drink and try to make love to the sexiest women I can find...It keeps me normal”* (Jack).

Keeping human and being normal counteracts the experiences of marginalisation associated with homelessness. When viewed as ‘different’ and inferior to the rest of society, homelessness changes one’s self image and impacts on one’s sense of wellbeing. The participants who rated their SWB highly were generally careful about their appearance and were outgoing and friendly, being readily accepted in a range of community situations. Negative community attitudes to homelessness were discussed by some participants in relation to self concept:

“... they are frightened, they think I might snap at them. But I am not like that at all, this is the way I am. They will come up to you and talk to you and think this is a nice bloke.”

(Stan)

7.5 Discussion

The aim of this study was to identify how SWB is experienced and sustained in the everyday lives and activities of people who are homeless. A range of wellbeing experiences were found within this small and heterogeneous population of people experiencing homelessness. Not surprisingly, the majority of participants in this study experienced SWB in the lower levels, suggesting a difficulty in maintaining wellbeing in the face of persistent challenges of disadvantage such as poverty, unemployment, lack of personal safety and lack of intimate and loving relationships; a finding that is consistent with Cummins' (2010) research. Regardless of these difficulties, this study highlights the factors that motivate behaviours to maintain and sustain SWB in such situations.

Using a strengths-based perspective, the current study illustrates the capacity of individuals to sustain wellbeing through their personal attitudes, relationships and resourcefulness (Saleeby, 2009). A strengths-based view of homelessness counters deficit models by seeking to understand individuals' constructions of wellbeing through the reality of their life experience and appreciating that contextual issues such as homelessness, culture and gender influence wellbeing behaviours (Munford & Sanders, 2005). The strengths-based perspective encourages a strategic approach to coping with life or a pathway to life satisfaction and wellbeing (Kidd & Davidson, 2007; Saleeby, 2009).

Wellbeing among homeless people is achieved through finding contentment in their current life and confirms that people whose desires are within their range of achievement are happier and more satisfied with life (Solberg, Diener, Wirtz, Lucas, & Oishi, 2002; Wu, 2008). People experiencing homelessness strive to maintain happiness with what they have and what they can attain in the present, rather than focusing on 'wants' or future goals. While living in the present moment, within the available resources, helps achieve immediate satisfaction, its downside is the simultaneous negation of developing and achieving goals for the future.

In relation to the human need for security, feeling safe and having somewhere to sleep without constant threat of being moved on or attacked was clearly important (Maslow, 1943; Max-Neef, 1991). The provision of safe and supported accommodation to homeless people is the foundation of assertive outreach models currently being adopted in Australia (Parsell, 2011). The combination of permanent and affordable housing with support services such as mental health and substance abuse counselling, job training and placement, community activities, and help with life skills like cooking and money management has resulted in reducing homelessness in New York City (Common Ground, n.d.) and are being introduced in Australia under the Street-to-Home program (Parsell, 2011). However, as found in this current study, for some individuals housing may not be the immediate goal or desire.

Health professionals who encounter people who are long-term homeless may be surprised to find a reluctance to obtain housing or actively pursue goals towards improving life circumstances. This study highlights that the decision to be content with being homeless is a strategy to maintain wellbeing and identity achieved through survival on the streets. Given the difficulties in obtaining housing, especially for single people who rarely qualify for housing assistance and may be unable to afford private rental accommodation, being content with living rough could be regarded as a protective strategy for wellbeing (Anderson & Christian, 2003; Commonwealth of Australia, 2008b; Parsell, 2011). Previous findings demonstrate that reducing the have-want, the difference between ones desired and what one has, discrepancy and changing importance perceptions are pathways to life satisfaction (Wu, Tsai, & Chen, 2009).

This study demonstrates how Indigenous participants associate their wellbeing to belonging to a close-knit group of friends or family. Strengths-based approaches to homelessness should consider the importance of these relationships and recognise that separation from significant relationships to attain housing may negatively impact on overall wellbeing. The importance of maintaining family and kinship connections, as integral to the wellbeing and identity of Indigenous people, needs to be recognised by service providers. As illustrated in this study, maintaining kinship connections can contribute to a goal of social inclusion and reduce marginalisation (Fredericks, 2010; Gibson, 2010).

Despite limited opportunities for participation in community, this study demonstrates that people who are homeless actively seek out opportunities to maintain wellbeing by adopting a positive attitude, connecting with others and engaging in 'normal' activities. Changing

structural barriers to community participation may be a more effective strategy to improving wellbeing and reducing marginalisation (Melnitzer, 2007; Parsell, 2010; Schiffer & Schatz, 2008).

Health professionals should support opportunities for positive experiences and social connectedness through collaborative, strengths-based interventions rather than focusing on problems associated with homelessness (Munford & Sanders, 2008; Saleeby, 2009). Problem oriented models portray health professionals as experts and reinforce a conception of the homeless as deficient, rather than recognise the strengths and resilience involved in surviving homelessness (Zufferey & Kerr, 2004). This study demonstrates that the wellbeing of homeless people is threatened not only by the lack of material resources but also by the social perception and shame associated with being 'other' than a normal member of the community (Parsell, 2010).

7.6 Limitations

This qualitative study of wellbeing amongst people experiencing homelessness was limited to 20 working aged participants in a single geographic location. Although diversity was ensured by using three separate homeless services for participant recruitment, it is not assumed that the three agencies involved in this study provided access to the entire range of homeless individuals and groups. More males than females were involved in the study. Youths, aged persons and women escaping domestic violence were not included in view of the different issues affecting these groups. Despite the small number of participants in the study, the depth of interviews allowed for saturation of data to be achieved, as indicated by no new issues being evident in the final interviews (Patton, 2002).

The conversational nature of the interviews resulted in a variety of data being offered. Some participants were not asked specific and direct questions that would have altered the flow of the interview. Specifically, some participants were not asked to rate their wellbeing either because the question would detract from the flow and topic of the conversation or because the researcher observed the participant to be particularly unhappy about their current situation, and self rating could compound their current depressed state. Because of this inconsistency in methods, cautious interpretation of the ratings is required. Further research is required to make comparisons between the SWB in people experiencing homelessness and that of the

rest of the population. The results are not intended to be generalisable to other populations (Patton, 2002).

7.7 Conclusion

This study demonstrates that SWB is connected to satisfaction of basic human needs such as safety, survival, and social connections in working age people experiencing homelessness in Northern Queensland. Using a strengths-based approach to wellbeing, this study has shown the importance of meeting basic subsistence and protection needs and of belonging through being 'normal' to SWB. Attempts to achieve the appearance and lifestyle of others in the community demonstrate the significance of marginalisation and segregation experienced by those considered homeless. Although the current approaches to combat homelessness actively address issues of housing and support for the individual, there is little evidence or intervention aimed at addressing marginalisation at a structural level. Future research focused on the process of social inclusion and the barriers that exist for those that experience homelessness is required.

As illustrated by this study people experience homelessness and wellbeing subjectively, based on the histories, cultural needs and personal resources available to each individual. Therefore interventions need to be targeted to meet the needs of individuals to move towards housing and social participation. Using a 'strengths-based' model of care, collaboratively directed at individual goals is critical to improving social inclusion and reducing marginalisation. Interventions need to address aspects of homelessness at both the individual and systemic level. While services focus on providing housing to reduce the homelessness statistics, this current study demonstrates that the experience of homelessness is compounded by loss of identity and segregation from the broader community. Approaches that work towards increasing participation must also address the social structures that support marginalisation (Zufferey, 2008).

7.8 Summary

This chapter explored the meaning and experience of wellbeing in the everyday lives of 20 homeless participants through fieldwork and interviews. It describes the meanings of wellbeing to people experiencing homelessness in Townsville and grounds the study in the voices and perceptions of the participants of the study. Wellbeing is a state of satisfaction

with material, social and human aspects of life and is often measured both objectively and subjectively. The findings demonstrate the subjective nature of wellbeing and show that despite poverty and lack of resources some individuals were able to achieve high self rated wellbeing, although the majority experience low levels. This study revealed that health contributed little to their overall perception of wellbeing. Being safe, having access to the adequate physical, financial and social resources, and the ability to participate in 'normal' life were important to subjective wellbeing. This chapter demonstrates that social exclusion experienced in homelessness has a negative effect on subjective wellbeing. Negative perceptions of homelessness contribute to deficit models of practice, false notions of homogeneity and marginalisation. Services that provide opportunities to experience social inclusion and develop community and cultural connections will also improve the wellbeing of homeless persons.

Chapter 8

An Occupational Perspective of Homelessness in Townsville: Collective stories of single middle-aged men and women with children

As illustrated in the previous two chapters, opportunities to engage in occupations that are personally meaningful and socially valued increase a sense of personal wellbeing. It has been shown that opportunities for occupational engagement, while rare, provide rich contrast to the marginalisation and exclusion experienced by homeless people. The previous chapter confirms that wellbeing is closely related to being 'normal' and engaging in ordinary occupations of life. The wellbeing of homeless people is threatened not only by the lack of material resources but also by social perceptions and shame associated with being 'other' than a normal member of the community. When participation in occupation is precluded by factors outside of the individual's control a state of occupational deprivation exists (Whiteford, 2000).

Building on the findings of Chapter 7, this chapter illustrates in detail the main findings of the study by identifying the occupations of people experiencing homelessness and discovering the meaning of these activities in relation to their wellbeing. An overview of the results of the study is provided as a table of all participants in the study. This chapter reports the detailed results of two sub-sets of the data; the experience of single males and the experience of women with children. Constituting two nested case studies within the wider case study, the perspectives and meaning of occupations for these two groups were sufficiently different to warrant separate analysis. The participants in each data set are identified in a table with pseudonyms allocated for each individual, then the results of analysis of each case study is presented as a collection of themes that emerged in the data using quotes from participants where possible. Finally, each nested case is presented in the form of a composite narrative or collective case in an attempt to provide context for the findings and give 'voice' to the real life worlds of people experiencing homelessness.

The final nested case study; Indigenous homelessness, is reported in Chapter 9.

8.1 An Occupational Perspective of Homelessness

To interpret and understand the finding of this research I have drawn on the work of other authors and occupational scientists who collectively have expanded the theory of occupation and its influence on wellbeing (Dobel & Santha, 2008; Hammell, 2008; Wilcock, 2006). The literature confirms that individual occupations are not inherently meaningful or valuable; rather the contribution of occupation to wellbeing is subjective and can only be understood as a consequence of the meaning individuals and communities ascribed to them (Hammell, 2004; Kantartzis & Molineux, 2011). Occupational meaning is determined subjectively in the context of cultural social, symbolic and spiritual narratives that link past, present and future lives (Kantartzis & Molineux, 2011). This chapter seeks to identify how individuals give meaning to their occupations in the context of their homeless lives and relates their occupations to their perception of wellbeing.

As described in Chapter 1, wellbeing is understood to be achieved through the synthesis of four dimensions of occupation; doing, being, becoming and belonging that together provide meaning to our activities (Hammell, 2004; Wilcock, 2006). These dimensions provide a framework for understanding the relationship between occupation and wellbeing, although recent authors have challenged the primacy of 'doing' over the other dimensions as a construction of Western ideology (Kantartzis & Molineux, 2011). These four dimensions apparent in the occupational narratives of the people experiencing homelessness are prioritised in these nested case studies differently, supporting the understanding that wellbeing through occupation is individually ascribed and cannot be generalised. It was a consequence of this finding that initiated differentiation between the nested cases. As will be shown, the occupations engaged in are related to both personal factors including motivations, values and capacities and to external factors such as opportunities, demands and social stigma.

For each individual, occupational need is driven by a range of contextual factors including age, gender, ability, wealth, ethnicity, location and health status. Occupational needs and occupational opportunities interact in the narratives and lead to a better understanding of the negative effects of occupational deprivation on human wellbeing and to issues of occupational justice and occupational injustice (Townsend & Wilcock, 2004). An evolving theory of occupational justice, as outlined in Chapter 1 relates specifically to this study of

homelessness in Townsville (Stadnyk et al., 2010). As distinct from social justice, occupational justice focuses on ‘occupational equity, occupational fairness, occupational empowerment, occupational rights and responsibilities, occupational enablement, expression and opportunity, occupational satisfaction and occupational wellbeing’ (Wilcock, 2006). The concepts of occupational justice are included briefly in the discussion of this chapter and are expanded on in Chapter 9.

8.2 Methodological Issues

A case study approach was used to explore the link between occupation and wellbeing for people experiencing homelessness in Townsville (Stake, 2005). A full description of the methods has previously been presented in Chapter 5 and will not be repeated here. Two methodological issues are outlined below.

8.2.1 Fieldwork Observations

Fieldwork was conducted between 2008 and 2011 in locations and services frequented by people experiencing homelessness including the Drop In Centre and the FEAT play group, and aimed to gain insight into their activities and normal routines and to build rapport prior to interviews. Observation notes and reflections were recorded in the researcher’s journal and included notes of informal conversations with potential participants. Although the purpose of the researcher and the research was discussed informally, formal consent was not obtained and therefore due to ethical considerations these are not reported in detail in these results (Pitts & Smith, 2007). In this study, observations and conversations provided the basis of reflections and ideas that were explored either in interviews where consent was obtained, with cultural mentors, in interviews with service providers, or through researching theoretical knowledge.

8.2.2 Issues of Power and Privilege

Aware of the inherent power and privilege of my status, I approached individuals tentatively initially, seeking explicit permission to sit down and chat, and respectful of their right to refrain from engaging with me at any time. In these beginning relationships I frequently watched how people reacted to my greetings and learnt how to read body language carefully, noting when people seemed uncomfortable with my presence. Initial interactions were very general and focused on external events, and the environment rather than the research. Over

time people became more familiar and more interested in who I was and why I was there. I began each session greeting those that I already knew and chatting with them, before approaching new individuals. By establishing a trusting relationship with members of the homeless community, prior to interviewing staff and service funders, I aimed to elicit the meanings and significance of daily occupations as perceived by participants who were viewed as active agents within their lives and communities. Once a trusting relationship had been established individuals were invited to participate in a research interview.

Open-ended interviews were utilised to allow participants the space to elaborate and diverge from the direct focus of the research and introduce other ideas and experiences related to the topic of interest (Hansen, 2006). The interviews lasted up to one hour and consent to record the interviews requested. The interviews were loosely guided with the use of specific questions that addressed the research goals, however a conversational approach was used that allowed participants to introduce topics and opinions that were significant to the participant. In this way the interviews were collaboratively produced by both the participant and the researcher (Silverman, 2006), broadly focused on the aim of the research and had the capacity to deviate from preconceived areas of interest to incorporate a range of understandings from participants. The interviews were conducted either within the local services or in a public place e.g. the park, a café or on the Strand; for the women with children who were living in crisis accommodation the interviews often took place in their homes. Notes were taken during and immediately after the interview and documented together with a transcript of the interview. Together these comprised the data to be analysed.

8.2.3 Issues of Representation

As previously stated, the data for each of the nested cases was separated prior to analysis and this highlighted the significance of gender, culture, roles and identity to each case.

Aggregating the data collected from multiple individuals is one way to maintain participant anonymity, however, given the small number of homeless people in the locality and knowing that many individuals could be identified, additional measures needed to be taken to ensure anonymity (Pitts & Smith, 2007). The use of composite narratives or collective stories (Richardson, 1990) maintains the anonymity of individual participants but allows the researcher to narrate the experiences of a collective group as a central and recognisable character and potentially provide a new plot with a potential of transformation (Richardson, 1990). The results are presented in two sections: first the results of the single middle-aged

men and second the women with children. Comparisons are then made in the discussion section.

8.3 An Overview of Interview Results

A total of 29 people were interviewed, resulting in 35 interviews as some participants requested more than one interview, progressively sharing more of their story as trust developed. Table 8.1 provides demographic information for each participant and the service organisation in which the interview was arranged. Each participant has been given a pseudonym for the purposes of reporting the findings. As shown in the table participants varied in age, accommodation and the key concepts discussed.

In total the age of participants ranged from 22 to 64 years. The precise age was not always provided by participants and therefore was estimated by the researcher, and may be misleading. Generally the women with children comprised the youngest group, the Indigenous participants were older (usually between 30 and 50 years) and the non-Indigenous participants comprised some of the oldest participants. The diversity of experiences across the participant group demonstrated the heterogeneity of the homeless population. With people reporting a range of different living situations, histories of homelessness, and family relationships it is difficult and misguided to suggest any generalisations of experience. Some participants were born and had lived in Townsville for most of their lives; others had moved to Townsville and had families in other cities. With the exception of some women with children most of the participants had experienced homelessness over more than six months and therefore had a range of experiences that they were willing to share in the interviews.

The rich data gained from individuals covered a broad range of key concepts as shown in Table 8.1. The conversational nature of the interviews allowed participants to volunteer information that was important to them and frequently this was related to their immediate situation or something that had happened recently. Some participants talked about significant events from the past including previous employment, places they had lived, past relationships and the things they had learnt along the way. The interviews moved back and forward covering both present and past experiences in a natural flow and gave insight into the way people perceived themselves and their homeless experience. The reporting of the findings involves selection of the data and inevitably leaves out much of what has been told.

There was one single female participant who was not Indigenous. Her interview provided a different story to that of the women with children, as her homeless life was one of transience and insecurity. Excerpts from the interview are reported here in the form of vignette. Her name has been changed and any specifically identifying information removed to maintain her confidentiality. This vignette demonstrates how people who are homeless become accustomed to moving from place to place:

Vignette 1 – Homelessness: A Life of Uncertainty

“That is the reason that I am homeless because when I am drunk I have just got a bad attitude, and the landlords don’t like being called arseholes evidently (laughs), really, can you believe that Yvonne? I am not allowed to do that anymore if I am going to keep my accommodation, but when I am not drinking, I am fine, yeah. So I have lost this (boarding house accommodation) because, it’s not the drinking, it’s my attitude because when I am drinking it all just, shit just goes everywhere, flying everywhere, cos I drink to a stage where I have no control, yeah, so it just gets very messy.” (Dee)

I was talking to this participant sitting outside a very run down cottage in the city centre. We sat together at a table at the back of the house drinking tea, poured and strained from a white teapot into china cups and saucers, which I had previously seen displayed in a glass cabinet in the sitting room of the house. To make the furniture in that room more homely the participant had used lengths of pink, silky material to cover the easy chairs and was proud to show me around the house. She had been living there for just three weeks.

Dee showed me the eviction order, served late yesterday and I saw the distress resulting from being thrown out again, but also saw a fierce resolve and self knowledge that whatever happened she would cope; she had coped before and she would cope again. The letter from the landlord began:

“I have tried to contact you on several occasions to discuss complaints I have received, the property damage caused by you and the ongoing issues I have with you not respecting the common areas. You have the right to use common areas, not take them over and change things to suit yourself.

Because I have not made contact with you I am forced now to act on the information I have so far.”

Whether Dee was being evicted because she had tried to make the old cottage her home or because she had got drunk and abused the landlord isn’t clear. Regardless after three weeks she was homeless again. She knew that it would take time to organise leaving.

“I’ll have to get my things packed up and I’ll need to ask a friend whether I can store my gear. If I can I’ll get that arranged, and I’ll be back on the streets again, living in the street.... sleeping in the park. I slept on the beach for a while, I slept in an old deserted house, I squatted in a house but that’s too dangerous because people know about the squats and you get danger there.” (Dee)

Before I left, this participant gave me a cutting of mint from a plant pot, suggested I plant it and let it grow. She told me she had paid \$4.00 for the pot plant which she placed in the garden where she could pick leaves for cooking. It seemed to me that the pot plant was a bit of a metaphor of the uncertainty of homeless living – it’s nice to have a place, but there is no point in getting settled, because you never know when you are going to have to leave.

Table 8.1 Demographic Information for All Participants in Study

Participant	Demographics	Accommodation	Key Concepts	Organisation
1. Sam (Pilot study)	Male, 50's, non- Indigenous	Staying with friends (studio)	Spiritual wellbeing	Drop In Centre, Art Program
2. Alan	Male, 37 years, Indigenous,	Unit	History, social family	Drop In Centre, Art Program
3. Bert	Male, 50's, recently bereaved	Streets (has place in Sydney)	Trust and respect, dignity	Drop In Centre
4. a & b* Chad	Male, 40's, physical disability, part Indigenous	Unit, previously lived on streets	Relationships	Drop In Centre, Art Program
5. Doug	Male, 59 years, ex stockman	20 years on streets	Safety, fighting, trust	Drop In Centre, Art Program
6. Eric	Male, 40's, bereaved, working	Unit, previously in car	Sharing and relationships	Drop In Centre, Art Program
7. Fran	Female, 22 years, mother of 4 children	FEAT housing	Looking after the children	FEAT
8. a,b,c,&d* Greg	Male, 42 years, Indigenous	Parks, usually with the mob	Political, rich and poor	Drop In Centre, Art Program
9. Heidi	Female, 24 years, mother of 3 children	FEAT housing	Being a good Mum	FEAT
10. Ian	Male, 52 years, Italian	Streets	Being able to manage	Drop In Centre
11. Jack	Male, 30's, Indigenous	Hostel	The system	Drop In Centre, Art Program
12. Kate	Female, 23 years, mother of 2 children	FEAT Crisis housing	Role of Mother, safety	FEAT
13. Lisa	Female, mother of 6 children, Indigenous	Diversionsary Centre	Clothes, domestic violence, alcohol, God	Diversionsary Centre
14. a,b & c* Mick	Male, 49 years, Indigenous	Diversionsary Centre	Alcohol, racism, culture	Diversionsary Centre
15. Neil	Male, 40 years, has 6 kids, Indigenous	Diversionsary Centre, parks	Talking, family, fishing	Diversionsary Centre
16. Pete	Male, 54 years, 1 daughter, Indigenous	Diversionsary Centre	Keep my mind occupied	Diversionsary Centre
17. Ruth	Female, 48 years, Indigenous	Diversionsary Centre, parks	Safety, getting a place	Diversionsary Centre
18. Stan	Male, Indigenous	Diversionsary Centre	Safety, being somebody	Diversionsary Centre

19. Tom	Male, Indigenous	Diversiory Centre	Alcohol and work	Diversiory Centre
20. Ulna	Female, late 30's?, Indigenous	Streets	Having a home, alcohol	Drop In Centre, Art Program
21. Vince	Male, non-Indigenous	House share	Having a place, work	Drop In Centre
22. Andy	Male, 58 years, non-Indigenous	Shed	Acceptance and Self	Drop In Centre
23. Alex	Mother of 2 children	FEAT emergency housing	Mothering, time out	FEAT
24. Ben	Male, 50 years, non-Indigenous	The streets, Diversiory Centre	Food and shelter, clean	Drop In Centre
25. Carl	Male, 58 years, non-Indigenous, married 4 times	Staying with friends, evicted from hostel	Alcohol, worker for justice, alcoholic, friends	Drop In Centre
26. Dee	Female, non-Indigenous	Being evicted	Alcohol	The Women's Centre
27. Diane	Female, mother of 2 children, married	Bankrupt, Transitional housing	Family	FEAT
28. William	Male, 43 years	Happy Valley	Service politics	Dept Communities
29. Yvette	Female, 48 years	Happy Valley	Making a home	Dept Communities

* denotes where more than one interview was provided by the same participants

8.4 Single Middle-Aged Male Homelessness

These results are drawn from the interviews with ten male homeless participants who were non-Indigenous, currently single and aged between 47 and 64 years. Three had never married, four were separated from wives and children and had little or no contact with them, and two were widowed and talked about the death of their spouse as the event that led to their homelessness. One participant did not disclose his marital status. Of the men who had never been married, one had lived with his mother for years and identified her death was related to his loss of a permanent and safe home and another talked about the recent death of his brother being a significant factor in his life. While the interviews did not specifically focus on issues of loss and grief the frequency with which death and loss of a significant relationship was discussed was noticeable. Table 8.2 provides the demographic information for each of the single males participants and their self-rating of wellbeing. The ratings used subjective scaling with 10 being the highest and 0 being the lowest experience of wellbeing for each participant, the score provided in table 8.2 is the subjective rating of wellbeing at time of the interview.

Table 8.2 Single Middle-Aged Male Participants

Pseudonym	Age, marital status	Current Housing	Wellbeing score
Carl	58 years, married 4 times	Evicted from lodge, staying with friends	5
Ben	50 years, never married	Living on streets	3
Andy	58 years, married, adult children	Homeless for 13 years, lives in shed	9/9.5 (mentally)
Vince	64 years, never married	Rents a room (2 months), previously lodge 2 years	3/4
Ian	52 years, marital status unknown	Living on streets	9.5
Eric	47, years recently bereaved/widowed, adult children	Unit (2 months) after 6/8 months in car	5/6
Doug	59 years, left wife and kids 20 years ago	Living on streets 20 years	10
Bert	50's, recently bereaved/widowed	On the streets 7/8 wks	4
Chad	48 years, separated from wife	Unit, previously on the streets	Just over half
Sam	50's, never married	Staying with a friend after years on the streets	Not asked

The findings are reported below under two main headings: Being homeless as a single man and Maintaining wellbeing through occupation. Four sub-themes emerged related to maintaining wellbeing: Mind management, Filling the time, Friendships and belonging, and Breaking the boredom.

8.4.1 Being Homeless as a Single Male

All ten participants had lived on the streets for significant periods of their lives, although at the time of the interviews five were living in some form of marginal or temporary housing. Three participants talked about the importance of having a place to call home despite living in very marginal housing:

“I can do anything I want, its somewhere to call home, its only one room but I like it I can go home and relax, I can do whatever I want.”

(Eric)

One participant lived for two years in a single room in a hostel and recently moved into a rented room in a house. He clearly identified the value of having a place:

“It’s not the worst, at least you have got a comfortable bed to sleep in and a roof over your head, shower and stuff like that. And then lifestyle it a, it’s not super but you got a place to sleep and to store your stuff.”

(Vince)

Similarly one participant lives in a shed; while not a home he considers himself lucky:

“Basically I live in a shed, so I am lucky in that I have got a toilet and a shower and it’s just basically a little room and that’s it. No cooking facilities in that sense, no real whatever. It’s a work shed, it’s got those facilities anyway, and I have got power but it’s not what you call a house, in the sense of a home. It will do.”

(Andy)

There was a stark contrast between those who had a place and those who were living on the streets. Living rough means moving around from place to place, for some sleeping out is about the freedom to live autonomously but for others finding a suitable spot to stay requires careful planning:

“...homeless people talk about the starlight hotel, it’s just sleeping out there under the stars.”

(Sam)

“They all sleep in the quarry and I slept up there for a while.”

(Eric)

“[I]try and get shelter from rain and the ideal place is ... like stairs and an area where it is all shelter and people cannot see you at night time, like in the shadows of the building where no one can see you.”

(Ben)

“Where I prefer to live is ... where I do get sunlight because sunlight for me is the beginning of my day and then from there I am up and about and I am in to it. I like greeting the morning sun and I just go walking in it.”

(Sam)

Participants talked about the dangers involved in living on the streets and the need to be vigilant and careful. The issue of security and not being visible are paramount:

“You keep moving; it’s dangerous to keep going back to the one spot, ‘cos somebody got a set against you they know exactly where you are.”

(Doug)

“I keep to myself but the younger ones tend to congregate in groups. You know safety in numbers I guess.”

(Bert)

“Yeah its very dangerous, it’s always been dangerous on the streets, I just cannot emphasise that enough, you know, (name of another homeless person) he was sitting by the side of the building against the wall and a bloke came past and took a shot at him, missed him by that much [indicates with fingers], the bullet is still in the wall, in the concrete, yeah he tried to shoot (name) through the head, how dangerous do you

want it out there, eh? I was camping out down here one night, too drunk to go home, or to where I normally sleep, and four blokes pulled up in a car raced across and started throwing stones I got up and ran towards them...

(Doug)

"I was attacked in the mall from behind. I got a chipped tooth out of it, but the guy got a jail term for it. They said that he had robbed a bus, took the change from the bus, I don't know, but the police have got cameras all over the city and they seen it on film and they got my wallet and my mobile phone from him."

(Ben)

When trouble arises fighting back is considered to be necessary:

"Be prepared to do whatever you've got to do to look after yourself..."

(Bert)

"I don't go out looking for them but if they are staring me in the face where I get pushed into a corner I won't back down, I just take whoever out."

(Eric)

It was evident that to survive on the streets you have to be tough and one participant shared his concern for people who were unprepared or unable to take care of themselves. The single male participant's advice to others was to get help if possible to get off the streets if you are not able to look after yourself:

"No reason I can see why women should be homeless in the parks. It not safe. There were two girls, where was I camping, oh it doesn't matter anyway, these two girls they asked could they sleep beside me, cos they were scared. If you are scared get out of the parks, get out of the game, go and get help.... Just one night, one here one here (indicates both sides) couldn't roll over, poor little bastards."

(Doug)

The desire to get a place of one's own was expressed by some, but not all, participants. Some participants didn't want to change their lifestyle and talked of living on the streets, or at least

without the burden of having to pay rent, as a choice. However, those that expressed a desire to have a place to call home identified a number of barriers that would need to be addressed:

“If I had a wish I would have small flat and cook my own meals and then maybe I would learn to save money and not spend it on unnecessary things like beer and gambling.”

(Ben)

“I have tried applying for a housing commission property but ... no birth certificate, no paperwork to verify who I am, I don't have a passport I don't have photo ID and subsequently I cannot apply for a housing commission unit. That's all there is to it, I cant even apply.”

(Carl)

“I would like to live in my own flat up here. I have had a yarn to them (Department of Housing) about it but there's a 7 - 10 year list apparently, if I am lucky.”

(Bert)

The cost of having your own place when you are on a benefit was also a barrier:

“I am on the DSB and you can say \$300 a week by the time you pay \$150 on rent that's half your pay, so that doesn't leave much to buy food you know.”

(Ben)

Throughout the interviews it was clear that being housed was not always the first priority for people who are homeless. In some cases having a place would be outside the financial or practical resources available due to addictions and poverty. Notwithstanding these barriers, the reality is that there is a shortage of safe and secure affordable housing suitable for people who are homeless. This is particularly true for single males who are seldom prioritised by state housing departments or other housing organisations, making the small number of men's hostels in town the only alternative.

8.4.2 Maintaining Wellbeing through Occupation

Participants identified a range of ways in which their day-to-day activities helped them to maintain and sustain wellbeing in the face of homelessness. These themes are outlined below.

Mind Management

The first of these themes demonstrates that a significant aspect of maintaining wellbeing is achieved through controlling and managing thought processes. Cognitive strategies are generally not classified as occupations in the occupational therapy literature but the importance of managing thoughts in relation to human wellbeing is apparent in the data. Given that many occupational therapists work with people to change the way they think using cognitive behavioural techniques further discussion of the relationship between cognition and occupation is relevant to the profession. An occupational perspective of the importance of thinking in relation to engagement in occupation is needed.

Participants identified a number of psychological strategies used to maintain satisfaction and happiness in their lives. In the same way that people need to look after their body by eating, homeless people look after their mind with deliberate mind management strategies. Being honest, positive and grateful for what you have were all individual decisions made on a daily basis to be happy with life:

“I try not to believe my own lies. Mentally fit I try to be. And I try to be as realistic as possible ... So when I am talking to somebody, and I lie, I deliberately have to know the difference between when I am lying and when I am not... keep myself honest to me.”

(Andy)

“I have heard many people talk about an attitude of gratitude, gratitude for what I have been given. I have been given so many things and I have learned also that being fortunate isn't just a monetary thing it doesn't have a dollar sign on it. I have met a lot of people and been to lots of places overseas and living in this country. Yes I've been fortunate I have good friends. It's just a coming of age for me I suppose I have turned around, because there is so many times when I just took it for granted and I

lost so many things and it's just that rude awakening and so part of wellbeing is trying to nurture an attitude of gratitude and say thanks. Mental wellbeing yeah..."

(Sam)

"If you wake up and say 'oh this is going to be a bummer', well this is going to be a bummer - If you wake up and say I am alive – I didn't die during the night you know, well that's a good day. I look on the bright side of things you know, you gotta!"

(Doug)

"Plus I am old now and I have got no aspirations or anything you know, I am better off than the Dalai Lama cos he's got more problems than I have."

(Ian)

Some just believed they were naturally happy, while others actively pursued happiness by doing something purposeful:

"What keeps me happy? I don't need something to keep me happy, I am just happy."

(Ian)

"I have always said that if you are not happy or if you are sad, you have got to get out and go places that will make you happier."

(Ben)

"There are many people in my life and some of them have passed away and that makes me thoughtful of what I do have, rather than chasing what I don't have. For me in the morning I just say thanks and from there I just get on with my usual routine."

(Sam)

Others were more aware of the dangers of being depressed or feeling hopeless, and the importance of managing the mind to avoid feeling bad:

"Hope – you know where you can hope that you are going to get better, and have something tangible to base that hope on."

(Bert)

“I believe I have turned it [depression] around, because I got up this morning and thought I have to get on with it.”

(Eric)

The study demonstrates that people who experience periods of homelessness developed a number of cognitive coping mechanisms. Just as they learn how to use the available resources to ensure they have sufficient food to eat, they also use their internal resources to make sure they cope psychologically with their situation. The alternative is seen as unacceptable, keeping your mind in check is a strategy for maintaining a sense of control of yourself and your wellbeing. Being able to control ones emotions and thoughts promotes adaption to difficult situations and positive interpretations of events, and is central to the concept of volition or motivation for occupation (Kielhofner, 2008) . The threat of losing control of your mind is real to many who have experienced periods of depression and mental illness or have seen this in the lives of others on the street. People work hard to maintain their mental health and wellbeing in the face of homelessness. Regardless of any diagnosis they may have been given in the past, most participants took courage from their ability to work out ways to self manage rather than rely on help from professionals:

“And you get to that stage when you go to psychologists and you talk to these mental health people. And you realise... what’s going on. I am trying to be happy and I am listening to these people, and I am not happy. The more I talk to these people, the worse I am off. And I heard from other people the same thing, they go to the doctor and they get a needle and um, what do they teach you in reality.”

(Andy)

There were other participants who struggled with mental health issues and appeared to be depressed and cognitively impaired. Some individuals that were not interviewed were clearly psychotic at times and others appeared to have signs of dementia. For these people help was at hand in the way of a weekly clinic at the Drop In Centre held by a local GP and frequent visits from the Homeless Health Outreach Team. Although both services were well frequented, the sense of wellbeing described here was clearly associated with occupations of self-management.

Filling the Time

When people have no obligatory occupations, no house to clean, meals to prepare or work to go to, they have to find ways to fill the hours of the day between meals and specific appointments. Walking becomes a form of transport, a method of regular exercise and an opportunity to think and meet people:

“It’s human nature to keep yourself in top shape. I walk everywhere, if I can’t walk I run. There are blokes here half my age, and I wouldn’t have their body for love.”

(Doug)

“ Walking you meet people and today just an example this morning one old chap he comes this way and I go that way and he calls out ‘oh you are off and at it again today’ and I say thank you. He doesn’t know anything about me, or my life and what I am doing, all he sees is I am heading out to do something.”

(Sam)

“I like to get out and meet people too, like I say hunting for a female. Females do come in (to the Drop In Centre), even if I don’t score I can at least look at them. I still have that in my life, I can still crave females inside.”

(Andy)

Filling time means taking advantages of the few opportunities that are available for free and accessing entertainment. For single men who are homeless a lot of time is spent alone and solitary in public places, without any demands. Being out and about provides a sense of purpose that would otherwise be missing:

“I spend a lot of time by myself, I am quite comfortable with myself, put it this way if I was sitting in a pub, I would drink by myself, cos I just got me own way I want to do things, but you can’t just be by yourself all the time, you have got to interact somewhere along the line, but when I leave here, I go my own way.”

(Doug)

“I read the paper everyday and if there something offering down the street there, or free exhibition on, motorbikes or like the cars, over here the Ford car club, or something.”

(Vince)

Townsville has the advantage of a coastal location with a city beach known as the Strand and a city centre mall, which was once a pedestrian freeway but this area has recently been redeveloped and opened to vehicles:

“They used to have entertainment thing in the centre there, but it’s been pulled down now, don’t know if they are going to rebuild it all or what, But I usually just go over there and hang around and see what’s happening. Or go to the Strand and see what’s on sometimes they have boat races to watch from the foreshore or something.”

(Ian)

Reading is cheap and easily available, with a newspaper or a book to read people can sit at the Drop In Centre with a cup of coffee between meals or some participants regularly used the public library:

“I would probably go to the library, its air conditioned so you can loiter around there.”

(Ian)

“I will go on the computers, or go to the library and read books, more or less hang out at the library and get on the computers there because I am a member there now, and I come back over the Drop In Centre, have lunch here and get on the computers after lunch.”

(Ben)

A number of the participants took the opportunity to do some work when it was available, however only one participant had a job at the time of the interviews. Most were unemployed long-term due to disability. One participant had been able to do a traffic control course through a government program for long-term unemployed, although this had not led to any work opportunities for the 64 year old. Another participant had previously worked for boat

builders when work was available but was unable to continue due to health issues. The most frequent form of work was undertaken at the Drop In Centre where cleaning, screw assembly and car washing was offered on an hourly basis. The primary motivation for engaging in these programs was to earn extra money, but they also recognised that a few hours work gave them some structure and satisfaction:

“I come here to do the screws so I have \$20 or \$40 already for next week, its money in the bank. You see I have a car and I need to maintain my vehicle.”

(Andy)

“It gives me something constructive to do. It’s only an hour or so work, but when I’ve finished you can think well I’ve cleaned these parks up.”

(Bert)

Friendships and Belonging

For single men being homeless is often isolating and they spend much of their time alone. One of the advantages of attending a day centre is it provides an opportunity to catch up with other people in the same situation. There was a range of views expressed about the importance of friendships and a sense of identity that is achieved through belonging to a social group.

At one end of the spectrum people readily admitted to not trusting others and not wanting to develop friendships with other homeless people. Keeping to themselves appeared to be another way of protecting themselves in a hostile world and may be viewed as a sign of paranoia by some:

“I assume that everyone in this place is on the scam, everybody, so I just treat everybody the same. Oh I can sit down here and have a coffee and a smoke with everyone but I don’t trust anyone.”

(Bert)

“I don’t think people should get involved with other people, period, really.”

(Ian)

For others, it was good to have one or two people to talk to socially and although these relationships were not discussed in terms of identity or belonging having the company of others made life a little easier. As with any group people have different needs and levels of skills in terms of developing friendships, some people are simply more gregarious than others, so the differences between people are not so surprising:

“There’s a couple of guys here you can talk to you know, you get to know their problems and they know your problems, there a bit of comradeship there which is nice.”

(Vince)

“There’s a few people here that I get on well with, and I been helped by and you help out, you get friendly and you learn to trust one person, that’s good you know.”

(Ben)

“I’ve got a friend, a very good friend who lives two streets away from here, I go and see him a couple of times a week but he doesn’t know I am living on the street. It would affect me if he knew that.”

(Bert)

At the other end of the continuum some participants provided detailed description of how friendships were critical to their wellbeing and their sense of identity. Within the group of homeless friends there was a sense of belonging and responsibility to help each other out when necessary. In this way friendships were much more than social connections, rather these relationships had obligations attached in the same way that families stick by each other and help out when needed:

“If you haven’t got friends you are wasting time, you’re wasting your own time and you are wasting their time. If someone else is in trouble physically even whether it be a murri person, if you know them, you can render assistance to them.”

(Carl)

“When I first moved to Townsville I had no-one, I had nothing and I walked into the [named] Hotel had a few beers and met some guys, I told them about my situation and

they said come down to Vinnies (the St Vincent de Paul's men's shelter) they got me in there, I didn't stay there long... I got kicked out of there and that's when I was living on the street and I found with all the friends that I had made in the time I was there, I do believe and I strongly believe that streeties look after their own in some way, shape or form."

(Eric)

Breaking the Boredom

Despite the lack of safety experienced living on the streets, especially at night, for the most part homeless life is often routine and boring. The day is loosely structured by meeting the basic needs of sleep, food and company, there are few opportunities and a lack of financial resources to participate in more exciting or engaging occupations. Some participants recognised the lack of choices available to engage in meaningful occupations meant that they had to take the opportunities that were accessible. This was especially evident at the weekends when the Drop In Centre and other services are closed and occupational opportunities were limited:

"[Coming to the centre] breaks my day up, gives me something to do, a lot of reasons. If I had a choice I wouldn't be, you know depending on the choices that I have I wouldn't be here."

(Andy)

"Sometimes I get on a bus and go to [different shopping centres in the outer suburbs], just to have a look there, to break the boredom of the day. Cos doing the same thing day in you know."

(Ben)

Few participants expressed excitement or interest in their activities but rather they did things in order to look after themselves and break the boredom:

"I do a bit of art work and drawing and some thing's from the artworks reflect things to me. It's like a mirror, as I am doing things it comes back as a mirror to me. So that's another method of self care."

(Sam)

Some participants talked about drinking and gambling as the occupations that brought some sense of enjoyment:

“Tomorrow is my pension day and I probably won’t come here to eat at all, I will probably go to a 9.00 opening pub there is two of them in Townsville, one around the corner here and one in the city, I will start drinking early at 9.00 am and then I might go to two or three other pubs that don’t open at 9.00. And speak to friends who are doing the same as I am.”

(Carl)

“I like gambling, I forgot to tell you that I like to go gambling, I have a flutter I do that too.”

(Andy)

Despite these references suggesting that engaging in addiction brought some enjoyment, there was acknowledgement that this was false and that there were other ways to be happy but that these opportunities were few and far between:

“When I have a good day is when I feel I have been challenged by something and I have got thrilled without having to have a substance to do that.”

(Sam)

In answer to a direct question about what happens on a good day, one respondent said:

“I am happy, I am thinking about things that are going well, positive things in your life, having a better life. Making positive decisions and moving in the right direction instead of going backwards.”

(Ben)

The lives of single males who experience homelessness are characterised by basic routines and few opportunities to experience a sense of engagement or achievement. In the absence of other opportunities alcohol and addictions bring some relief.

8.4.3 Collective Narrative – Stuart

Stuart is 52 years old and comes from Adelaide. He became homeless when he separated from his wife 8 years ago. He lost his wife, home and contact with his son (aged 18 years). Stuart moved up to Queensland because he had previously visited the area and has some family here. The temperature in Townsville is good too, not too hot and not too cold. He has been living on the streets for 8 years now – occasionally he may stop in a hostel in town, but generally he doesn't stay long. He doesn't like sticking to the rules of these places, and usually ends up in conflict with authority and being chucked out. He had an emergency housing unit for a while but didn't like the neighbours and found it hard to pay rent and manage his money and decided to go back to the streets.

He likes living on the streets – and feels he has nothing to gain from having his own place really. He stays in a few different places around town; he has slept in parks, on the beach, and unused building and is well known to the police.

His main priority is survival, getting food, a safe place to stay, keeping clean:

“That’s the main priority is coming to the Drop In Centre to have meals, that’s the main thing. Then when I am here, work out where I am going to go for the rest of the day. Most times I decide to stay here.”

He uses the showers and laundry facilities at the Centre, meets up with others and passes the time of day. He uses the Drop In Centre for two meals a day and this provides some routine, breakfast at 8.30, lunch at 12.30 and drinking in the late afternoon and evening.

Over the years he has met most of the other homeless people in town, some he trusts more than others but he tries to remain friendly with everyone: *“There’s no point in making enemies, if you can avoid it.”* Some friendships are important; Stuart has one or two mates who he likes to catch up with and enjoys their company, sometimes they will go to the pub together. But basically Stuart does not really trust people and so prefers to spend time alone, *“its simpler that way.”*

Stuart says: *“Just look on the bright side, if you want you be down you can soon put yourself down. Same if you want to be up, have a laugh and a joke, take shit out of somebody, that’s what you do, just do that.”*

Stuart is always ready to have a laugh and a joke; he takes the ‘mickey’ out of himself and others and generally is well liked. However, he doesn’t like being told what to do and when conflicts arise Stuart tends to walk away and spend time alone. He is not afraid to fight if needed but he prefers to stand back and avoid the hassle if he can.

Stuart drinks alcohol regularly and this is his greatest expense, pension days are big days for drinking but he is careful to make sure he always has enough money for a drink even at the end of the pay period. Stuart drinks because it gives him something to look forward to, it gives him a plan: *“You have to buy the alcohol and find somewhere to sit and drink, or get your pay and go to the pub, it makes you feel better, numbs you and helps with sleep.”*

Usually he drinks alone it helps with his mood and *“things always look better when you have had one or two drinks.”*

Some occupations are basically filling time, Stuart walks a lot because walking is not just as a means to get somewhere; it actually gives you something to do in the day. Stuart walks across the city several times a week, visiting different places and observing the day-to-day happenings in the city. Walking is a purposeful activity; if it’s not too hot or wet being out and about can be entertaining. Alternatively, he can sit and read a book; provided he hasn’t lost his glasses he likes to have a book on the go. Occasionally he will take the chance to assemble screws at the Drop In Centre, it passes a couple of hours and gives him a bit of extra money especially on his off week. Another alternative pass time is going to the public library, especially when it hot and humid: *“I would probably go to the library, its air conditioned so you can loiter around there.”*

Stuart does not want to change his life, although living on the streets might be uncomfortable at times and the days can drag when you have no obligations, the alternatives are not attractive to him. He enjoys the sense of freedom he has, if he wants to sleep in a bed he could get one, but frankly he is quite content with the way things are at the moment. He doesn’t answer to anyone and he can please himself what he does from day-to-day. Drinking breaks the boredom and gives him something to look forward to.

8.5 Women with Children

Five women living with children were interviewed. Although the five women cannot be considered a representative sample of the entire family homelessness population in Townsville, they provided a consistent and in-depth understanding of the issues that lead to homelessness and the occupations that were considered important to maintain wellbeing whilst homeless. A brief outline of each participant is given below:

Fran is a 22 year old single mother of four children. She has a long-term boyfriend who also has one child. Although they do not live together for financial reasons they spend a lot of time in her home. Fran was living in temporary accommodation after the house she was renting was sold and she found rental agencies reluctant to house her with ‘so many children’. Her main occupations are her role as a mother, working as a sales rep, and spending time with her foster sister who also has a child.

Heidi is a 24 year old single mother with three children, the youngest of whom is in her custody, the older children are currently in care. After a series of moves including staying with friends, family and in cabins, she was provided with crisis accommodation and then permanent housing where she has been for 12 months. Her main occupations are being a mother and house cleaning.

Kate is a 23 year old single mother of two children aged three and 18 months and is currently living in emergency housing. She lived with her ex partner in Townsville until 12 months ago when they split up due to domestic violence. She left her housing department house after months of harassment and is anxious that her ex or his family doesn’t find out where they are living now. She is unlikely to be offered accommodation from the housing department again as she gave up what was deemed to be suitable accommodation to ensure her own safety.

Alex is a single mother of 2 children aged 9 years and 4 years. She had been living in crisis accommodation for 2 months. She had to leave her ‘secure’ home due to its sale. She was unable to find accommodation she could afford and had reluctantly lived with her mother for some months. Her main occupations are being a mother, part-time college study, looking for houses, and church.

Diane is a 26 year old married mother of two children aged 8 years and 4 years. She and her husband declared themselves bankrupt after her husband lost his well paid job and was unable to find equivalent work. Over a two year period their situation deteriorated until they were living in the car garage of Diane's mother's rental property. They moved into crisis accommodation and have since been provided with a more permanent rental home. Her main occupations are being a mother and wife, cleaning the house and spending time together as a family. She is unable to work because of the conditions of their bankruptcy.

The findings are reported below as two themes: Being homeless and Maintaining wellbeing through occupation as a mother, which comprises four sub-themes: Being a mother; Making a home; Managing your own stress; and Planning for a better future.

8.5.1 Being Homeless

When women with children experience homelessness they are compelled to keep going for the sake of the children, even if this jeopardises their own health. Coping with the situation and continuing to work towards something better is non-negotiable for the sake of the children.

"I just push through and hope for the best."

(Fran)

"Don't give up. At its weakest point you don't give up."

(Alex)

One woman had lost 15kgs and became very ill, due to going without food so her children could eat, while three of the women had histories of serious mental health issues and were terrified of the prospect that if they got ill they wouldn't be able to keep going:

"I have suffered from depression in the past, it's very hard not to slip back into it ... and it's not easy to deal with."

(Alex)

Therefore, wellbeing is closely associated with the health and happiness of their children rather than a personal perspective. Ensuring that their children are affected as little as possible and feel loved and cherished requires great effort. The women were driven by a need to create safety for the children above all else:

“Everything is for them. I don’t care if I don’t get anything for me as long as the kids got what they need.”

(Fran)

“They had to be happy – they could not know what was going on. I did not want my kids to feel the way I did. To have everything and then suddenly wake up one day and have nothing.”

(Diane)

Most of the women had experienced homelessness or disruptions in their security as children and this left its legacy in different ways. They knew firsthand how damaging these experiences were and therefore were sensitised to the changes they observed in the children. Some of the indicators of a loss of security experienced by children during homelessness were changes in sleep patterns, not being able to sleep in their own beds, difficult and uncharacteristic behaviour at school, clinginess, and the sense of loss of toys. It was clear for the mothers that whatever they were experiencing personally they needed to try to minimise the effect on the children and keep their lives as normal as possible during homelessness.

For two of the women becoming homeless affected the way they saw themselves as parents, their self image as competent parents was shaken and resulted in feelings of shame. The way they viewed themselves was through their children’s eyes, although the judgment they perceived was that of an adult:

“The feeling that you’ve let them down, like am I really good enough to be their mother since I am in emergency accommodation because it does have a stigma to it. And it’s not easy to deal with. I came from a good ... family and to end up down at this level.”

(Alex)

“I didn’t want them to see I had failed and have the kids pick on you because you are wearing the same clothes as yesterday and all that sort of stuff.”

(Diane)

8.5.2 Maintaining Wellbeing through Occupation as a Mother

Being a Good Mother

In order to maintain family wellbeing the women talked about a range of occupations that they engaged in. Again the infrequent mention of doing anything for themselves was striking; it was as if looking after yourself is at the expense of looking after the family. The most frequent occupations were those associated with motherhood:

“Being a good Mum; looking after my daughter, she’s a mummy’s girl and so we spend a lot of time together. I’m lucky because she is a happy child.”

(Heidi)

“Just basically keep on with my normal life as it is at the moment, trying to keep my children in a routine as much as possible, so that they have got a cushioning, so that they can at least fall back on their routine, that they know I am still there and things are still the same, that’s not going to change. And that gives them the sense of security even though they are not living where they were before.”

(Alex)

Diane commented:

“You know how you can get your hair done and that will cost \$150.00 I would rather spend the \$150.00 on taking my kids out to a cinema or to a zoo or something that we can all share together.” (Diane)

Spending time and staying together as a family was critical to being a good mother and keeping the family together:

“... love and the relationship within my family. I try and create a loving and secure environment, I am very strict within my disciplines, I don’t just let children wander the streets.”

(Alex)

“We would sleep in the car if we had to, I am not going to separate our little team, our team is what gets me through, cos we are happy that we are still together.”

(Diane)

Making a Home

Some of the occupations that the women discussed were associated with making a home. This was particularly important once they had more than temporary accommodation. Being in the crisis accommodation meant that they were often unable to set up the place as a home for their children. The two women that had settled into a more permanent place engaged in occupations that make a house into a home:

“So the first thing I asked is can we put pictures up, and he said go for gold! I didn’t worry about setting up any bedrooms I said let’s put the photos up on the wall.”

(Diane)

“I have got permanent housing now, it feels safe and it’s a place I can look after.”

(Heidi)

For the two that were still living in temporary and crisis accommodation, finding permanent housing was one of the main occupations. Getting and making a home for children was important to their wellbeing.

“Having a house that I know I am not going to get kicked out of in a hurry where the kids can be happy and they can have their pets. The kids want their animals, to have a house where the kids can have them.”

(Fran)

“To know that my children have a stable home, to have my own home actually, for me and the boys, somewhere they can always come and know it’s always going to be there. I believe that’s important for a child to have.”

(Alex)

Managing Your Own Stress

Each of the women identified occupations that allowed them to manage the stress they experienced. Despite the range of occupations discussed, each of the women recognised that the use of some occupations provided a sense of relief for them and allowed them to keep going despite the difficulties they experienced:

“I was stressing out too much, so I kept myself busy so I don’t have to think about what I have lost or what I have gained, I always had a routine, so I had control.”

(Diane)

“[On rests days I] lay down and watch TV, just relax, what ever’s on, so long as I can press the a button on the remote, I am happy. That’s my relaxing time. Or I get the kids to sleep and go to sleep as well.”

(Fran)

“I dance around the house, either that or study, or getting on the website, or talking to a close friend of mine about how I am feeling, about how my days gone so that it doesn’t build up.”

(Alex)

Planning for a Better Future

Even though the present situations may be bleak all of the women talked about the plan they had to improve their situation and to ensure a better future. Mothers hoped that in the future they would be able to stop being dependent on government benefits or do more than just scrape through financially from one week to the next. They were all making efforts to create better prospects for themselves. Heidi planned to go to the gym, get fit, lose weight and thereby build her confidence. She talked about getting rid of the negative things that have affected her life up until now. While the conditions of bankruptcy meant that Diane couldn’t work right now she looked forward to the time when she could return to work and have more

than a basic income again. Fran was already working as a sales rep but was paid poorly; her goal was to increase her earning potential:

“Anything that pays good money I don’t really mind so long as I have got the money to get off a government payment. To be able to look after the kids without the government’s help.”

Alex was determined to continue to study one day a week, because she had no job experience and hoped this would improve her prospects:

*“I want to try and do something that will improve my ability to get work. And to do something that **I want** to do as well.”*

The results from the five interviews with these women demonstrate that the presence of children create the motivation to keep going and to work towards a brighter future. Homelessness is experienced as stressful and lonely. These women fight to maintain secure and loving spaces for their children in the absence of permanent housing, whilst struggling with feelings of guilt and shame associated with not being a good provider. The difference between having a roof to sleep under and providing a loving home is evident in this study.

8.5.3 Collective Narrative – Julia

Julia is a 25 year old woman with 2 children aged 5 years and 2 years. Julia’s own childhood was disrupted by periods of foster care and she struggles to provide stability for her children since she lost the tenancy of her rental accommodation when it was sold. Through family emergency accommodation she has been staying in crisis accommodation and she is actively looking for more permanent housing.

For Julia her major occupation is keeping going, maintaining the routines of getting up, taking her son to school, preparing cheap meals on a tight budget and keeping the house clean. *“We walk to school every morning I take about half an hour, we walk from here to my foster sisters and then her and her boys walks with us to school, I love walking, the kids like walking.”*

Because she is living in crisis accommodation she keeps going hoping it will get better. Being single and a mother she has to keep going, but it's a struggle: *"It feels like you are always alone, like you were trying to bale everything on your own."*

Her role as a mother is what is most meaningful to her, she knows she is the one person who can protect her children from the reality of what is happening, she tries to make sure she is available for them, spends time cuddling them and playing with them and above everything tries to keep day-to-day life normal. She says it's important to *"the love and the relationship within my family. I try and create a loving and secure environment, I am very strict within my disciplines, I don't just let children wander the streets."*

Julia feels ashamed about being homeless and letting her kids down. Julia was very aware of the stigma of being homeless for herself and her children, *"I am in emergency accommodation and it does have a stigma to it. And it's not easy to deal with. I came from a good farming family and to end up down at this level."*

Finding a home is a major occupation, after completing housing department applications and registering with other agencies she continually watches the papers for suitable rentals, although most are far too expensive for her. She has to deal with young unsympathetic rental agency staff who thinks a single Mum with two children is a risky tenant:

"...to keep pursuing looking for a house, to keep up with my studies to keep being with my children and loving them because it's very hard sometimes. You feel like you are not being what you should be to your children and you are always worried that that changes their perceptions of you as a person. And it may not do, but you still worry about it because you are a mother."

When she gets a chance she tries to do something to help her relax, Julia realises she gets very stressed, and so to keep it together she needs to blob out occasionally, getting a DVD or listening to music can help, talking to friends is great but she has lost a lot of friends since becoming homeless:

“A lot of friends I have lost, I did have quite a few but over time they have all gone. One moved away, and another friend visits me every so often because she doesn’t get a lot of time with work and marriage. There are not a lot there any more compared to what there used to be.”

Julia has a plan for the future, she wants to do a course at TAFE, so she can eventually get work and get off the pension, right now she can’t start but she has been looking into the local possibilities and hopes if she gets a house she will be able to begin next semester. She wants a better future for herself and her kids.

8.6 Discussion

The themes outlined in this chapter, collective stories of non-Indigenous single male homelessness and family homelessness together with the preceding chapter on wellbeing in homelessness provide a body of evidence that supports the theoretical concept of an occupational perspective of health (Wilcock, 2006). Through exploring the occupations of both single males and women with children experiencing homelessness in Townsville, the findings illustrate how a personal sense of wellbeing is achieved and sustained through ‘dignified and meaningful participation in daily life’ (Pollard, Skellariou, & Kronenberg, 2009, p. 3). Despite the limited opportunities available and restricted access to socially valued occupations such as work, education and community citizenship, the study goes some way to understanding the relationships between occupational engagement and the wellbeing of people who are socially and materially disadvantaged.

This study of occupation has been challenged on the basis of its construction within dominant Western societies based on white, middle class ideals of individualism and empowerment and previous authors have extolled the need to explore occupation in the context of social systems and interactions (Iwama, 2007; Kantariz & Molineux, 2011). The findings included in Chapters 7 and 8 of this thesis draws specifically on the lived experience of people who have a tenuous position of social disadvantage within an Australian community, and who experience occupational injustice on a daily basis. These stories illustrate the link between occupation and wellbeing as complex, multifaceted and grounded in the unique understanding and worldviews of the individual. The concept of occupational wellbeing has

been used to explore the ways in which people who are homeless orchestrate their occupational lives to meet their relative needs (Doble & Santha, 2008).

It is important to note that wellbeing in this research has been defined by the participants (see Chapter 7), providing an original perspective summarised in four themes: keeping safe; being positive and feeling good; connecting with others; and staying human and normal. As such, this study offers a unique and socially situated perspective of wellbeing and the occupations that support those that are oppressed and poor (Hammell, 2008). Clearly the study demonstrates that occupational wellbeing is experienced differently by different people and in composing two collective narratives of single male homelessness and women with children some of the most obvious differences have been demonstrated. However, within these groups individual differences exist and are acknowledged where possible by drawing on the quotes of participants.

Previous authors have confirmed the heterogeneity of the homeless population and reported subjectivity on the experience of homelessness related to context, cultural, age, class and gender (Hodgetts et al., 2007; Zufferey, 2009; Zuffrey & Chung, 2006). Stigma associated with homelessness influences a person's sense of identity and while the single men who had experienced homelessness for longer periods may have internalised and adopted a 'homeless identity' (Harnett & Johnson, 2008), for the women and children, stigma produces feelings of shame and guilt that drives an inner resolve to find homes for their children (Fingeld-Connett, 2010). It is within the social context of marginalisation that people experiencing homelessness strive to achieve wellbeing through the occupations that are available to them. Notwithstanding issues of justice, which will be addressed in Chapter 11, the link between occupation and wellbeing is affirmed in this study and will be discussed in this section under the framework of the four dimensions: doing, being, becoming and belonging (Hammell, 2004; Wilcock, 2006).

8.6.1 Occupational Wellbeing through 'Doing'

The concept of 'doing' as a dimension of occupational wellbeing is understood in the context of a theoretical drive of humans to be active in order to survive and flourish (Dunton, 1919, Kantarzis & Molineux, 2011; Wilcock, 2006). In my analysis of published articles on the dimensions of occupation (see Chapter 1) 'doing' was defined as purposeful, goal oriented actions including sleep that meet one's physical, mental and social needs through routines

and balance. Within occupational therapy models, doing is related to occupational performance or observable actions including self-care, productivity, leisure and rest to meet one's personal needs. The stories of both single males and women with children illustrate how occupational wellbeing is achieved through doing in order to survive and maintain safety during homelessness. In both stories security and survival needs are met through finding a place to sleep, or a permanent home, getting adequate food, keeping clean and having a routine.

The doing dimension of occupation is based on concepts of individual agency and capabilities, suggesting that people have and make choices to engage in occupations that they value and utilise their skills to achieve lives of meaning. Understanding doing occupation of people experiencing homelessness requires further exploration of the concept of meaning within the context of social marginalisation. The single men placed significant meaning on their freedom to live independent of others and without obligation and commitments. Despite their obvious reliance on government pensions and homeless services they constructed their lives as autonomous individuals who do what is necessary to survive. In contrast, the women with children prioritised their occupation around the collective wellbeing of their children and of the family unit. They constructed meaning directly from their role of mothers and providers of love and protection for the children in their care. Mothering occupations are central to the identity and wellbeing of women who are homeless, similarly findings have previously identified in mothers with disabilities (Farber, 2004). These two very different constructions of meaning determined the sorts of occupations engaged in and valued.

8.6.2 Occupational Wellbeing through 'Being'

The concept of 'being' within the occupation science literature is linked with being true to one's self and discovering one's own essential nature (Wilcock, 1999). This is arguably the most elusive of the four dimensions as it is not visible to the observer, being an inner experience of the self, experienced in the present and achieved through reflection and introspection (Hammell, 2004; Lyons, Orozovic, Davis, & Newman, 2002; Park Lala & Kinsella, 2011). Being is central to meaning and shaped by our culture, gives rise to doing and valuing occupations that affirm our concept of self (Watson, 2006). Within this study the concept of being was evident in occupations that affirmed knowledge and control of self, and provided relief from the stress of day-to-day survival.

For the single men, wellbeing was achieved through the conscious application of cognitive strategies, described as mind management that confirmed knowledge and both an understanding and a sense of control of their own lives. Although these strategies were unreligious in nature they confirmed a personal philosophy and inner knowledge that closely resembled an individual spirituality. The findings suggest that occupational scientists need to explore the concept of being in relation to wellbeing as a belief system or set of values that underpins occupations. For some of the men a sense of wellbeing was also achieved through the use of alcohol, drinking also alters ones experience of self and inhibits anxieties and worries providing a greater sense of control and capacity to cope. The effects of intoxication and addictions have previously been recognised as giving meaning to life and wellbeing (Kiepek & Magalhães, 2011). This study suggests that for people who are homeless, drinking alcohol addresses occupational wellbeing through the dimension of being. For the women with children being occupations provided a sense of wellbeing by allowing time out and relaxation. There was a sense that such opportunities were rarely available and difficult to prioritise in the daily routines required to survive, and that participants needed encouragement to take time for themselves.

8.6.3 Occupational Wellbeing through 'Belonging'

The dimension of 'belonging' was originally added to the occupation literature in recognition of the contribution that social connectedness, support and friendships made to wellbeing (Hammell, 2004). Belonging implies more than social interaction with others, and suggests a sense of obligation and commitment to other people, and a mutual benefit for self and others achieved through relationships. This research demonstrates that single men valued friendships but placed limits on their degree of involvement with others in order to maintain freedom and autonomy. Regular interaction with others was perceived as a necessity and a protective factor in terms of mental wellbeing; having someone to chat to or have a laugh with certainly brightens the day and raises moods. The relationships discussed were at the level of social interactions and camaraderie and there was no indication of deeper relationships of stronger emotional bonds between single men and anybody else.

Conversely, the narrative of women with children demonstrated the importance of very close relationships between the women and their children, and for some women their partners. The family bonds that had been tested through the homeless experience were actively being rebuilt through the family occupations, home making and maintaining. Being together as a

family provides evidence of belonging for the women. For many this feeling of belonging was clearly absent in their own childhoods or in their current relationship with parents and siblings, and increased the importance of belonging together as a family in the current situation. These two very different interpretations of occupational wellbeing through belonging and social connectedness suggest that different people have different occupational needs related to their social and cultural context and life meaning.

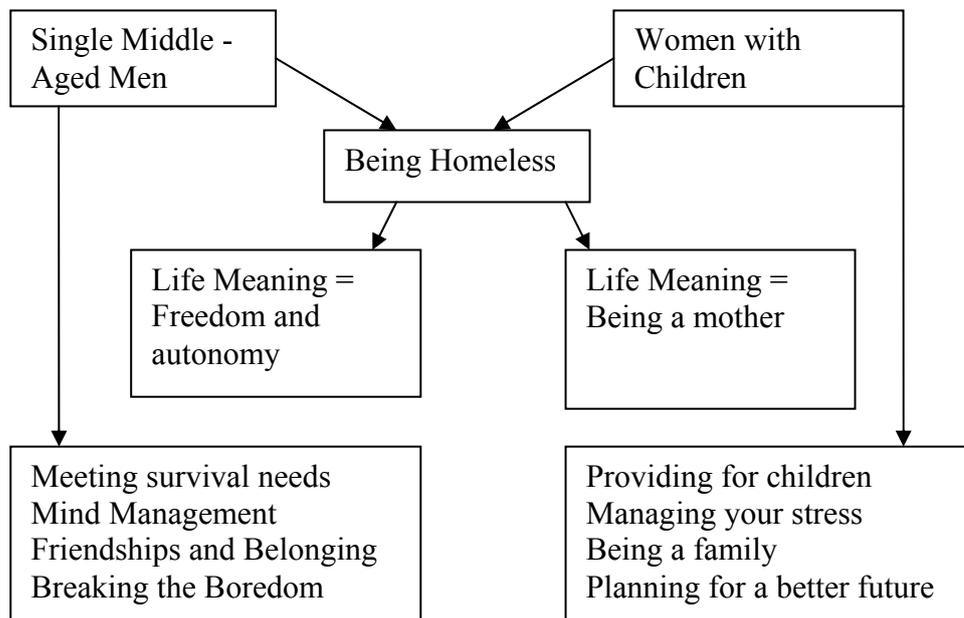
8.6.4 Occupational Wellbeing through 'Becoming'

The 'becoming' dimension is particularly evident in the narratives of the women with children and was directly related to their dreams and hopes for a different future for themselves and their children. For the women, becoming occupations focused on getting a permanent home, education and training opportunities to increase future employment prospects and creating better opportunities for their children. The presence of children and the drive to protect them sustained a future focus even when the present situation was very stressful. It is relevant that all the women were living in self contained accommodation and were therefore still embedded in community life and community ideals.

This was a different situation for the single men living on the streets or in temporary housing or hostels. For these men there was no future focus or sense of becoming in their stories, which were centred on living for the day, keeping going and surviving. The occupations of single men experiencing homelessness supported the need to fill time and break the boredom, but did not include visions of a different future. Short-term plans might be made tentatively such as moving to another part of the country, or visiting family but these could be easily changed if the circumstances required. The absence of becoming occupations suggests that when the focus is primarily on survival and coping day-to-day there is little impetus for making plans or making efforts towards a different way of living. Although some individuals experienced relatively high levels of wellbeing during homelessness, this was achieved by being content with what they had, rather than being hopeful for a better future. This finding suggests that without security of a home of sorts, people experience little hope for a different future and therefore do not engage in occupations that fit with the dimension of becoming.

Figure 8.3 shows the results and discussion from this chapter.

Figure 8.3 Collective stories from homeless single middle-aged men and women with children in Townsville



8.7 Conclusion

Comparisons between these two nested cases highlight the need to address occupational injustice in relation to life meaning in order to achieve wellbeing. The stigma of homelessness serves to separate communities and marginalise those that have no home, this is clearly more evident in the narratives of single men who are homeless than in the narratives of the women with children in this study. Opportunities to meet individual occupational needs are supported through structural and political factors such as economy, policy and cultural values. These structural factors are operationalised through programs and institutions such as health systems, income support, housing, employment, education and community facilities. The goal of ‘occupationally just’ societies is to establish policies and institutions that work towards fair and equitable benefit for all individuals through occupational opportunities that maximise the potential of all individuals (Whiteford & Townsend, 2011).

Men lack opportunities to engage in socially valued occupations and to achieve wellbeing through permanent housing and employment and therefore they orchestrate their lives towards survival and coping strategies, with little hope for a different future. Wellbeing is achieved through occupations that assist them to manage their situation and find contentment with it rather than through investment in a change for the future. Faced with occupational

deprivation arising from poverty and marginalisation single men draw their focus inward to maintain control, they live almost entirely in the present, withdraw from important relationships and establish minimal friendships.

Opportunities to engage in community in meaningful ways that reinforce citizenship and encourage relationships between those that are housed and those that are not based on occupation will increase a sense of hope. Social enterprises, supported employment, community program such as street soccer, community gardens and men's sheds provide evidence of the value of such opportunities. Programs that focus entirely on housing without consideration of other aspects of social inclusion may find single men reluctant to engage. Increasing programs that emphasise social participation and provide financial and social rewards for single men experiencing homelessness will encourage a sense of hope and visions for a different future.

Conversely for the women with children the study demonstrates the importance of ensuring permanent housing to provide security for families. For single mothers this study highlights an aspect of marginalisation and discrimination that exists in a strong housing market, with limited public and affordable housing options. Women became homeless when private landlords decide to sell properties and housing instability becomes a reality. The need for more affordable and secure public housing for families in Townsville is confirmed. Once housed and in the context of a permanent home, women with children require opportunities to engage in education and employment to improve their situation. Issues of child care and transport limit women from taking up the opportunities available and may not be readily affordable. From a policy perspective such assistance is funded through tax incentives for women who are in the workforce, similar incentives need to be available for women to take steps towards employment.

The need for stress relief and time out for women experiencing homelessness is evident in the results related to 'being' as a dimension of occupational wellbeing. Marginalisation and poverty result in limited opportunities to relax and unwind to cope with the stresses of being a young mother in difficult circumstances. Opportunities for time out are limited by lack of childcare and transport. Programs aimed at stress management that provide opportunities to meet with other women in similar situations and in the housed community may provide a first step to social inclusion and occupational justice (Helfrich et al., 2006). Although the case for

occupational justice is less clear when women are in crisis accommodation the shame they experience and the loss of self-esteem and supportive friendships demonstrate that these women continue to live on the margins of communities rather than actively engaged in them.

8.8 Summary

The findings for two nested cases, single males and women with children, demonstrate the differences that exist between people within the homeless population. Occupational deprivation was evident in both narratives, due to marginalisation and poverty restricting opportunities to engage in occupations that are socially valued. This chapter illustrates that occupational justice is not achieved by each person being able to do the same things, rather occupational justice is achieved by ensuring the capacity and opportunity for individuals to meet their individual occupational needs (Stadnyk et al., 2010; Wilcock, 2006). The implications of these finding will be discussed in more detail in Chapter 11.

Chapter 9

‘Being with the mob’: Understanding occupational justice through a case study of Indigenous homelessness in Townsville

This chapter draws on the data from the 14 Indigenous participants in the study and explores the link between the daily occupations and wellbeing of Indigenous people experiencing homelessness in Townsville. Similar data collection and analysis methods were used as described previously. Constant comparative analysis of the data resulted in the emergence of four themes: ‘Being with the mob’ and drinking together; Time on my own – reflecting on culture; Marginalisation and trouble with the law; and Basic survival. The results are also presented as a collective narrative, to demonstrate the subjective perceptions of the participants. The meanings of occupations are contextualised by the history of dispossession and ongoing disadvantage experienced by Indigenous Australians. The findings demonstrate the extent of occupational injustice experienced by Indigenous people who are homeless. The results show how restricted opportunities to engage in health promoting occupations have increased participants dependency on services, addictive substances and ‘being with the mob’ to meet basic human needs. Racism and dispossession have resulted in spiritual homelessness and occupational alienation for many Indigenous people in the parks.

This chapter is presented as a separate chapter, highlighting the literature and statistics related to Indigenous homelessness in Australia and including a more thorough discussion in relation to occupational justice. Although the high representation of minority groups and indigenous peoples with the homeless population is recognised, internationally there are few studies that specifically recognise the cultural aspects of homelessness or identifies the significance of colonisation and racism to the marginalisation of people experiencing homelessness. This aspect of the study as outlined in this chapter therefore makes a significant contribution to the literature.

Further, the issue of culture and diversity in occupational therapy and in the theoretical development of occupational science has recently been recognised (Iwama, 2010). The

publication of a special issue in the *Australian Occupational Therapy Journal* on Aboriginal and Torres Strait Islander health and Occupational Therapy in January 2011 marks a significant development within the profession in Australia to develop an evidence base specifically for interventions with Indigenous Australians. There is a new era within the profession that is characterised by an understanding that occupation may be experienced differently by people of different cultures and that is likely to lead to the continued development of alternative models of practice. In relation to this thesis, Chapter 9 gives a voice to the story of Indigenous homelessness from an occupational justice perspective.

9.1 Indigenous Homelessness

Indigenous homelessness is regarded as part of a larger sociological phenomenon that is gaining considerable attention from researchers and politicians nationally and internationally (Commonwealth of Australia, 2008a). Rates of Indigenous homelessness in Australia are higher than for the rest of the population and the available statistics based on census data are generally acknowledged to under count the proportion of Indigenous people across Australia (Chamberlain & MacKenzie, 2008). Aboriginal and Torres Strait Islanders comprise only 2.4% of the general population, however 10% of the national homeless population and 17% of Supported Accommodation Assistance Program (SAAP) clients across the country identify as Aboriginal and Torres Strait Islanders (Department of Communities, 2010; Homelessness Taskforce, 2008). The number of people experiencing homelessness in Queensland increased by 9% between 2001 and 2006 with an increase of 230 Indigenous homeless. In Queensland the rate of Indigenous homelessness at 159 per 10,000 is almost three times higher than the rate for non-Indigenous homelessness, which is at 65 per 10,000 (Chamberlain & MacKenzie, 2008). Distribution of Indigenous homeless people is higher in rural areas (22%) and in remote areas (68%) (Commonwealth of Australia, 2006). Official estimates of the numbers of homeless people, based on the 2006 census data, suggests there are 1,329 people experiencing homelessness in Townsville on any one night, of which approximately 155 are of Aboriginal or Torres Strait Islander descent (Chamberlain & MacKenzie, 2008).

9.1.1 Defining Indigenous homelessness

The first major report on Indigenous homelessness to the Australian Government acknowledges the significance of ‘the historical legacy of colonisation on Indigenous people, prevailing cultural beliefs and norms regarding the home and family and other traditional

practices and lifestyles' (Keys Young, 1998, p. iv) to Aboriginal and Torres Strait Islanders homelessness. Based on an extensive study across Australia, including Townsville, this report identified five distinct forms of Indigenous homelessness including:

- spiritual homelessness (separation from traditional land or from family)
- overcrowding (a hidden form of homelessness)
- relocation and transient homelessness
- escaping from an unsafe or unstable home (mainly women and young people)
- lack of access to any stable shelter i.e. 'nowhere to go'.

Further reports on Indigenous homelessness have been conducted in Victoria (Berry, MacKenzie, Briskman, & Ngwenya, 2001), in inner city Sydney (Memmott & Chambers, 2005) and in NSW and Western Australia (Birdsall-Jones & Shaw, 2008) and have informed government policy through their various recommendations. Memmott, Long, Chambers and Spring (2003) identified that Indigenous public place dwellers comprises a core group of people who are long-term or chronically and voluntarily homeless; and others who have housing and join the core group briefly for socialising and drinking, or for longer periods and are uncertain when they will return to their own homes. Some homeless individuals are highly mobile and have been termed 'dysfunctional', moving between public place dwelling and private residences where they can spend a night or two but having no place of their own. The concept of 'dysfunctional' itinerancy is separated from social mobility caused by people staying with family members due to social and cultural patterns of behaviour, because dysfunctional mobility is a result of dysfunctional behaviours, including alcohol and drug abuse (Birdsall & Shaw, 2008; Memmott et al., 2003).

Spiritual homelessness is not exclusive of the above, but provides a cultural explanation of homelessness from the perspective of home equating to connection with country and homelessness being a question of identity (Memmott et al., 2003). Spiritual homelessness is a direct result of the dispossession experienced by Indigenous people forcibly removed from country and kinship connection as a result of colonisation and assimilation policies of previous Australian Governments. Such displacement has a negative effect on physical and psychological health, which is not mediated by the passage of time:

The more temporally distant is the connection to country in terms of generations, the more inaccessible seem to be the answers about self-identity and 'home' (country), which in turn may have a stressful impact on an individual's sense of spiritual health (Memcott et al., 2003).

Defining Indigenous homelessness recognises that public place dwelling by Indigenous people is complex and at least in part a result of spiritual homelessness wherein 'one's understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused' (Commonwealth of Australia, 2006, p. 20). The concept of spiritual homelessness contradicts the belief that homelessness is a cultural choice and supports the rights of Indigenous people to maintain connections with their cultural land. The legitimacy and right to public place living by Indigenous homeless people remains contentious in most communities, as it is balanced against the rights of others in the community to enjoy public facilities without fear or intimidation.

9.1.2 Indigenous Homelessness in Townsville

Indigenous homelessness is arguably more visible within the local Townsville community than other groups of the homeless population. Locally, the term 'Parkies' is used to describe groups of Indigenous people who spend time sitting together in public places, such as parks and gardens, in and around the central city area. Commonly, these groups of individuals are seen as social nuisances, who spend the day drinking alcohol and fighting among themselves or with others. Negative public perceptions of Indigenous public place dwellers is informed by the local media and city councillors, of every political persuasion, who promulgate the idea that having homeless people in public places is disgraceful and needs to be stopped.

A report to the Australian Housing and Research Institute (AHURI) specifically identifies a study of 'Parkies' in Townsville as one of a number of groups of Indigenous public place dwellers across the country (Memcott, Long, Chambers, & Spring, 2003). Twelve different Indigenous camping sites were reported to exist in Townsville with the majority of 'Parkies' from Palm Island and others from the Northern Territory, Mornington Island, Mt Isa, Doomadgee, the Gulf, the Cape, Cherbourg, Brisbane and the Torres Strait (Qld, DATSIP 2003 cited by Memcott et al., 2003). See Chapter 1 for more details regarding the history of Townsville and its Indigenous population.

9.1.3 National and Local Responses to Indigenous Homelessness

The issue of Aboriginal and Torres Strait Islander homelessness has been the subject of a number of national forums and reports, which identify the complexity of social issues that has resulted in disproportionately higher rates of Indigenous homelessness compared with non-Indigenous homelessness. One of the recommendations from the 2003 National Indigenous Housing Forum was that:

All tiers of government accept that living in public spaces constitutes a legitimate lifestyle choice for some Aboriginal and Torres Strait Islander people and that the planning and development of programs and policies should reflect this view (Commonwealth of Australia, 2006, p.5).

However, in the 2006 report on Indigenous Homelessness the rights of people to live in public spaces were clearly being balanced with ‘the priority of the wider community to move people on or at least out of sight’ (Commonwealth of Australia, 2006, p.22). This was especially noted in areas of Far North Queensland where tourism is essential to the economy of the region and contested the use of public space by Indigenous people. The use of legal ‘move on’ powers by police was noted to be experienced as harassment. There was concern regarding the design and provision of services that could reach people living in public places as well as the health and safety of children and young people (Commonwealth of Australia, 2006)

As a contribution to the aim of this study; to explore the link between the occupations of homeless people who live in Townsville and their perceptions of wellbeing, this chapter focuses on the meaning of the daily occupations Indigenous homeless people choose to engage in and the significance of these choices to their overall satisfaction with life. Concepts about Indigenous homelessness and wellbeing are significant to the theoretical basis for the study. The importance of spiritual connection with country to Indigenous wellbeing is acknowledged (Ganesharajah, 2009).

9.2 Methodological Issues

The methods used in this study have previously been described in Chapter 5 as part of an overall case study of homelessness in Townsville. Research methods comprised naturalistic observations, in-depth interviews with Indigenous people living in public places, a review of

documentation, and data gathering from local government and non-government service providers. Collectively these research methods provide a comprehensive and triangulated study of Indigenous homelessness in Townsville as a complex, ‘unique and bounded system’ (Stake, 2005, p. 444). In researching Indigenous homelessness in Townsville, emphasis is given to the evolving and socio-historical characteristics of the *case* (Harvey, 2009, p. 29). The complexity of interactions, agency and social meanings both within the case and between Indigenous homelessness and the wider context of homelessness in Australia and Indigenous wellbeing is central to this study (Mjøset, 2009; Stake, 2005).

This research is at least in part Indigenous in its goal to make space for Indigenous stories to be told ethically and sensitively from the perspective of Indigenous knowledge (Tuhiwai Smith, 2005). Appreciating the history and potential of research as a colonizing force and oppression (Bishop, 2005; Rigney, 1999) the research design, researchers conduct and the final reporting of this research has been tested and guided by the input of a number of cultural advisors along the way. Cultural mentors provide cultural insights, perspectives and interpretations of the research process and data. Through the course of this project I have engaged with three cultural mentors who collectively have provided invaluable support and guidance to the collection and interpretation of interview data (see Chapter 4).

9.2.1 Data Collection

To explore the case of Indigenous homelessness in Townsville, data was collected at three different locations known to be frequented by Indigenous people experiencing homelessness. The Reverend Charles Harris Diversionary Centre is an overnight hostel facility on the outskirts of the Townsville city area, in bush-like landscape. The Drop In Centre is an established drop in centre facility located in a public park, close to the city centre. Happy Valley is a small Indigenous settlement or town camp on the outskirts of the city bounded by common land and has no permanent housing structures. These sites are described in detail in Chapter 4.

With the exception of Happy Valley I spent many hours visiting the locations to observe and develop relationships with individuals and staff. Extensive journaling of these visits and reflections on observation formed the basis of the data collection, prior to interviews. At Happy Valley, prolonged periods of observation were not appropriate and access was always negotiated through culturally appropriate and trusted cultural mentor who approached the

individuals thought appropriate to interview, on behalf of the researcher. Following three visits to Happy Valley, cultural mentors continued to provide support to the researcher throughout the analysis and reporting phase of the study.

Interviews were conducted with selected participants over a period of two years. As stated in Chapter 5, interviews were open-ended, conversational and loosely directed to obtain information on the connection between occupation and wellbeing. Purposive sampling aimed to gain rich data from a cross section of the Indigenous homeless population in Townsville. Participants were individuals who had experienced prolonged periods of homelessness, aged between 25 and 60 years, were known to be regular users of services, were able and willing to communicate their opinions to the researcher, and expressed an interest in doing so prior to the interview. All interviews were transcribed verbatim and de-identified. All participants were allocated a pseudonym for the purposes of reporting the findings (see Chapter 5 for more details on methods).

9.2.2 Data Analysis

Transcripts of the interviews and selected journal entries formed the basis of data, which was analysed using a constant comparative method. Initial coding of the data identified a range of occupations in which participants engaged in their day-to-day lives. During the first phase of the analysis, the occupations identified by participants were manually coded and grouped together under a number of headings. The second phase of the analysis aimed to interpret the meaning of occupations as it related to the experience of wellbeing. This allowed for comparisons between interviews and journal entries to be made and resulted in the emergence of four key themes. These themes are illustrated in a collective narrative in which aspects of individual participants have been melded together as a way to communicate the findings in a personalised way. At the end of this chapter a second vignette of an Indigenous woman living on the streets has been included to give voice to a different perspective of homelessness. As there were only four Indigenous women in the study, the perspective of Indigenous women experiencing homelessness is somewhat obscured. I have included this vignette to highlight the specific issues of caring for self and others experienced by Indigenous women. Rather than reporting the findings academically as separate from the lives of individuals we hope to give voice to the complexity of how Indigenous people experience homelessness in Townsville.

9.3 Results

In total, 20 interviews were conducted with 14 Indigenous participants, four women and ten men. Demographic information and the main occupations of each participant, identified by a pseudonym, are listed in Table 9.1.

Table 9.1 Demographic and Occupational Data

Name	Age	Dwelling	Occupations Now	Previous Occupations
Alan	37	Unit	Work, meals, washing, yarning	Worked on stations
Chad (x2)	40's	Unit	Park cleaning, art, cannabis	Worked as builder
Greg (x4)	42	Street	Painting, drinking, the mob, avoiding Police,	10 year relationship
Jack	30's	Unit	Support system	Mining, prison
Mick (x 3)	49	Street	Drinking and drugs, art, music,	Sports, church, AA
Neil	40	Street	Talking to elders, fishing	Alcohol, father, prison
Pete	54	Street	Spending time alone, walking, painting, thinking	Boat skipper, father
Stan	30's	Street	Safety, being with others	Unknown
Tom	50's	Street	Alcohol and work	Fisherman, fruit picking, council work
William	40's	Happy Valley	Art, music	Unknown
Lisa	40's	Street	Drinking, clothes, alcohol	Relationship with partner, mother
Ruth	48	Street	Getting a place	
Ulna	30's	Street	Meals, art, getting Money, looking after elders,	Drinking,
Yvette	40's	Happy valley	Home making, gardening	Homeless, alcohol, mother

9.3.1 'Being with the Mob' and Drinking Together

The most frequently mentioned and often initial occupation identified by Indigenous participants was spending time with others who were considered to be family or 'being with the mob'. During the daytime people congregate in groups and sit together and yarn. The social aspect brings about a sense of togetherness and belonging, or a kind of family. Being part of the mob means that you are accepted, without question, and this provides a sharp contrast to the experience of social exclusion and marginalisation experienced by homeless people:

"I am allowed to sit down and have a yarn."

(Alan)

“Being with my brothers and sisters is what counts, they might be lost, being around them just makes you, you have your laughs, you have really good laughs.”

(Stan)

“If they ever take these people away from me I will die too, we grew up together on Palm, we are all different tribes but we are all the same. If they take this mob away from me I will die, just their faces, how we talk, and my land...”

(Mick)

“We haven’t got a lot but the most important thing we are together, we are together as a family, we are happy.”

(Stan)

The occupation of ‘being with the mob’ frequently includes drinking alcohol and using other addictive substances together. Sharing resources and each taking a turn to purchase alcohol is one of the conditions of being in the group and this indebtedness contributes to the sense of belonging and obligation to each other. Even when the drinking turns into fighting, this sense of belonging remains constant:

“Sometimes we drink and get chased around by police, but we are still one mob, family. It don’t matter if we have differences and carry on a bit silly some times because society turns in on us, it seems a bit like that because they took away our rights and our homes and painting and such things like that, and we don’t really have that culture anymore to keep our things going.”

(Chad)

“We drank together we slept together and we ate together you know, and we might have our disagreements but that’s a part of drinking you can get like that with anybody you know. It’s a part of life you got to learn to accept that.”

(Stan)

There is camaraderie within the mob, the sense of us against them, and the presence of elders in the group, provides both belonging and identity. For many being accepted into the mob and drinking with them as youths provided an initiation into their current homeless lives:

“I wasn’t born like this, I wasn’t taught to be an alcoholic, but I learnt, I knocked about with the wrong crowd. Much older people than me and now...now I am a chronic alcoholic and a drug addict.”

(Mick)

“So when I got the opportunity I used to drop back into the park. Started talking to the old people and showed me the ropes of the streets, and the rules, what we are supposed to be doing and what we was not supposed to be doing.”

(Ulna)

Similarly being part of the mob provides a certain level of respect from others who look up to you, for guidance or help you to survive:

“Hang around the rest of the ‘Parkies’ and drink along with them. We all mix together. I have got a lot of relations that call me Aunty. A lot of nieces that call me aunty and they have respect for me, too.”

(Lisa)

“Some of them ... but they need more attention than me, especially the elderly. I can’t back answer the elders, there isn’t always going to be someone there for them, even though they have nothing to eat, and when they really want to go the (Diversionary Centre) I get someone to come and pick them up.”

(Ulna)

9.3.2 Time on my Own – Reflecting on Culture

In contrast to spending time with the mob a number of participants talked about the importance of spending time on their own, away from others. There is a constant pressure from society and from being with a group of people, and so time spent alone was frequently associated with being able to think. Participants chose to spend time alone to provide a break and to look after themselves:

“I come here for a rest and a feed and a bath and then I go back to the park.”

(Mick)

“I have a walk down the strand, good too ... I do it on my own, like I always say, keep my mind occupied.”

(Pete)

“When I used to drink and that, I didn’t have time for that, to relax and all that, I used to just to sleep and no blanket or nothing, didn’t have time to think for myself.”

(Ulna)

There is a conflict between spending time in the parks with others and finding another location that is more relaxing. The surroundings and the locations are chosen because of the sense of peace that is associated with them:

“Well I don’t think I can really survive in town, that’s why I come out here, sometimes I walk all the way out to [outer suburb], I’m right when I’m out there.”

(Tom)

“I go to the beach, that’s where I have always go, so I can be with myself, keep my mind occupied ... Better than listening to those other fella’s when they are drunk, they put my mind off.”

(Pete)

“But when I had enough is enough, I just go and camp in the bush.”

(Jack)

Having time to think and being away from the pressure of the parks appeared to be a spiritual occupation that allowed for connection with culture and country. Through this process people felt they could recover and find meaning for themselves. For one participant he would regularly go to visit elders in an older persons’ facility, he was well known to staff there and enjoyed just talking to the elders:

“I go to [older persons home] and talk to the elders there, have a chuckle with them.”

(Neil)

A number of participants were involved in an Art Program at the Drop In Centre or at the Diversionary Centre. Through these programs they were discovering skills and a positive experience that was meaningful from a cultural perspective. Painting is essentially something you do alone, it requires concentration, decision making and skill and those that talked about their painting gave a clear indication of how meaningful it was for them in relation to their wellbeing:

“I love painting, since I was nineteen, ... it’s something good for me, it’s one thing I am good at, painting.”

(Pete)

“They would rather I was doing this (painting) than being a public nuisance everywhere, so I have got other things to do.”

(Chad)

“That painting it keeps me occupied, and I am proud of what I do, the painting. It means a lot to me, even my art – it gives me a lift every time I sit down and paint, it’s in my blood you know.”

(Mick)

Occupations that provide time to think and places to be alone and to recover from the pressure of homelessness brought a sense of peace and identity. These occupations were culturally meaningful and relevant to Indigenous people.

9.3.3 Marginalisation and Trouble with the Law

The marginalisation of homeless people has been recognised previously (Melnitzer, 2007) and underpins the importance of social inclusion as a means to tackle chronic homelessness and to increase social capital (Vinson, 2009). For Indigenous people experiencing homelessness, being discriminated against because of homelessness compounds experiences of racism and disadvantage experienced throughout life:

“And they see us in the park and call us bludgers and alcoholics. They don’t know why most of us [are] there.”

(Mick)

“That’s why half the time they drink themselves silly sometimes, because they have got nothing to live for.”

(Chad)

The participants in this study made clear connections between their homeless way of life, spending time in the parks with an overwhelming sense of loss experienced as a result of dispossession and colonisation. They have experienced discrimination in multiple ways throughout their lives, at school, in a lack of work opportunities and in dealing with authorities. This continues to be their reality whenever they have dealings with the police, as these encounters reinforce the view that they and their group are unacceptable in Townsville society. For these participants it is the experience of marginalisation that results in trouble with the police and inevitably punishment. The participants expressed no sense of personal responsibility for the actions that led to police action, and no blame was attributed to the police for doing their job. Participants talked openly of the situations that resulted in fines and imprisonment, as a symptom of being marginalised by the community. They experienced the law as unhelpful, generally making their lives more difficult, but beyond any anyone’s control:

“They just don’t like us having a good time by ourselves, without calling the coppers around and upsetting the whole thing and make us into criminals, and let real criminals get away.”

(Chad)

“People might say you are doing something wrong, but why don’t you do something about it, help us, don’t lock us up because if you lock us up we are still going to go back there. You are not going to get rid of us.”

(Stan)

“The other night I got locked up I had a warrant out on me, and I forgot [to appear in court] and I forgot.”

(Lisa)

“I always got in trouble because I stood up for myself, with the police and with other people, and with the police I was always getting locked up. I always was taught to stand up for myself. I don’t go looking for trouble but it follows me.”

(Mick)

A cycle of marginalisation and criminalisation was commonly described as a downward spiral process that leads to more drinking and less engagement with community values. The futility of this spiralling process was apparent in the interviews and engendered feelings of hopelessness and despair. Some participants articulated the need for opportunities to engage in community in more constructive ways. While recognising the need for help, it was unclear whether the individuals wanted help themselves or whether they believed others would benefit from it:

“That’s why they live on the street, but the thing is give them some work.”

(Jack)

“Us Aboriginal people we need more help, you know what I mean, like understanding various things, like housing, jobs, there’s not much jobs, we need things for us to keep our minds occupied.”

(Lisa)

9.3.4 Basic Survival

Getting Food

Getting food is one of the most basic occupations for all people living on the streets. This involves going to the Drop In Centre for breakfast and lunch or going to the Diversionary Centre for dinner and breakfast. Homeless people who are on the street in the evening or at the weekend when the Drop In Centre isn’t open, have to use other methods to get food with limited funds:

“...like on the weekends you can’t find a meal for the weekends. It’s very, very hard to get meals, because we haven’t got money you know.”

(Stan)

“You go out there and buy a few food things; and there goes twenty buck for a loaf of bread, some meat and butter and that about fifteen bucks worth already gone. You hardly get any change out of twenty bucks.”

(Chad)

If money is not available other options may be resorted to although there may be consequences to stealing food:

“Years ago I used to get pizza from the bin, we used to phone up and make out I was going to pick it up but then wait out the back until they throw all the hot pizza’s away and then we go and get it.”

(Ulna)

“They go around get anything they can get their hands on (food) and get in more trouble for that.”

(Chad)

Finding a place to sleep

Although Indigenous people are frequently seen together in groups during the day, at night time there is greater safety in being alone. Many participants talked about the importance of finding somewhere safe to stay for the night:

“They go to different places, they never go to one place, and when the sun sets they all move on, and you don’t see them till about, well whenever, you know, and then they’ve sobered up, that’s that then and you don’t ask them where they slept because you don’t want to say that, because you don’t want a mob coming to you.”

(Stan)

“I usually find places where nobody can find me. I move from different areas to the next area until I find a good spot.”

(Ulna)

“I have to have my sleep, and I always watching out for the other people ‘cos they steal, they steal my knapsack.”

(Pete)

For many Indigenous people finding a place to sleep on the streets is fraught with difficulties. The risk of being seen either by drunks and thieves or by the police makes sleeping difficult and most people talk about having only a few hours sleep at night. Participants were never asked to disclose the specific locations where they sleep but some volunteered information about the places they sleep in:

“I ended up camping out in the causeway and all that for so many years.”

(Chad)

“I have long-grassed it, I am kind of from up the Top End, too you know, but I’ve got houses I can sleep in if I really want to but when I had enough is enough, I just go and camp in the bush.”

(Jack)

“I go and sleep there (names Hostel) sometimes for \$24 a night, air conditioning, own shower, toilet, I like to really live there but the rates a bit high, only get about \$580 on a pension.”

(Mick)

“It’s like you can’t sleep in the parks, well you can until the police come up, then they will move you, so there places that no one is living in, you go there, its like squatting, it a place that you feel safety, gets you away from everybody.”

(Stan)

9.4 A collective narrative of Indigenous homelessness – Chris

9.4.1 Background

Chris is a 42 year old man who was born on Palm Island and sent to school in Townsville where he lived with extended family during the term time. He remembers home as a place of love and safety, which was kept clean and tidy by his mother despite the number of extended family members who lived there and visited sometimes for many months. His parents were both quite strict and expected him to do well and to work hard: *“Yeah I had a good childhood, there was no alcohol involved, no fighting.”* He began drinking in the parks when he was a teenager and skipped off from school. He found that the older people in the parks were kind and told stories and taught him about his culture. He looked up to these people and enjoyed spending time with them, but didn’t realise until later how much drinking had become part of his life: *“I knocked about with the wrong crowd, much older people than me and now I am a chronic alcoholic.”*

After school he initially went back to Palm Island but there was no work for him there so he returned to Townsville and began working for the railway. His work was mainly manual labour and involved some travelling and camping out. He enjoyed this lifestyle and the company of workmates. Throughout this time he had less contact with the mob in the park but continued to drink alcohol and dabble with other drugs from time to time. He met his partner when he was 25 years old and having given up work the couple lived together on Palm Island in his parents’ house. He had two children and says: *“I was really, really happy when my children were born.”* At 32 years of age he was sent to prison for four years after an incident on Palm Island, which resulted in violent clashes between two families. Chris doesn’t remember much of the incident because he was drunk, however his time in prison and separation from his family was very difficult and on release he was not able to settle back on Palm Island. His partner had formed another relationship and the family conflict which led to his imprisonment had not been forgotten. *“When you are in jail that’s a whole totally different world ...and to me it’s the last thing they want is me back in [prison].”* He left his partner who continues to live with his elderly mother on Palm Island and began living on the streets 6 years ago, with his ‘family’ in the parks. At 42 years of age Chris is now one of the older men in the park, he is well known to the locals and is respected by the younger ones who come to drink in the park just as he did 30 years ago. *“Some of the young fella’s today*

they look at me and if they know I am one of the elders, they don't say anything, some of them get a bit cheeky, they get a hiding for it... for disrespecting."

9.4.2 'Being with the Mob' and Drinking Together

Every day Chris spends time with other Indigenous people in the parks. This is the best time for him; it is like his family, being part of the mob. Of course on these days he is one of the older ones, but if there is an older person there, they are always respected and looked up to. *"Like family, not just anyone can join in; people have to be kind of invited, but once part of the mob, you feel you are accepted and that you belong."* When Chris is with the mob, it doesn't matter what anyone else thinks, they are happy just sitting together in a circle yarning and having a laugh. It's a time when he can relax. There are other mobs that Chris knows and gets on OK with but he generally sticks with his own people:

"If they ever take these people away from me I will die too, we grew up together on Palm, we are all different tribes but we are all the same. If they take this mob away from me I will die, just their faces, how we talk, and my land."

Together the mob tells stories, passes on news and gossip and joke around, they can laugh at themselves and tease each other and it is important to not take anything too seriously:

"This is all part of family because wherever we go, we go with the mob, you know like families, and we have a laugh and yarn, play music, play guitars and that, and you feel at ease there, you feel really at ease there."

When he is with the mob they drink together, they take turns in bringing the usually wine and beer, but occasionally something stronger. In the mob they share what they have, that's the way it is, everyone contributes when they have money. On pension days there's always plenty to drink, although Chris tries to make sure he keeps money for the rest of the week, he has to pay back his debts and buy some grog to share, his money doesn't go very far. Sharing is important, it means everyone is part of the mob and it is also important not to drink too much, take more than your share, not to gulp it down.

Sometimes people get drunk and act a bit silly, fights happen but that's all part of being together. Chris believes that the fighting is because society is against them so they take it out on each other. But at the end of the day they are all still one mob.

9.4.3 Time on my Own – Reflecting on Culture

Chris likes to be on his own, and away from the mob at times as this gives him time to think. He enjoys walking around Townsville, *“I go to the beach, that's where I have always gone, so I can be with myself, keep my mind occupied”* or if he hasn't been drinking Chris likes to get out of town and be in the bush. Chris has some favourite places where he can sit and think and just relax, he enjoys the peace and quiet and being in more natural surroundings. He really likes the landscape and the trees around here, it is his place and he feels he belongs.

On Wednesdays Chris joins in the Art Program at the Drop In Centre, he had forgotten about painting after all these years, but when he saw other people painting there, he remembered how he used to paint when he was in prison. So he decided to paint the bush he remembers from Palm Island, the hills and the rocks and it makes him feel good. The painting *“give(s) them something cultural and something they can fight for. Because they had everything taken away at the moment. That's why they are unhappy.”* Some people have told him he is good at painting, so he keeps going, and tries to improve each time. The trick is to remember not to drink too much the day before so his hand doesn't shake too much. When he paints he feels calm and he can almost hear the voices of his ancestors as he chooses the colours and brushes that he uses: *“It means a lot to me, even my art – it gives me a lift every time I sit down and paint, its in my blood you know.”* He doesn't do dot painting, that's not his technique but he loves to paint the bush.

It is when Chris is alone, by the sea or out in the bush, and when he is painting that he feels good about himself and his culture: *“They tried to take our culture off us and everything, most of our language is lost, you feel really, it's a real bad feeling when man doesn't know his culture.”* It is so different to when he is in town and made to feel ashamed for being black and homeless.

9.4.4 Surviving On the Streets

His first thoughts each day are about getting food and drink to keep him alive.

“I get up early about 5 o’clock, I go look for a tap and a drink of water, if not I go to McDonalds have a coffee, buy a hamburger, have a coffee.”

The mornings are quiet, a time to walk and think. Walking provides more than a way to get from one place to another, it also gets the body going, especially when joints are stiff from sleeping on hard surfaces. Invariably Chris meets others who have spent the night on the streets, and together they go down to the Drop In Centre for breakfast at 8.30am, sitting together in the park until the doors open.

After a breakfast of cereal and toast, there is not much to do until lunch time. He goes back into the park with friends and sits around yarning, or maybe walks back into the city to see who is there. At weekends when the Drop In Centre isn’t open for breakfast or lunch, things are much more difficult. *“Sometimes if you get a bite on the streets you get bite on the street, asking people for money you know. Sometimes you can and sometimes you don’t, And it don’t stop you from doing it because you got to eat.”* Another possibility is to *“wait out the back until they throw all the hot pizzas away and then we go and get it”* at least then it’s quite fresh.

In terms of survival it is important to find somewhere safe to stay the night. Chris has a few different spots around town that he goes. He sleeps on his own because you don’t want the mob with you, they attract too much attention. He tries not to be at the same place too regularly because someone might see him and either call the police, or worse take his belongings or attack him. This has happened before, usually when he is drunk or sleeping and on occasion he has ended up with serious injuries from these attacks. There are many stories of people who have been killed just for sleeping on the streets. Even for Chris after 6 years surviving on the streets, he has to be careful about where he sleeps:

“It’s like you can’t sleep in the parks, well you can until the police come up, then they will move you, so there are places that no one is living in, you go there, it’s like squatting, it a place that you feel safety, gets you away from everybody.”

If he has been drinking in the day he tries to get out to the Diversionary Centre for the night. This involves getting on the bus at 4pm or, if he is really lucky, getting the Community Patrol to take him out. He is well known to them and although they don’t like anyone to think of

them as a taxi service, if they have time they will sometimes help him to get there. If he goes to the Diversionary Centre he can have a shower and a feed and a bed for the night, and still be back in town by 9.30am the next day.

9.4.5 Marginalisation and Trouble with the Law

Being Indigenous Chris has had to deal with racism all his life. Even on Palm Island when he was living there, it was the white folk that had jobs, there was nothing for him to do there except CDEP (Community Development Employment Program) jobs and that did not lead to anything. That was why he came to Townsville to work on the railways. He earned good money, and enjoyed the lifestyle then, his colleagues were mostly Murri's too. But those jobs dried up and now there's no work for anyone who is black and without qualifications. That's why Chris lives in the parks: there is no work, no way to get a place to live and not much hope that things will ever change. Living in the parks at least he has his friends and when they drink together they forget the problems, and have a good time. So long as they don't get into trouble with the police, life isn't so bad. *"When you go into town and try to drink in the pubs there, they tell you "get out", and if you are not out they make sure they ring the police and the police will wait outside for you."*

Chris knows that they are looked down on by the community and that they are not accepted by others but when they are together this doesn't matter, because when he is with the mob, he has a sense of belonging, of being someone. The problems occur when the security or police come around and tell them to move on. *"You know, when you live on the street you got to watch out all the time that police don't come and wake you up in the middle of the night and tell you to get out."* Trouble with the police occurs all too often and Chris finds it hard to know how to handle it, when really the police are only doing their job. He understands that it must be hard trying to find real criminals so thinks the police sometimes just come down to the parks to pick on the homeless because it means they can write out some tickets and show they have done something. Even though he knows a few of the police officers, there's no point in arguing, if they come down and see him drinking he knows he will get another ticket and fine, sometimes a night in the watch house.

Chris has had a lot of fines over the years; he cannot pay them so occasionally he goes to court and gets a jail sentence. Mostly he says you get *"locked up in the watch house and go to court the next day and get fined and you've done your time in the watch house."* At other

times the courts have directed him into rehab but once he is back on the streets he soon goes back to drinking again. He tries to keep himself out of trouble but it always comes his way in the end. He isn't a fighter, what is the point of fighting, Chris has seen too many of his mates die through violence and he doesn't want to be the next one. When people get violent Chris walks away tries not to get involved, but he knows why they fight. When there is so much pressure from society and from the police eventually people hit out, they just lose it, often with their own kin:

“This fighting incident, its pressure from society and they get corrupted by other bad things like people looking down on them – like they are better than them. And that’s not the right way to think. They need help...”

9.5 Discussion

This study demonstrates how Indigenous homeless people choose to participate in limited occupational opportunities in order to meet their most basic human needs. From an occupational perspective, priorities such as obtaining food and drink, a safe place to sleep and a group to belong to are necessary for basic survival (Max-Neef, 1991; Wilcock, 2006). Of clear significance in this study is the importance of ‘being with the mob’ as the occupation that satisfies the need for belonging and provides a sense of identity. Satisfying basic needs serves both to motivate action and provide feedback; thus survival needs, when satisfied, prompt and reward the actions of people experiencing homelessness through the use of agency within the limited resources available (Wilcock, 2006). Therefore ‘being with the mob’ is an occupation that is reinforced through the positive experiences this affords.

The satisfaction of basic needs is also constantly under threat from external forces including negative attitudes of the general community, the potential for physical abuse and the power of authorities to impose further restrictions. Thus life is experienced as deviant, or outside of normal society with whom there is no commonality. Indigenous homeless individuals live on the edges of society and find solace in being with each other and in drinking alcohol. There exists a fine balance between the ability of individuals to access the limited resources and opportunities that allow for basic survival needs to be met through the use of their own agency and motivation and the overarching occupational deprivation of homelessness, joblessness, and marginalisation experienced by Indigenous people who live in the parks.

Maslow's (1943) theory of human motivation identifies the importance of physiological needs, safety, love and belonging and esteem being met before a person will be motivated towards higher 'being' needs of self actualisation and transcendence. Other authors have proposed that quality of life is achieved when the universal needs for subsistence, protection, affection, understanding, participation, creation, and leisure, identity and freedom are met (Max-Neef, 1991). For many Indigenous homeless individuals these basic needs are inadequately satisfied. Further, because they are dependent on external agencies over which they have no control, there is no confidence in their future satisfaction. When satisfaction of needs is unmet and cannot be achieved by personal action, needs are seen as deprivations rather than potentials and therefore do not serve as motivators for human agency (Max-Neef, 1991, p. 201). From an occupational perspective this situation can be described as occupational injustice and because there is little the individual can do to change their situation it results in hopelessness and increased dependency (Townsend & Wilcock, 2004).

To illustrate the findings of this study the concept of occupational justice has been utilised to discuss the themes as they relate to 'Chris' (see Table 9.2).

Table 9.2 Occupational Justice: Relationship with Indigenous Homeless Experience

Occupational Justice: Four occupational rights	Occupational Injustice	Concept Explained	Includes	Chris
The right to experience occupation as meaningful and enriching	Occupational Alienation	Experiencing everyday life as meaningless	Disconnectedness Loss of identity Limited expression of self	Separation from cultural, country and kinship relations
The right to develop through participation in occupations for health and social inclusion	Occupational Deprivation	Preclusion from occupations due to external factors	Social exclusion Racist attitudes Stigma	Poverty Unemployment Homelessness
The right to exert individual or population autonomy through choice in occupations	Occupational Marginalisation	Exclusion from society's valued occupation	Lack of choices Lack of decision making power Loss of autonomy	Social exclusion Trouble with the police and security Threat of imprisonment
The right to benefit from fair privileges for diverse participation on occupations	Occupational imbalance	Over or under occupied Imbalanced economic privileges	Lack of participation opportunities Boredom Worthlessness	Dependent on pension (sit-down money) Addiction

As an Indigenous person who is living in the parks in Townsville, Chris has little opportunity to experience occupations that are meaningful and enriching, and as a result experiences *occupational alienation*. Of significance to Chris, separation from country and culture experienced by Indigenous Australians through colonisation has not been compensated by the development of new skills and meaningful participation in mainstream occupations. There are two ways in which Chris can regularly participate in meaningful occupations; through ‘being with the mob’ and through attending the art group. Opportunities to engage in culturally affirming and expressive occupations are needed to ensure that participation in daily life is meaningful.

Similarly his focus on survival needs and lack of opportunity to improve his situation through employment and housing can be described in terms of *occupational deprivation*.

Marginalisation of homeless people has previously been identified by numerous authors (Cosgrove & Flynn, 2005; Harnett & Johnson, 2008; Melnitzer, 2007; Schiffer & Schatz, 2008). Importantly, marginalised people are specifically distanced from positions of power and the ‘resources that enable self-determination in economic, political and social settings’ (Schiffer & Schatz, 2008, p. 6). Homeless mothers report marginalising attitudes of welfare department staff made their attempts to parent stressful and humiliating (Cosgrove & Flynn, 2005). Similarly Chris knows that opportunities for employment and stable housing are restricted because of marginalising and racist attitudes. Racism is frequently experienced in both formal and informal settings by Aboriginal and Torres Strait Islanders (Gallaher et al., 2009) and contributes to the poor health of Indigenous people. There is a significant relationship between the experience of regular racism in at least one setting and mental health, and a range of symptoms including stress, anxiety, depression and alcohol and tobacco use (Gallaher et al., 2009).

The concept of having autonomy through choices of occupation includes, at a macro level, the rights of citizenship and at a micro level, the ability to make decisions and choice in everyday occupation. *Occupational marginalisation* is the term given when these rights are absent. For Chris there are many ways in which his right to choose is denied at the most basic level, his reliance on the Drop In Centre for meals means that he cannot choose what or when he eats, when the Drop In Centre is closed at the weekends he may not be able to shower. Poverty restricts what he wears and where he can go. Physical access to space may be limited by local laws and banishment powers in a way that discriminates against homeless people

using parks and city malls (Herbert & Beckett, 2010). The power of police and security guards to move Indigenous people from the parks and public places through local council laws, particularly if alcohol is being consumed, contributes significantly to this loss of freedom. Chris sometimes exercises his freedom to make decisions by choosing to go out of the city and visit the bush, or when he chooses to be on his own to think. Being mobile is important in that it provides the sense of freedom. Therefore, being housed may actually inhibit this freedom and be experienced as a restriction.

Finally Chris experiences *occupational imbalance* by being chronically under-occupied. Regular alcohol consumption within the group provides one important way of breaking the boredom and allowing participation. Dependency on a government pension for money has previously been discussed as ‘sit-down money’ in Indigenous communities (Jensen, 1993). Whilst the provision of a basic living allowance to those who are unemployed is just in a rich country such as Australia and socially preferable to any alternative, when combined with a lack of employment and social structures, it may also be a disincentive to engaging in productive occupations. The complex sharing of resources between members of ‘the mob’ supports the group to drink together more regularly and it is the engagement in drinking that has come to take the place of meaningful occupation in Chris’ day-to-day life. Integral to the drinking is sharing of stories and status amongst group members that supports both individual and group identity.

9.6 Conclusion

This chapter reports on the third nested case identified in the Townsville case study and specifically explores the link between the everyday occupations of Indigenous people experiencing homelessness and their perception of wellbeing. The findings add to the growing body of evidence that wellbeing is achieved by engaging in meaningful occupations and therefore supports an occupational perspective of health. The study explores wellbeing in relation to Indigenous homelessness in the context of occupational justice and outlines complex and multiple aspects of occupational injustice. Through the development of a composite case study, the research demonstrates that Indigenous people who live in public places have very limited opportunities available to them to engage in meaningful activities above meeting the most basic survival needs of eating, safety and belonging. The fulfillment

of cultural needs, to experience a sense of identity and belonging, are met through 'being with the mob'.

Indigenous people who are homeless experience all forms of occupational injustice; including alienation, deprivation, marginalisation and imbalance. These findings have implications for occupational therapists and service providers who seek to reduce homelessness in Australia and to engage Indigenous park dwellers in more stable accommodation. Prolonged periods of homelessness, unemployment and marginalisation result in disrupted occupational participation and the development of alternative strategies to sustain wellbeing. Results have highlighted the importance of 'being with the mob' and drinking alcohol as a means of establishing a sense of belonging and collective identity. While considered deviant from the wider societal perspective, drinking with the mob in the park can be considered a positive choice by Indigenous people experiencing homelessness to meet their wellbeing needs and by engaging in an occupational opportunity to enhance a sense of self, identity, and culture. As such, the act of drinking with the mob supports the dimensions of both 'being' and 'belonging' recognised in the occupation literature.

The possibility of moving out of homelessness and leaving these established occupational patterns, to get housing, may not be an attractive proposition for many Indigenous homeless people. Initial steps towards this would necessarily include increasing opportunities for Indigenous people to collectively engage in alternative and meaningful occupations that support cultural and individual goals. An occupational justice framework may allow such a process and support the individual and group to develop alternative and collective occupations that are culturally appropriate and aimed to increase their perceptions of wellbeing.

9.7 Summary

The rate of Indigenous homelessness is three times higher than that of the rest of the Australian population suggesting a greater level of disadvantage in housing exists for Indigenous Australians. The most visible form of homelessness, public place dwelling, by Indigenous people arises from complex social and historical issues and has been seen as a consequence of spiritual homelessness. The aim of this chapter is to explore how Indigenous people experiencing homelessness experience wellbeing through their day to day

occupations. In depth qualitative interviews of 14 Indigenous people were analysed inductively and formed the basis of a collective narrative of Indigenous homelessness which gives a voice to the complexity of Indigenous experiences homelessness. Collective occupations reported as 'being with the mob' are identified as critical to experiencing wellbeing. Survival occupations provide the material resources required for life while 'being with the mob' and reflecting on culture provide a valued sense of psychological wellbeing. Marginalisation is conferred through police and security officers' interactions and their 'move on' powers mandated through local laws. These findings are discussed in relation to the theory of occupational justice, and demonstrate the need for providing opportunities that support collective occupations and are respectful of cultural values.

The findings related to Indigenous homelessness reported in this chapter conclude the results of the case study from the perspective of people experiencing homelessness. Before moving into a broader discussion of the case study in part three of the thesis, the voices of staff from service organisations were included through a series of focus groups. Chapter 10 reports the findings of this final phase of the study and concludes part two of the thesis.

Vignette 2 – Homelessness: An Indigenous Woman’s Perspective – Caring for Self and Others

I met Ulna at the Art Program, as a single Indigenous woman living on the streets, her story provides a contrast to most Indigenous men and women as she spent the majority of her time alone. As she painted she told me about her life and the public place she calls home. She was grateful that she had been allowed to use this space, by the owners, for a long time as it provided a sense of security for her.

“I don’t go back to the place until night time. Nobody can see me then even though the lights on... I had no blanket, nothing so I had to find myself a blanket ... I leave that there, they, they, I leave my stuff there. They are sort of good people there, they don’t take nothing... No they don’t mind so long as I am very quiet and as long as I keep the place clean... yeah I suppose, you might as well say it is my little home. I just go there even when I find a book or something; I just go and read...”

Despite the potential threat of living in a public place, external concrete steps provided shelter and a sense of home because she could leave her stuff there and it would not be thrown out. Having a dry place to sleep, hide a blanket, clothes and a book seems very little to ask, but clearly provided peace of mind. Ulna told me of another city where homeless people can store their stuff in a locker but this facility wasn’t available in Townsville.

Apart from painting, Ulna told me how she spends her time now that she has given up drinking on the advice of a doctor.

“I don’t go to sleep until 3 o’clock in the morning. I just walk around all day and night... I stay asleep only like for 4 or 5 hours, and then I get up, sometime, this is my daytime now, I missed out breakfast.”

Ulna does not go to the overnight hostel but she watches out for others who are on the street and might need help.

“I walk around till I find them and then just keep an eye on them and make sure nothing happens to them. Some of them, and I know I am sort of sickly but they need more attention than me, especially the elderly. I cant back answer the elders, there is always going to be someone there for them, even though they have nothing to eat, and when they really want to go the [hostel] I get someone to come and pick me up, or I get the coppers.

“I met a young lad, he used to sleep under the bridge, I used to sniff glue and I went to the night club area and got him a pizza cos he was hungry”

Ulna sees herself as a carer of others; she watches out for those that are less resourceful and tries to look after them despite her own significant needs.

Chapter 10

Service Providers Stories of Success

10.1. Introduction

This chapter takes a different focus based on the perspectives of service providers working in services that assist people experiencing homelessness in Townsville. Data collected through a series of focus groups undertaken toward the end of the research project aimed to explore the strengths of homeless service organisations. These organisations collectively provided interventions aimed to reduce homelessness and to support those who experience homelessness in Townsville. It was hypothesised that the perceptions of staff members involved in service provisions would provide a source of triangulation for the project, and so expand this case study by exploring the ways in which successful interventions are carried out.

This aspect of study utilises an ‘Appreciative Inquiry’ framework (Cooperrider, Whitney, & Stavros, 2008); these methods have previously been outlined in Chapter 5. The focus groups provided an opportunity to share the initial findings of the research with staff for validation and feedback. This final phase of the study served to answer the final research question: ‘How do services assist people experiencing homelessness in Townsville to improve their wellbeing?’ Stories of success were gleaned from participants and formed the basis of the data for this final stage of the study. Participants were asked to share examples of situations that were perceived to be beneficial for service users who are homeless or at risk of homelessness, leading to discussions regarding the skills and knowledge that are valuable and the additional services needed.

In this chapter I present the results of an inductive analysis and interpretation of the data as three themes, which are broadly discussed in relation to the current homelessness policy.

10.2. Focus Group Participants

Focus groups were conducted in six service provider organisations and included a total of 34 participants. Another significant service provider, Yumba-Meta was unable to host a focus

group due to high workload and staff changes. Table 10.1 identifies the six organisations, the number of staff members in each group and the services they provide.

Table 10.1 Focus Group Participants

Focus Group	Staff Members	Services Provided
FEAT (pilot study)	5	Emergency accommodation and support for families
Homeless Health	9	Mobile Health service (Nurses, Indigenous mental health workers, OT, SW, etc)
Red Cross - Homestay	6	Homelessness Prevention, support for people at risk of homelessness
The Centre	4	Drop In Centre, meals, showers, programs,
Spiritus	4	Public Intoxication Outreach Service and nursing care
Red Cross – Street to Home	6	Assertive Outreach and housing for people who experience chronic homelessness
Total Participants	34	

In an attempt to ensure anonymity of participants, the quotes used below will not be labeled with the name of the service organisation from which they came, instead pseudonyms are allocated as identifiers.

10.3 Analysis of Success Stories

Twenty four success stories were shared in the focus groups and demonstrated a range of interventions that were successful in preventing homelessness and eviction, assisting people to obtain stable accommodation and helping people to abstain from alcohol or manage mental illness. Many stories told of the effort required to establish effective and trusting relationships with difficult to engage people; listening attentively and providing support in ways that communicated caring and a willingness to help. It was evident from these stories that providing accommodation was only one aspect of responding to homelessness and many people needed much more to turn around their lives. The complexity of homelessness was demonstrated through these success stories, with service staff articulating the need to stay engaged for months and sometimes years in order to effect real change. The findings are provided below under three broad themes: ‘Genuine Relationships’; ‘Building strengths and securing housing’; and ‘Dealing with complexity and rebuilding lives’.

10.3.1 Genuine Relationships: A life raft in the ocean of homelessness

Engaging people who live in public places and are marginalised is not easy. Service providers identified the importance of establishing relationships through repeated conversations, offers of help and being available to listen to the concerns of those experiencing homelessness. The starting point for these relationships is genuine respect and acceptance of the person, regardless of their presentation or lack of trust. Many graphic examples were given of successful rapport building beginning with a cup of tea, the offer of a pie or a piece of toast and a willingness to simply sit and talk to individuals and groups about the services they could offer. For some clients it took many conversations to overcome anxieties and defences and establish a more open relationship:

“Getting to know them as closely as I can, listening to them, making observations about their strengths and then working with the positive reinforcements of those strengths, it takes a long time, little steps at a time and slowly being a bit more positive and bit more positive.”

(Jane)

The need for persistence and keeping the door open was acknowledged. Service providers anticipated that some individuals would take time to respond to these invitations, and accepted this as normal. Timing of engagement is critical to ongoing success, with self referrals being considered more powerful than a referral through another agency. People need to be ready to accept help and actively agree to engage with the services, to achieve positive outcomes collaboratively. Once engaged and actively involved in services the outcomes were jointly achieved through a reciprocal partnership:

“They may engage and continue to do so or they may not. And they may come back. We see a lot of transient people.”

(Carol)

“... it’s amazing what we have been able to change, but he couldn’t have done it without us and I couldn’t have done it without him agreeing.”

(Barbara).

Once the relationship is established success was dependant on maintaining contact and support to achieve the clients' goals. Ongoing and regular contact facilitated hope and encouragement through difficult times, regardless of whether the service was able to provide housing or not. While waiting for housing opportunities, or prior to accepting offers for housing support, this ongoing relationship serves as a 'life raft' in the ocean of homelessness and despair. Service staff recognised that often people needed time to talk through issues, be listened to, and be empowered to take action towards their goals. Some service staff noted how their role was not to take over a person's problems but rather to walk with them and support them to take control of their own lives:

“Making a difference in people lives, just making a difference today for tomorrow, that is the ultimate goal, they wake up tomorrow because they felt good about the day before”

(Cathy)

“We give our clients more emotional support and we empower them to feel that they can do it themselves... I have often had clients and they say oh thank goodness I always know you are going to give me some kind of direction.”

(Angie)

Success takes time, sometime months or even years. Engagement in services needs to be a long-term commitment of both the provider and the recipient to achieve a number of progressive steps towards their ultimate goal. This raised issues regarding ongoing funding and policy changes, which might threaten the opportunity to continue to work actively with clients over the long-term. Participants are concerned that having to close cases too soon would constitute a severing of trust gained, removing the life raft and throw clients back into the water again:

“She needed the time to be able to talk through it she just talked constantly about the negative parts of the relationship for an hour and a half. Probably she was with us for about four months before the story changed.”

(Fiona)

“A very ongoing process there wasn’t just one barrier, seven months, and I still will work with him for as long as I am here. Just to check up and see how things are going.”

(Barbara)

Success is contingent on establishing an effective, genuine and positive relationship of trust, especially for people who have experienced homelessness for protracted periods. Previous experiences of support services and unsuccessful housing attempts leave scars that make re-engagement difficult. One particular success story involved a man who had been on the streets for 20 years and had refused all previous offers of assistance, often abusively and with violence. The apparent success of a young, pretty and genuinely caring support worker in establishing a genuine relationship that had improved his situation seemed little short of a miracle. Successful interventions begin with an offer of an opportunity to get out of the water and on to a life raft even if only for a few moments today and a few moments tomorrow and then maybe the day after.

10.3.2 Building Strengths and Securing Housing

The prevalence of depression and despair resulting in low self-esteem and alcohol abuse has previously been noted amongst those experiencing homelessness (Flick, 2007; Pluck et al., 2008). This study demonstrated the central role of service providers to work towards improvements in self confidence and self determination through a range of strategies. Client-centred goals and opportunities to make decisions and employ agency to overcome issues provided evidence of the person’s strengths and capacities to manage their life more effectively. Participants discussed how principles of empowerment provided a basis for their interventions, ensuring that even small successes are acknowledged and rewarded.

The work programs offered at the Drop In Centre provide an opportunity to earn extra money, experience a sheltered work situation, and to gain a sense of achievement for those that can demonstrate a zero blood alcohol level. Success is ensured by an organisational belief that ‘there are no failures in the projects’ (D. Clark, personal communication, October 24, 2009). The importance of maintaining a positive attitude to clients who attempt to make changes is in line with the strengths perspective (Saleebey, 2009). Service staff members talked about the importance of being positive when people ‘have slipped up’, encouraging a focus on strengths and capabilities rather than problems and barriers. It was acknowledged

that many people would easily give up and return to the familiarity of despair when faced with hurdles and service workers noted these critical moments required encouragement and confidence:

“... you have slipped up there, it’s alright, you are still strong you are still doing the right thing.”

(Jane)

“You have to keep believing in yourself that you can do it by yourself, you don’t need anyone else to do it for you. I will walk with you and be your support, but you will make it through.”

(Gillian)

A major sign of success is securing accommodation, which may be temporary or permanent, through government, housing services or private rental agencies. All focus groups considered that getting a client into housing is a significant achievement and were clear that there was inadequate affordable housing stock in Townsville to achieve this aim. The lack of government owned accommodation for individuals and families was consistently noted. Private rentals were considered less stable and often more expensive but were frequently the only option available. Some organisations talked of regularly having to negotiate with rental agency staff and landlords on behalf of their clients to maintain housing. There was a need for more housing for large families who were currently living in overcrowded and substandard accommodation. Lack of accommodation for single homeless people frequently resulted in people being inappropriately placed in private lodges or hostels where access to drugs and violence placed additional risks. All too aware of the practical problems of finding and keeping housing, staff felt that they were frequently unable to offer the assistance that was required to their clients.

The clear message was that getting housing was a first step for many and keeping housing presented many challenges. Continual contact was needed to help people make the transition from homelessness into community living. Participants suggested that without assistance people breached rental agreement and created disturbances that resulted in a rapid return to homelessness. There was considerable concern that many clients lacked the skills to maintain housing:

“[Accommodation is] just a starting point anyway because once you get them there, you have to do quite a lot of work to get them to understand the limitations of sharing a unit... or living in a house.”

(Adrienne)

“It’s just the constant contact and not every day maybe once or twice a week, but just so they know that they are not doing it on their own and if there are any problems there are services out there that are more than willing to help them help themselves.”

(Jane)

Becoming housed presented a number of challenges particularly when the type of housing was not suitable or when people with complex needs are housed in close proximity, upsetting neighbours and causing disturbances. Questions were raised regarding the current housing agenda to house everyone in independent units when, at least for Indigenous people who have been living in the parks communally, socialising is highly valued. The participants in this study called for a variety of styles of housing and consideration of the cultural needs of extended families that were difficult to accommodate in conventional housing. Successful transition into housing may not be an appropriate goal for all and the risk of becoming isolated are acknowledged.

10.3.3 Dealing with Complexity and Rebuilding Lives

Homelessness is complex and people who become homeless experience multiple issues; some may be antecedent to homelessness and others may be a result of homelessness. Grief and trauma, mental health and substance abuse all impact on a person’s ability to make a successful transition out of homelessness and regain a life of meaning. Housing is a first step but the work continues for service providers to help to establish the necessary scaffolding that will maintain progress towards independent living:

“[One] chap who has lived in parks all his life, he had had trouble with the law, been in and out of jails too. He got into stable accommodation and he even ended up getting his head around going for surgery, which he just did not want to do, but he has got it all done and he’s great now. He was a chap who was having ...

paranoid hallucination, and a lot of them ... he was certainly not having a pleasant time ... The second part of his issue was he had just come out of prison ... He reestablished contact with his family, we worked with him to re-establish that ... In fact it led to him having 12 months of work ... He has left this service but we have referred him to a support agency.”

Success is facilitated by a range of interventions that address the complex needs of individuals including attending to ongoing health needs, dealing with grief and trauma, referrals to counsellors, establishing budgeting plans, gaining the skills to maintain a house and look after oneself, and establishing contact with estranged family members:

“It’s no good the house without support, and the skills, because they won’t be accepted unless they have the skills to manage a house and to manage living in a neighbourhood that you know, you cannot party all night because the lady next door has three kids under five and she needs to sleep.”

(David)

The work of service providers extended across multiple areas of care and frequently involved referrals to other agencies to address the range of needs presented by each individual client. While beginning with the obvious need of housing the work that continued once housing was obtained focused on rebuilding lives of meaning. Step by step staff would work with clients by encouraging a sense of personal agency to move towards positive actions towards engaging in the community. The individual needs of each client directed the kinds of resources needed.

For some, obtaining employment is important, and requires opportunities to gain or regain the necessary qualifications to pursue employment. It appears that work can only be realised once accommodation is available, and simultaneously provides both the financial resources and the daily routine that helps to maintain accommodation. Stories of success demonstrated that some individuals obtaining secure housing allowed them to make significant transformations in their lives, by abstaining from drinking and criminal activities that had previously dominated their lives:

“He was a client that we saw a lot in the parks and he got a housing unit and he struggled there for a while keeping it, but with ‘Staff’ giving him the support he has come through the other side, not drinking, still going to his meetings and... he has actually been working, through one job but he has actually organized another one, and he is not drinking.”

(Adrienne)

The work necessary to ensure successful transition is ongoing and diverse, one person may need to get glasses so they can read the paper, another may need heart bypass surgery, and a third will need counselling for previous abuse. The need to be responsive to individual needs was clearly identified, but the overall goal was simply stated as below:

“We try to make a path, to link them back into the community so that you are significant to others in the community.”

(Angie)

10.4 Discussion

The focus groups with service organisation staff provided additional understanding of the issues faced by homeless people in Townsville. A shortage of affordable and available housing alternatives was noted as the major limitation in reducing homelessness. The current homelessness agenda aims to halve homelessness by 2020 and to reduce homelessness by 20% by 2013. The government’s promise of more housing across Queensland as set out in the NAHA (Australia. Homelessness Taskforce, 2008) has to date made little impact in Townsville, although new housing is planned. Without permanent housing the staff recognised that their efforts were needed to maintain hope and build relationships with people who are homeless.

The concept of the ‘life raft’ provided by relationships with staff based on respect and trust is highlighted in this research. In the context of these relationships staff members recognised that they were able to make significant changes by providing hope for individuals who were experiencing difficult times, often close to despair. Staff believed their relationships with clients simultaneously reduced negativity and feelings of depression, reinforced opportunities and positive experiences, and encouraged self-esteem and worth through using strategies of

empowerment. While different services were focused on different strategies overall it was clear that the importance of establishing trusting and authentic relationships provided the necessary support to make a first step out of homelessness towards a better future (Johnsen et al., 2005; Kryda & Compton, 2009) .

The importance of establishing supportive relationships to facilitate movement out of homelessness has previously been noted (MacKnee & Mervyn, 2002). Although previous research has focused on specific services such as drop in centres or outreach services, the importance of providing a place and space where marginalised people can simply ‘be’ has been identified (Christian et al., 2011; Conradson, 2003; Johnsen et al., 2005). While this research specifically identifies the importance of relationships between staff and homeless clients, this finding supports the importance of being accepted and not further marginalised by service staff. In the context of positive and empathetic caring relationships users of homeless services begin a process of identification with workers and experience themselves as more confident and hopeful for the future (Conradson, 2003).

Hope in this context is not specifically attached to a personal goal or outcome, a more generalised experience of hopefulness has been associated with resilience (Fine, 1991). Nunn et al. (1996) defines hope as ‘the construction of, and response to, the perceived future, in which the desirable is subjectively assessed to be probable’ (p.531) and suggests that anxiety is hope under threat. Maintaining hope that something good or better will occur in the future is a future oriented perspective of positivity and a protective mechanism that enhances coping with present difficult circumstances. As such, hope has both cognitive and emotional aspects that relate directly to subjective wellbeing. The results of this study support the importance of maintaining hope through positive experiences of occupations that enhance feelings of self worth and mastery.

These findings show the perceived importance of creating relationships that create a possibility of a different future through positive encouragement towards positive behaviour change. Whether the service was focused on work or occupational opportunities, health care, counselling or case management, success was determined by a change in behaviour. There was clear recognition that for most people there were multiple areas where changes were needed and in most situations required a long-term commitment on the part of staff. Previous authors have discussed the extended time required for sustained interventions to deal with

complex issues associated with homelessness (Kryda & Compton, 2009; MacKnee & Mervyn, 2002; Rickard et al., 2010). Staff were concerned that current housing policy and funding expectations could limit the length of service to clients and therefore reduce the likelihood of successful re-housing. This study confirms the importance of sustained relationships to housing outcomes and a reluctance to break from these relationship prematurely as this would undo the trust established and influence clients' belief in themselves or in the services (Kryda & Compton, 2009).

10.5 Conclusion

This study of the staff members' perceptions of success in the work of homeless service organisations raises issues related to policy direction and homeless individuals' engagement in services. The lack of availability of adequate housing stock in Townsville limits success to fulfill the national agenda to reduce homelessness. The National and State Governments, through the National Affordable Housing Agreement, have committed to the building of more affordable and secure accommodation; however the progressive roll out of this funding restricts service providers to meet the needs of clients. Housing is arguably the most significant factor in reducing homelessness, however this study identifies that it is only the start of a process that ultimately aims to rebuild lives.

Despite the breadth of services required to end homelessness and rebuild lives, the role of occupational therapists was not specifically explored in this study. One occupational therapist was involved in the study, although there were clearly similarities between some staff members' roles and the goals of occupational therapy. This study identified the importance of re-engaging people into communities and in lives of meaning and confirms a current and future role for occupational therapists in Townsville and in the National Policy to reduce homelessness. This aspect of the study provides some evidence of the suitability of occupational therapists to work with these client groups (Grandisson et al., 2009). More specifically it suggests that occupational therapists could enable occupational engagement of people who experience homelessness to achieve meaningful lives (Townsend & Polatajko, 2007).

While the participants in this study were not generally occupational therapists the findings also have implications for occupational therapists working with homeless clients in more

traditional settings. Approaching homeless clients with respect and acceptance and avoiding further marginalisation is an essential first step towards effective rapport. Homeless service staff members illustrate the importance of establishing relationships of trust as a preliminary step towards a positive outcome. Encouraging people who experience homelessness to willingly and voluntarily use a service is the first goal of therapy, as those who frequently experience marginalisation and discrimination may be reluctant to seek out or accept help. This reluctance to participate in treatment within the general health sector may well result in poorer health and wellbeing outcomes for those that are homeless.

10.6 Summary of Journey Highlights

This final aspect of study from focus groups with service staff concludes Part Two of the thesis, the Journey Highlights. Through chapters 6-10 I have outlined 5 separate aspects of the case study and provided evidence of the lived experience of people who are homeless and of some of the staff that work with them. The discussion of each chapter highlights the relationships between occupation and wellbeing in the context of homelessness in Townsville. Each chapter is discussed in relation to the theory, supporting an occupational perspective of health and wellbeing. The use of three composite case studies illustrates the diversity of occupational needs and draws on the evolving theory of occupational justice to further understand the implications of limited opportunities to engage in community. This concluding chapter demonstrates the importance of working with people experiencing homelessness not only to regain housing but to rebuild lives of meaning through occupation.

Part Three

Discovering Meaning

CHAPTER 11

Issues of Occupational Injustice

11.1 A Framework for the Chapter

The aim of this chapter is to elucidate and synthesise the results obtained from this study and link these to the existing literature and occupational therapy theory pertaining to occupation and wellbeing. This study began with a review of occupational therapy literature supporting an occupational justice approach to inform future practice and research, recognising the marginalised status of people experiencing homelessness. The literature suggested the aim of interventions and research should assist people to rebuild lives of occupation and meaning to enhance wellbeing through the development of skills, participation, hope, self-esteem and resilience. This chapter utilises an occupational justice approach and considers occupational rights and systems, structures and service interventions that promote or restrict occupational engagement for homeless people in Townsville. This study was primarily designed to explore and expand on the link between occupation and wellbeing relative to this context.

The previous five chapters (Part Two) demonstrate the link between occupation and wellbeing as an outcome of: a) participation in art as an example of meaningful occupation; b) meeting safety and survival needs; and c) being considered 'normal' rather than marginalised through community participation. The three collective narratives highlight the individual nature of wellbeing achieved through participation in occupations that are grounded in the unique understandings and worldviews of people who are homeless. Different dimensions of occupation meet specific occupational needs for the three narratives explored. The case of Indigenous homelessness demonstrates cultural differences inherent in occupational wellbeing. The perspectives of staff provide clear evidence of the importance of respectful and trusting relationships as the first step to engagement in services. Together these findings support and indicate a potential and future role for occupational therapy.

This final chapter interprets the findings in relation to the current occupational and occupational justice theory. The founding assumption of the occupational lens used throughout this study is that humans are occupational beings and that engagement in purposeful and meaningful occupations contributes directly to their experience of wellbeing

(Wilcock, 2006; Hammell, 2004). When people are unable to engage in meaningful occupations through external conditions or restrictions over which they have no control a situation of occupational injustice exists (Standyk, Townsend, & Wilcock, 2010). The fact that homeless people experience social marginalisation and disadvantage associated with poverty, unemployment, lack of stable housing, poor health status and stigmatisation is incontrovertible. The occupational lens utilised in this study highlights the existence of occupational injustice experienced by people who are homeless.

In this final chapter I tell the ‘analytic story’ (Silverman & Marvasti, 2008, p.390) of the case study as a secondary interpretation of the findings to convey the ‘discovery of meaning’ from the research. These interpretations are explicated through the use of literature and theoretical knowledge from a range of disciplines including, but not exclusive to, occupational therapy. In this chapter, I will discuss four themes explored and illuminated in this study. The first theme deals with the findings related to the meaning of wellbeing as seen through an occupational lens. The following three themes illustrate the link between wellbeing and occupation and expand the current theory of occupation in the context of people experiencing disadvantage and occupational injustice. The themes focus on place and space, women and homelessness and Indigenous homelessness. The chapter concludes with the implications of these findings to the occupational therapy profession and to homeless policy and services providers.

11.2 The Meaning of Wellbeing to People Experiencing Homelessness

There are no universally accepted definitions of wellbeing, making research on the contribution of occupation to wellbeing problematic, especially if objective measures and universal understandings of wellbeing are assumed (McGillivray & Clarke, 2007). In response to increasing references to wellbeing as the goal of occupational therapy, Aldrich (2010) proposed that occupational therapists should be more explicit in their use of the term ‘wellbeing’ in their work in order to clarify meaning. In this study I intentionally take a different approach by asking people who are homeless to share their understanding of wellbeing as it relates to their individual situations. Despite the undeniable situation of poverty and marginalisation of homeless people, participants in this study were able to identify those aspects of life that are of value to their overall sense of wellbeing, with some

individuals rating their current wellbeing at very high levels. Thus, the results of this study highlight differences in people's personal definitions of wellbeing and strongly supports the subjective experience of wellbeing is multifaceted, lacks universal meaning and therefore cannot and should not be defined by others. Occupational therapists' understandings of wellbeing are likely to be influenced by their own perceptions of what makes life satisfactory and may lead to setting goals that do not reflect the clients' aspirations or awareness of their own needs. This study suggests that as part of occupational therapy intervention clients' perceptions of wellbeing should be identified and acknowledged in the occupational therapy goals.

This study did not aim to quantify wellbeing or make comparisons between the levels of subjective wellbeing of different individuals. However, more than half the participants were asked to attribute a number to their current level of wellbeing between 0 and 10. The question was designed to help participants to make comparisons with the previous best and worst experiences, thereby creating a self-anchoring scale (Cantril, 1965; Lefcowitz & Wallston 1973) against which their current situation could be self-evaluated. Clearly, comparisons of results are meaningless statistically, although the fact that some people rated their current situation at 9 or 10 demonstrates that subjective wellbeing is not equivalent to levels of comparative wealth and income as is frequently assumed. As McGillivray and Clarke (2007) point out, income may indicate consumption, however, there is little evidence of how consumption relates to wellbeing for individuals. In rejecting the assumption that wellbeing equates to income, there is value in determining if alternative definitions of wellbeing might be more compatible with the notion that wellbeing is linked with engagement in occupations that are meaningful for the individual.

This study supports alternative perspectives to wellbeing relevant to an occupational perspective. Rejecting a focus on personal attainment, economic wealth and status an alternative approach might emphasise the concept of human capabilities (Sen, 2009; Sen, 1993). The capability approach assesses an individual's overall advantage as the measure of their wellbeing that is defined as 'people's ability to live the kind of lives they have reason to value' (Sen, 2009, p.231). From this perspective people have more advantage if they have the capability, the opportunity and the freedom to achieve what they value. A capability approach focuses on opportunities available to individuals for living lives they value. It acknowledges the plurality of human functioning based on diversity of human values and the importance of

cultural and social influences on human values and choices. Pentland and McColl (2008) propose that wellbeing is achieved through occupational integrity, or the 'extent to which a person designs and lives in integrity with his or her personal values, strengths and attribution of meaning' (p.136). A complimentary approach to wellbeing has been suggested by Doble and Santha (2008) as occupational wellbeing. Occupational wellbeing is the meaning and satisfaction that individuals derive from their occupational lives, enhanced by the ability to choose, engage in and orchestrate their occupations to consistently meet their occupational needs. Occupational wellbeing is achieved through the freedom to choose and opportunities to engage in occupations of value. Consistent with the findings of this study these theoretical concepts confirm that wellbeing, at least from an occupational perspective is achieved when people have the capability and opportunity to engage in the occupations that they have reason to value. This finding will be discussed again later in this chapter.

This study confirms that people who are homeless experience wellbeing through meeting basic human needs for survival, specifically subsistence and safety. Without safety, survival is a fulltime occupation for people and shelter and subsistence occupations are essential pre-determinants of life and human wellbeing (Maslow,1943; Max-Neef,1991). Wilcock (2006) identifies survival as the primary drive of all animals and suggests that humans are neurologically programmed to use their capacities to engage in occupations that sustain life and health, proposing a three-way link between occupation, health and survival.

The extent and quality of survival for individuals, communities and populations depends on their health and physical, mental, and social wellbeing; health is the outcome of each organism having all the essential sustenance and safety needs met and having physical, mental and social capacities maintained, developed, exercised, and in balance. This is achieved through what people do (Wilcock, 2006, p.71).

Despite the lack of concern for health demonstrated in this study by participants, the study confirmed the primacy of maintaining survival through ensuring access to food, hygiene, finances, social contacts and safety and outlined the strategies used to achieve these basic human needs. The results demonstrate that meeting survival needs when homeless is complex and requires being at the right place at the right time, a process of considerable organisation and planning for most individuals. From an occupational perspective, survival for those who experience homelessness is a full-time occupation and its achievement requires an ongoing

commitment to engage in a structured routine of activities in different places. Contrary to the concept that people who are homeless are 'lackers' or 'slackers' (Rosenthal, 2000) this research found that people who have nowhere safe to live are engaged in occupational lives of purpose in order to achieve their own survival.

The wellbeing of people who are homeless depends on the individual's ability to use their capacity and opportunities to ensure his or her own survival. Failure to do so would ultimately result in death. In the absence of a physical home and deprived of the resources to maintain ones physical needs, people who are homeless organise their lives and manifest their sense of agency to ensure their own and, in the case of mothers, their children's survival. It is at this level that routines are important and engender a sense of control over otherwise unpredictable or possibly uncontrollable circumstances. Survival means doing similar things each day, keeping going, not giving up, and focusing on those things that are necessary and achievable rather than looking towards the uncertain future and investing in long-term goals. Living is concerned with the immediate and planning is deliberately short-term and focused on those aspects of life that can be controlled.

Occupational therapists have a particular interest in the everyday occupations of living, frequently invisible and understated, everyday occupations provide the means by which we organise lives of meaning: The ordinary every day routine of life provides the 'deep primordial nourishment of our existence' (Hasselkus, 2006, p.638). Although this research did not directly explore the existential beliefs of participants, some indicators that motivation to continue was internally driven is evident. It is not unusual that people experiencing homelessness are motivated by achieving a sense of happiness and positive feelings (Tov & Diener, 2009). Therefore, the occupations from which people derive a sense of satisfaction indicate how wellbeing might be increased. This study demonstrates that being with others, or being social, and having the personal resources to achieve satisfaction were important avenues for increasing wellbeing. Some examples were expressed simply as having a positive outlook, or being positively occupied by painting, cleaning, being in the bush or by the sea. While the specific occupation varied from person to person, these responses provide evidence of a drive to feel good and have positive experiences through everyday occupations, over and above meeting physiological needs. For occupational therapists and other service providers working with people experiencing homelessness, a focus on increasing opportunities for personal satisfaction and positive occupations will increase wellbeing in this client group.

This study demonstrates that a drive towards positive experiences is sustained by hope in spite of difficult living situations and poverty. Hope in this context is not specifically attached to a personal goal or outcome, a more generalised experience of hopefulness has been associated with resilience (Fine, 1991). Hope arises from within and is fostered through relationships, cognitive strategies, personal attributes and affirmations (Herth, 1996). The importance of hope at survival level and in order to keep going (Herth, 1996) is evident:

“Where you can hope that you are going to get better, and have something tangible to base that hope on.”

(Bert)

Maintaining hope that something good or better will occur in the future is a protective mechanism that enhances coping and mediates a lack of social support for people experiencing homelessness (Yarcheski, Scoloveno, & Mahon, 1994). The results of this study support the importance of maintaining hope through positive experiences of occupations that enhance feelings of self-worth and mastery. The limited opportunities for occupational engagement experienced by people who are homeless in Townsville may inhibit the consistent achievement of occupational wellbeing (Doble & Santha, 2008). However, in small but important ways, participants found ways to maintain hope through engaging in positive occupations when they were able.

11.3 The Link between Wellbeing and Occupation: A Pluralistic Approach

A constructivist approach to occupation challenges assumptions that the form, functions and meanings of occupation are universal, and presumes the experience of occupation as contextual and ultimately interpreted variously by people according to their worldview and situation (Eakman, 2007; Zemke & Clark, 1996). Therefore, the link between occupation and wellbeing is relative to the person, their environment and the values they hold and therefore can only be ascribed by the person. The possibility therefore of discovering a single and observable ‘truth’ as an outcome of this study is counterproductive and therefore a pluralistic approach is required.

The presumption of a direct causative effect of occupation on human health and wellbeing is consistent with an objectified and dominant worldview that the individual, through the power of agency, uses the environment to meet their personal wellbeing needs, in contrast to a view of the self as embedded in the environment (Iwama, 2010). This study supports an alternative perspective: that the multiple meanings of human occupation are intricately affected and shaped by the social and cultural context and consistent with the cultural norms. I have reflected this perspective in the presentation of the results of this study as collective narratives of homelessness, discovered through this study. These narratives are essentially stories of difference and project multiple realities of the individual and collective meanings ascribed to occupation in relation to wellbeing. These culturally and socially embedded stories illustrate that the meaning of certain occupations are relevant in time and space and embedded in the social and cultural context of the participants.

Four themes emerged in the interpretation of the findings: Occupying space and place; Influence of culture and gender; Women and homelessness; and Indigenous homelessness. These four themes already introduced in the previous discussion are discussed below in relation to the literature to illustrate and expand the occupational justice theory. The focus of this discussion is to outline the ways in which place and space, gender and culture influence occupational needs. To date there has been limited acknowledgement of these individual and culturally bound factors in the occupational justice literature.

Acknowledgement of these aspects of occupation serve to redirect the focus of the profession to influence the social structures, systems and policies that inhibit or restrict the occupational opportunities for people experiencing homelessness to enable participation in valued occupations.

11.4 Wellbeing as a Consequence of Occupying Place and Space

This study highlights the reciprocal relationship between occupation and environment and the synergistic influences of context on what people do and how they do it (Creek, 2010; Hamilton, 2010; Polatajko et al., 2007). Contextual factors including the physical, social, cultural and institutional environments are recognised as important influences of occupational choice, motivation, and performance (Kielhofner, 2008; Polatajko et al., 2007). The environment provides opportunities and resources, which create a demand or press towards certain occupations, or conversely constrain and restrict other occupations (Kielhofner,

2008). The presence or absence of a home as a space of safety and belonging has major implications for the opportunities, motivation and the performance of occupations and therefore the importance of place and space on the wellbeing of people who are homeless is a major finding of this study.

A biological perspective of human occupation is consistent with medical models of health, which positions the person as separate from the environment, and views the interactions between person and context as dualistic (Wilcock, 2006). In relation to the concept of 'making a home' this dualistic approach is inadequate, and a transactional approach has been suggested (Dickie, Cutchin, & Humphry, 2006; Skellariou & Pollard, 2009). The relationship between a person and their home is dialectic in that both person and home are influenced by each other. Over time and through the act of living, or 'occupying' a place, the building becomes a home and the person becomes shaped and connected to the building. The meaning of home is multidimensional and personal, influenced by physical, social, emotional and cognitive factors and cannot be defined universally (Mallet, 2002; Sixsmith, 1986; Sommerville, 1992). When considering the relationship between a person who is homeless and their 'home', or the public spaces, temporary shelter, drop in centre or park where they 'live', the functionality of the relationship is co-defining and can be viewed as a transaction that joins a person to the environment (Dickie et al., 2006). The transaction between the person and place is greater than the use of the physical environment for living; home flows from the creative, imagined and emotional responses to space and changes both the person and building through the transaction.

This study demonstrates how people who are defined as homeless in Townsville maintain connections to places and spaces through which they affirm their identity and belonging. The concept of 'place' is defined within social psychology as space endowed with meaning; from an occupational perspective place is a subjective construction related to the lived experience (Lewicka, 2008; Stedman, 2003). Repeated use and significant association with places leads to 'place attachment', an emotional connection between person and specific settings where they tend to remain or feel safe (Hidalgo & Hernandez, 2001, p.274). Place attachment is influenced by the development and maintenance of social relationships, and by the involvement of people with places that extend from buildings, to neighbourhoods and to cities (Chow & Healey, 2008; Christian et al., 2011; Hernandez, Hidalgo, Salazar-Laplace, & Hess, 2007). Age is an important factor to place attachment, as people age they become

increasingly attached, primarily to homes, and secondarily to neighbourhood and cities, due to the symbolic meanings imbibed through their occupations (Hernandez et al., 2007; Hidalgo & Hernandez, 2001). 'Place identity' is the degree to which people construct their identity around places to which they are attached. These theoretical concepts of place, place attachment and place identity are of relevance to the findings of the study as people experiencing homelessness expressed both attachment and identity concerns in relation to their current housing or homelessness.

The collective narrative of women with children who were living in crisis housing, confirmed the importance of place attachment to home on the day-to-day activities of women. Crisis accommodation creates a demand on the women to continue to engage in routine domestic occupations to maintain a home for themselves and their children. Housekeeping is a necessary chore that lacked meaning when the housing was temporary, with little or no positive emotional attachment to the physical structure. This was in marked contrast to the occupation of making a permanent home, a place of safety for the family and a shared place that expresses the identity of the family. For Diane putting up the family pictures was the first priority in making the new accommodation home, this symbolic action confirmed the right for the family to do what they wanted to the physical building and establish a connection and place identity for the family. Through the occupation of hanging pictures a transactional relationship between the family and the building occurred through which both were instantly changed. This occupational transaction creates meaning not simply from the outcome of the transaction but 'flowing from the aesthetic, imaginative, creative and emotional modes of the transaction as well' (Dickie et al., 2006, p.90). Housing homeless families in permanent accommodation ensures a place where the family can become attached, establish an identity, and create a possibility for occupational transactions to occur as integrative processes between people and environments (Dickie et al., 2006).

This study confirms a transactional perspective of the interactions between place and space and people who are homeless, which is influenced by opportunities for occupational engagement. The opportunities afforded for occupation by people who are homeless create a relationship with place and space that is co-defining and dynamic. Through frequent use of public and service spaces people experiencing homelessness felt connected to, or a sense of belonging to, a place. Simultaneously, frequent and repeated use of a place or space creates opportunities for occupations and a sense of connectedness or belonging. As such occupation,

in all its dimensions of doing, being, becoming and belonging, can be viewed as the mediator through which place attachment occurs. This was evident in the participants' descriptions of their occupations and the opportunities available to them in the places and spaces that they used. For public place dwellers, finding a place to sleep that was safe and dry is a priority, some participants refer to these places as their camps and regularly return to the same spot. One participant talked of her 'little home':

"I don't go back to the place until night time. Nobody can see me then even though the lights on. It gets too hot there for me so I just got to keep walking around. I had no blanket, nothing so I had to find myself a blanket... I leave that there... They are sort of good people there, they don't take nothing... they don't mind so long as I am very quiet and as long as I keep the place clean... you might as well say it is my little home. I just go there even when I find a book or something, I just go and read."

(Ulna)

Finding and using a place repeatedly allows for occupations to occur, which would otherwise be constrained. Through this transaction, public space becomes private space and a temporary and improvised home or base, from which the person must journey to obtain other resources and to which they can return when the occupations of the day are over (Sheehan, 2011). From the perspective of people experiencing homelessness having a base or camp provides safety and a sense of identity. Such use of public place inevitably must be 'negotiated' with owners, or hidden from both the police and the public who may be intolerant of and unsympathetic to the private use of public space. Finding a place is therefore a tentative arrangement subject to the threat of eviction or discovery.

In the absence of a domestic home people experiencing homelessness engage in daily self-care and leisure occupations in public spaces and places such as the Drop In Centre or night shelters. These facilities provide important opportunities for essential maintenance (food, bathing facilities and basic health care) and prevent survivalist crime (Johnson et al., 2005). They also provide opportunities for social interaction, information and advice and a place for homeless people to simply be and therefore be less visible to the general public (Johnson et

al., 2005). Through repeated use, familiarity and the social connections afforded through drop-in centres and shelters, people experiencing homelessness can develop a sense of place and connectedness, albeit within a communal place (Robinson, 2005). Through regular use and familiarity places become endowed with symbolic and interpretive meaning allowing the development of a sense of attachment, comfort and belonging to particular places that become significant to the wellbeing of individuals (Stedman, 2003). The interviews in this study demonstrate that an attachment to communal facilities comes through the occupations such places facilitated, such as the Art Program, computers and screw assembly work. One participant continued to come to the Drop In Centre after he was housed because this was where he met his friends, another said of the work opportunities:

“It gives me something constructive to do. It’s only an hour or so work, but when I’ve finished you can think well I’ve cleaned these parks up.”

(Bert)

The meaning afforded to occupations is central to the person-place relationship and having a sense of belonging to and identification with a place encourages occupational transactions that inherently contribute to identity (Heatwole Shank & Crutchin, 2010). Through regular use of the material, affective and social support provided by services and staff that listen and interact the Drop In Centre, shelters and other services have the potential to become ‘enabling places’ (Duff, 2011, p.150) as well as ‘spaces of care’ (Christian et al., 2011; Johnson et al., 2005, p.806).

Movement between places of connection creates ‘a daily path’ that is travelled frequently to meet subsistence needs and access social services (Robinson, 2005; Rowe & Wolch, 1990, p.198). The walking paths of participants comprised the means of getting to different locations, a routine of daily life, a diversion from routine and time to simply be (Radley, Chamberlain, Hodgetts, Stolte, & Groot, 2010). The journey between places becomes an occupation, not only filling time but adding to wellbeing as purposeful mobility between places of importance and meaning (Cattell, Dines, Gesler, & Curtis, 2008). Previous researchers have explored the meanings of movement for people who are living in hostels. Knowles’ (2000) research of people with mental health conditions who live in the community provides an account of the importance of individual agency expressed through such journeys:

Those who live in shelters, in rooming, houses, and on the street and who graze from food banks, soup kitchens and day centres generate (a version of) the city, not as overlapping zones of occupation but as a series of nodal points connected by the movement of people between them. Lives are not lived in place but in the threading together of places as sequential scenes in their trajectories. It is in the activities of lives and bodies connecting places that the grammar of space is written, configured through the agency of lives. Lives are hence best framed and understood as multiple journeys from place to place and not as the processes occurring in one particular place (p.217).

Movement through familiar locations provides a sense of place and belonging, through which the individual experiences a kind of home (Hodgetts et al., 2010). For some participants walking provides opportunities for social encounters with people in the housed community and to pass as 'resident' and experience a sense of community (Cattell et al., 2008; Radley et al., 2006). For others, walking from one place to another allowed for time to think and to be alone whilst moving through the city unnoticed by others or passing for members of the housed community. Mobility is central to understanding the role of place, particularly in the lives of homeless people who are often moved along and displaced by the authorities (Hodgetts et al., 2008). Banishment orders and police enforced mobility is increasingly an inevitable part of the homeless experience, preventing prolonged occupation of the most valuable public places and confining the homeless to the less desirable and marginal locations, reinforcing negative aspects of homeless identity as marginal (Cloke, May, & Johnsen, 2008; Rowe & Wolsh, 1990). Mobility provides an occupational function both in conforming to the regulated use of public place and resisting attempts to be relegated to those formal institutions providing services (Cloke et al., 2008; Hodgetts et al., 2010).

The human right to occupy space and place is compromised for people experiencing homelessness and limits the opportunities for engagement in meaningful occupations. Homes provide situated meaning for a variety of self-care, homemaking, maintenance and leisure occupations that simultaneously increase attachment and identity. In the absence of a home a limited selection of these occupations can be carried out in homeless services or in public places, although the risk of being forcibly removed is ever present. Opportunities to engage with the community are limited in Townsville, some public spaces such as the library or the Strand are currently available whereas access to the newly refurbished city mall by homeless

people is prevented by security patrols. Public space and mobility through the city affords people experiencing homelessness time alone and opportunities to communicate with, and as 'normal' residents of Townsville. Inclusion in community is rare and the separation of those who are homeless from the community is reinforced by negative attitudes and local laws that restrict access to public places and a denial of shared humanity (Cloke et al., 2008).

In this respect, a situation of occupational injustice exists based on the fundamental human right to occupy public space and to engage in social interactions with members of the housed community (Standyk et al., 2010; Townsend & Wilcock, 2004). The systematic marginalisation and criminalisation of visible practices of homelessness in Townsville, as evidences in this study, is comparable to a form of occupational apartheid or segregation within the community as an 'effect of laws, restrictions, assumptions and attitudes' (Pollard, Kronenberg, & Sakellariou, 2009, p.56), which become culturally embedded. Restrictions of access to place and space can be viewed as both occupational alienation, the restricted right to experience meaningful, enriching occupation, and occupational marginalisation, the lack of choice and exclusion in relation to homeless persons use of public space (Townsend & Wilcock, 2004). The importance of place as integral to the occupational transactions of people has previously been discussed. Restriction in access to public and private spaces limits the available occupational choices and therefore threatens the occupational wellbeing of people experiencing homelessness (Hammell, 2008). This study reinforces the need to focus outside of the individual factors pertaining to homelessness and to work towards more just and inclusive structural policies that encourage engagement in meaningful occupations and community participation for people experiencing homelessness.

11.5 Wellbeing through Occupation: Influence of Gender and Culture

The evolving theory of occupational justice claims that all people have occupational rights to engage in occupations that enable them to flourish consistent with culture and beliefs (WFOT, 2006). There is an implied understanding of both universal human rights and individual differences, however the theoretical framework has not to date explored occupational justice from either a feminist perspective or an Indigenous perspective. This research provided an opportunity to explore in more depth the concept of occupational justice in relation to women and to Indigenous Australians. Prior to outlining these findings, I first

clarify the methodological justification and limitations of this study, in relation to these findings.

The results of this study demonstrate how gender and culture shapes occupational needs and occupational justice for people experiencing homelessness. My personal and professional interest in social justice generally and occupational justice more specifically contributes a critical stance towards social policy, an interest in fairness and a concern with what creates a better society (Charmaz, 2005). Arising from this commitment, my research methodology took a strengths-based and constructivist approach to discovery, through a pragmatic and pluralistic montage of methods. There is increasing acknowledgement that boundaries between research paradigms and perspectives are blurring and interbreeding as research methodologies emerge from scholars of different disciplines and perspectives and influence each other (Denzin & Lincoln, 2005; Guba & Lincoln, 2005). The influence of feminist, action research, critical theory and participatory models on this research and on my learning and discovering is relevant to this discussion (Guba & Lincoln, 2005). It is therefore justifiable to discuss the findings of this constructivist case study on homelessness in Townsville with references to gender and cultural differences drawn from feminist and cultural standpoints of critical theory, without claiming these perspectives were utilised in the research design. I propose that further research using critical paradigms would be of value to the profession generally and specifically around the concept of occupational justice.

In occupational therapy gender and culture are commonly seen as personal attributes of individual clients, essentially their sex and ethnicity, influencing the motivations and performance of occupations and are accounted for by a client-centred approach to interventions (Iwama, 2007). Occupation is either discussed as universal i.e. all people engage in occupation or, conversely, individual i.e. 'the occupation in which someone engages and the amount of time spent doing the occupation is idiosyncratic' (Polatajko, Backman, Baptiste, Davis, Eftekhar et al., 2007, p.40). There has been very limited discourse to the influence of gender and culture in relation to occupation compared to the considerable literature on the influence of age and disability on occupation (Skellariou & Pollard, 2009). A recent study of occupational therapists demonstrated that participants 'objected to a gendered perception' of occupational needs as value-loaded and preferred 'value-free approaches' that did not identify needs based on gender (Liedberg, Björk, & Hensing, 2010, p.336). However, the non-reflective replication of subjective values by occupational therapists together with a

stereotypical approach to gender is not countered through education in client-centred practice (Liedberg & Hensing, 2011). Borrowing from critical theory, an alternative approach to gender and culture questions the privileges afforded by normative social constructs and recognises the influence of social and historical forces on an individual's view of themselves and the world (Kincheloe & McLaren, 2005). As such, the influence of gender and culture on both individuals and in the form of normative social values, influence the desirability and accessibility of occupations and therefore wellbeing.

As a discovery of meaning the influence of gender and culture on the link between wellbeing and occupation was immediately apparent in the narratives of participants. This has inevitably influenced the reporting of the findings as collective narratives and of the interpretation of meaning. The focus here is not to encourage assumptions regarding individual occupational or wellbeing needs, but rather on understanding the influence of gender and culture on the choice and motivation towards occupation and on occupational justice theory.

11.6 Wellbeing through Occupation: Women and Homelessness

Chapter 8 reports the findings of a small number of women living with children in crisis accommodation, providing an untypical perspective of homelessness that contrasts the dominant homeless narratives of those living on the streets. Previous research on women experiencing homelessness have focused on chronic homelessness and street dwellers (Radley et al., 2006), women who had experienced domestic violence (Montgomery, 1994; Trickett & Chung, 2007), those recovering from addiction (Heuchemer & Josephsson, 2005) and women with children living in shelters (Hodniki & Horner, 1993; Levin & Helfrich, 2003; Vanleit, Starrett, and Crowe, 2006). One previous study conducted with formerly homeless families in supported single site housing demonstrates the range of coping abilities and high resilience of some high-risk families (Gewirtz, DeGarmo, Plowman, August, & Realmuto, 2009).

This study identifies the occupations of the women with children living in crisis accommodation centred on performing effective roles of mother and provider of security for themselves and their family (Levin & Helfrich, 2003). An urgent need to protect the children from the reality of homelessness called for maintenance of normal routines and providing

alternative explanations for moving. This study shows that security issues are paramount for women with children, and confirm the fundamental human need for a secure home to nurture children (Wilcock, 2006). From an occupational perspective, being a mother includes managing the stresses of homelessness by keeping going, being strong, maintaining family life, working towards a more positive future, and reaffirms the importance of doing, being, belonging and becoming to wellbeing (Wada, Backman, & Forwell, 2010).

Caring for children physically, materially and emotionally is critical to the women's wellbeing and self identity, and requires self sacrifice, careful management of limited resources and nurturing the children (Finfgeld-Connett, 2010; Hodniki & Horner, 1993). Participants valued highly the occupations associated with mothering; they recognised the importance of this role to their own sense of identity and wellbeing in the face of homelessness. Being homeless conflicted with their self concept of being a good mother and was articulated in phrases such as 'being a failure' and 'letting the children down', the women with children compensated by continuing to provide loving care to their children whilst working toward and hoping for a permanent house. An emphasis on mothering occupations and caring increased wellbeing and alleviated feelings of guilt and shame associated with becoming homeless. The women in this study demonstrated that through their caring occupations and other tasks involved in keeping the family together they were able to create meaningful lives (Montgomery, 1994).

The mothers were aware of the negative effect of homelessness on their children's wellbeing and were able to readily identify changes in their children's behaviour reflecting a loss of security. Memories of unstable accommodation in their own childhood provided motivation to ensure a better future for their own children. Focusing on the children distracted them from personal concerns and increased resilience despite significant problems with mood, physical health and family conflict (Gewirtz et al., 2009). When time allowed women engaged in occupations that were aimed toward coping with personal stress, through relaxation, interactions with friends and church communities. In comparison to the opportunities afforded to homeless men in this study, mothering within a crisis accommodation situation, while undoubtedly stressful, provided the women with a full-time socially valued occupation that created meaning and purpose to their lives. The temporary nature of crisis accommodation resulted in the women living out their lives 'on hold', waiting for a more permanent place and a base from which they could achieve the broader aims of financial

security through work and independence. The availability of crisis accommodation appears integral to maintaining hope for the future and the possibility of becoming permanently housed.

The story of these women and their occupations sits in stark contrast to the stories of both non-Indigenous men and of Indigenous homelessness as demonstrated in Chapters 8 and 9. However, in the four interviews of Indigenous women who were living on the street there was also evidence of caring occupations. One participant talked of staying in the city at night to watch out for the elders:

“I walk around till I find them and then just keep an eye on them and make sure nothing happens to them. Some of them, and I know I am sort of sickly but they need more attention than me, especially the elderly. I cannot back answer the elder, there is always going to be someone there for them, even though they have nothing to eat, and when they really want to go to [the hostel] I get someone to come and pick them up, or I get the coppers.”

(Ulna)

The four Indigenous women experiencing homelessness were older than the women with children. Three lived on the streets and one lived at Happy Valley in an improvised dwelling. All four lived alone without partners and children although they talked about their adult children with pride and concern. Some had experienced previous trauma and violence from partners. For the Indigenous women homelessness was the consequence of a series of losses including loss of children, partners, and family members as well as the historical losses of land and culture associated with colonisation (Trickett & Chung, 2007). The Indigenous women who participated in this project had hopes of getting accommodation in the future and associated having their own home with opportunities for self-development and happiness.

While the occupations of the women with children and the Indigenous women differed in part due to age and responsibility, caring and the importance of having a secure home was more evident for the women in this study than for the men. As such, caring occupations are embedded in gendered roles and when these roles are congruent with the individuals' values provide opportunities for meaning and purpose in life (Wada et al., 2010).

Issues of gender and social roles are apparent in this study on homelessness; homelessness for women means insecurity and shame whereas having a permanent home was associated with identity of a good woman and mother, including abstaining from drinking and taking up opportunities for education and training.

11.7 Wellbeing through Occupation: Indigenous Homelessness

This study illustrates how homelessness in Townsville intersects with issues of culture and specifically the effects of colonisations on Indigenous peoples in this region. More than half of the participants in this study were Indigenous and spoke openly of historical issues of dispossession and dislocation from traditional lands, language and culture in their interviews. The high incidence of Indigenous homelessness in the town is in part explained by the proximity of Townsville to Palm Island, described in Chapter 1. Other participants originated from other Indigenous communities in North Queensland and moved to Townsville for various reasons, including the opportunity to be close to kinship relatives. The most significant finding in terms of the occupations of Indigenous people experiencing homelessness is the importance of belonging to and being with ‘the mob’ to the experience of wellbeing. This finding challenges perceptions of ‘Parkies’ as predominantly drinking partners, although there is no doubt that drinking is part of this occupation. Being with and socially connected to the group of people who sit in the parks from an occupational perspective fulfils both agency and identity needs through an occupational experience.

In this study, Indigenous Australians included both the chronically homeless and others who were temporarily homeless in Townsville but identified alternative homes in other areas. For example one participant had been living in a shelter in Mt Isa but had come to Townsville for a visit; another had been working on Palm Island but had finished work and decided to come to Townsville for a break and was primarily living in the park. For the transitory homeless the duration of stay in Townsville varied from weeks to months, during which time they made regular use of the services for homeless people. Periods of living in public places might also be punctuated by staying with friends and family.

A culture of mobility exists within Indigenous Australian populations, particularly for relatively younger people in rural and remote areas, involving short rather than long-distance migration (Kinfu, 2005; Memmott et al., 2006). Indigenous mobility intersects with

homelessness in Townsville often leading to beliefs that Indigenous people choose to be homeless. Mobility of Indigenous Australians has economic and cultural meaning with movement between locations associated with a history of past migration and socio-cultural influences (Peterson, 2004; Taylor & Bell, 2004; Memmott et al., 2006). This study found people frequently moved between Townsville parks, other family residences in town, and other localities in Queensland, seeing each location as a place of belonging and family home. Some mobility is attributed to accessing services such as shopping, sporting events, education, health services, and employment; however cultural and historic attachments to place and community prevail (Memmott et al., 2006). Many of the Indigenous people who are homeless in Townsville express a deep connection to Townsville as a place of belonging and of significant kinship relationships with residents and other homeless people in the area.

From an occupational justice perspective Indigenous mobility is connected with disadvantage. Mobile Indigenous people are frequently unemployed, have no permanent housing or accumulated possessions, and generally do not have children of school age, or associated commitments (Taylor & Bell, 2004). Therefore, mobility is more common amongst the younger age groups, and also reflects the situation for many older Indigenous people. This lack of commitments and obligations is not the reason for mobility, rather Indigenous people relocate to invest in cultural activities and kinship relationships (Kinfu, 2005; Prout, 2009). As demonstrated in this research Indigenous people spent time in the parks predominantly to meet an occupational need to be with, and belong to, the people within their groups, often referred to as brother and sisters, 'the mob' fulfilled the role of kinships groups.

The cultural significance of kinship relations and mobility cannot be underestimated for Indigenous wellbeing. Kinship relationships both trigger, and provides support structures for Indigenous mobility, whilst mobility maintains kinship relationships, thus the relationship between mobility and kinship is synergistic (Memmott et al., 2006). Mobility practices that affirm kinship relationships and reciprocity are not only means for survival, such cultural practices foster identity and belonging (Prout, 2009). Reciprocity is central to the kinship system, structuring relationships as economic, social and political and creating a social obligation to care for and support kin through regular association (Habibis et al., 2011; Penman, 2007). For Indigenous people who were homeless in Townsville these economic and emotional obligations were expressed through being with 'the mob', and sharing their limited

resources collectively. Drinking together and taking turns in procuring alcohol demonstrates these obligations of reciprocity in which individuals are alternately supported by and contribute to the wellbeing of others. Alcohol becomes the currency of the kinship, and the means by which people affirm their identity, interdependence and social connectedness.

Indigenous mobility can be considered an occupation that results in social identity, reinforcing kinship relationships through affirming ones place within these networks. The spatial parameters of social mobility is referred to as an individual's 'beat' or set of places where he or she can expect to find hospitality, economic support if necessary and potentially a spouse (Memmott et al., 2006). In this study Indigenous participants spent time together in the parks, at the Drop In Centre, and at the hostel. They also visited family and friends who had houses and to whom they felt connected and where they were welcomed as visitors, sometimes for several days. These movements are frequently viewed by service providers as erratic, demonstrating a reluctance to settle and were considered to be driven by addiction. Using the concept of Indigenous mobility, this study suggests movement of Indigenous people between various places is an occupation that meets wellbeing needs through the 'procurement, contestation and cultivation of social, cultural and economic security and belonging' (Prout, 2009).

Although at the time I did not understand the significance of kinship relationships that exist within Indigenous homelessness, as I reach the end of the journey I recognise the fundamental truth in two remarks:

"I'm married to the mob in the street; they are all my cousins and brothers in the street and all my mob from Palm Island and all kinds of places, in-laws from everywhere."

(Greg)

"If they ever take these people away from me I will die too, we grew up together on Palm, we are all different tribes but we are all the same. If they take this mob away from me I will die, just their faces, how we talk, and my land..."

(Mick)

In contrast to viewing mobility as a reluctance to be housed, and assuming a choice to be homeless, this finding suggests that for Indigenous people moving into single person

independent accommodation would risk the loss of kinship relationships and obligations and ultimately threaten the identity and wellbeing of Indigenous Australians.

Occupational therapy theory is founded on Western epistemologies, which culturally biases the profession in its understanding of occupation as previously discussed. The primacy attributed in occupational therapy to productive and goal orientated occupations readily identifiable as purposeful and meaningful over being and belonging occupations is grounded on Western ways of knowing and doing (Iwama, 2007; Iwama, 2010; Watson, 2006). Alternative models of practice are needed to adequately meet the needs of people from collective cultures.

There is a growing demand for Australian occupational therapists to work towards culturally appropriate interventions through developing competence and adapting practices to meet the needs of Indigenous clients (Nelson, Allison, & Copely, 2006; Nelson et al., 2011; Paluch, Boltin, & Howie, 2009). This study is the first to explore the occupations of Indigenous Australians experiencing homelessness and provides an initial step to an understanding of culturally appropriate occupational therapy practices for this population. Previous studies have explored occupational therapy in relation to Indigenous children (Dender & Stagnetti, 2011; Nelson & Allison, 2007), Aboriginal and Torres Strait Islander older adults (Stedman & Thomas, 2011) and Indigenous aging in the community (Waugh & McKenzie, 2011). Recognition of the priority given to being with an identifiable social group, and of the importance of collective occupations for Indigenous Australians, provides further direction to culturally appropriate practice. To date, no specific occupational therapy models have been developed to address the needs of Indigenous Australians; the findings of this study suggest that models that recognise the importance of relationships and belonging would be beneficial in addressing Indigenous health disadvantages in Australia (Wronski, Stronach, & Felton-Busch, 2010).

There has been growing recognition of shared occupations that are engaged in collectively within a social context at the level of families, communities and populations. The development of theory on collective occupations is in its infancy. Ramugondo and Kronenberg (2010) proposed the following working definition of collective occupations:

Occupations that are engaged in by groups, communities and/or populations in everyday contexts, and may reflect a need for belonging, a collective intention towards social cohesion or dysfunction and/or advancing or averting a common good (p.2).

This concept compliments the findings of this current study in relation to Indigenous wellbeing through occupation. Indigenous people achieve their wellbeing needs by engaging in the collective occupation of being part of ‘the mob’. From a collectivist stance the outcome of such occupation can be seen as doing well together despite being marginalised from the community. The collectivist occupation of ‘being with the mob’ sustains wellbeing through belonging and social cohesion. This study also confirms the mobility of Indigenous Australians, which is frequently lived out in periods on homelessness.

11.8 Implications of the Research

Homelessness is a complex social issue encompassing a continuum of human experiences that precede, include and continue after the loss of secure accommodation. This study has a particular emphasis on the most vulnerable people experiencing the most visible aspects of homelessness, the people who live in public places, or families in crisis and in need of emergency and crisis housing. The study demonstrates the complexity of homelessness as more than the absence of a physical home; rather that homelessness is occupationally defined by the dominance of fulfilling survival needs and ensuring wellbeing through limited occupational opportunities. It is evident in this study that individual responses to homelessness are multifaceted and grounded in cultural and individual beliefs and roles. An important feature of this study was its aim to counter deficit portrayals of homelessness and explore how people utilise the available opportunities and their personal agency to engage in occupations that enhance wellbeing in difficult and resource poor circumstances. Through engagement in meaningful occupations people experiencing homelessness achieve survival and wellbeing. This study suggests that by extending the opportunities available for engagement in community occupations and improving occupational justice for people experiencing homelessness occupational therapists can aim to rebuild lives. Five major implications of the study to homelessness services and the occupation theory are outlined below.

11.8.1 Sustaining Hope through Service Provision

Homeless people are faced with a high level of vulnerability to threats, difficulty in meeting basic human needs and the potential for serious illness and death on a day-to-day basis. Survival is the occupational response to that threat and contributes to wellbeing through obtaining food, washing, obtaining clothes and, importantly, finding a safe place to sleep. Without hope, the day-to-day struggle to survive would be meaningless and escaping reality through alcohol and drug use more attractive (Partis, 2003). The provision of services that meet basic safety and survival needs for those who are homeless should aim towards engendering hope for the future. This study demonstrates that social support, trusting relationships with staff and opportunities to engage in occupations that are meaningful affirm and provide a tangible basis for hopefulness.

The findings demonstrate the importance of permanent housing to families who are homeless. For the women who have children hope for a different and secure future was evident, and hinged on access to stable housing. For people experiencing long periods of homelessness hope and community connections may be lost; individuals will need assistance to restore hope by exploring and discovering strengths, values and meaning. Providing opportunities to engage in occupations such as art and using the internet is an important first step towards regaining hope and making decisions towards wellbeing. Such individuals have a tenuous sense of hope and therefore the achievement of life changing goals such as housing, employment and abstinence from addiction at the onset of interventions may be unrealistic and inappropriate.

11.8.2 Contribution to Australian Homeless Policy

From a professional perspective, the evolving theory of occupational justice directs the gaze of the profession on developing interventions that challenge injustice by promoting change at a systems level. The current homelessness policy in Australia is embedded in a social inclusion agenda however there is little emphasis on participation outside of the conventional goals of housing and employment (Australia. Homelessness Taskforce, 2008). Increasing occupational opportunities for those who are chronically homeless not only increases individual wellbeing, such opportunities provide a first step towards community participation and inclusion. This study suggests that occupational therapists could utilise their expertise in the development of policy, programs and services that aim to increase opportunities for occupational engagement as a step towards employment.

For people living on the streets, gaining employment requires a change in occupational focus and motivations. Their daily lives and meaning of engagement is focused on fulfilling necessary shelter, food and hygiene needs and maintaining wellbeing through practical and cognitive strategies that support a sense of satisfaction in life. The requirements of work places, for example, to meet time commitments, interact effectively in the work place and engaging in tasks that have future orientation present obvious challenges for people experiencing homelessness. Steps towards this transition could be achieved through community based programs that facilitate engagement in meaningful occupations whilst providing support and encouraging the development of skills and aptitudes relevant to future employment. Such opportunities have previously been shown to be effective such as community gardens, social enterprises, men's sheds, art programs and street soccer.

11.8.3 Occupational Inclusion in Public Space

An important finding of this study is the significance of place and space in providing occupational opportunities for wellbeing. Increasing access and acceptability of people experiencing homelessness in public places that facilitate engagement is a first step towards occupational justice. It has been identified that public spaces provide opportunities for social inclusion and interactions that sustain a sense of community and connectedness (Cattell et al., 2008). The use of banishment laws and move-on powers that deliberately restrict access to public space challenge concepts of self, increase marginalisation and inhibit wellbeing. At a systems level these punitive measures should be challenged and replaced with humanitarian and just approaches that facilitate inclusion. This study has identified how some people who are homeless experienced inclusion in specific spaces and places such as some hostels, the library and in the public exhibition of artwork, however, community inclusion is rare. Access to places and spaces that facilitate regular and visible inclusion in community events and local amenities would enhance wellbeing and facilitate community engagement.

11.8.4 Extending Occupation Theory to Include Pluralistic Approaches

Research on subjective wellbeing demonstrates cultural differences when viewed across nations, supporting the concept that cultural values influence happiness and satisfaction with life (Tov & Deiner, 2009). Broadly, differences are frequently attributed to concepts of cultural collectivism and individualism, and based on polarised philosophies of the East and West. These cultural concepts have been adopted within the occupational therapy literature

and alternative models of interventions developed (Bonder, Martin, & Miracle, 2004; Iwama, 2010). In relation to Indigenous cultures in Australia there is increasing acknowledgement of the significance of ‘indigenous knowledges’ (Nakata, 2002), cultural values and the ongoing consequences of colonisation to the health and wellbeing of Indigenous Australians. It is therefore essential that interventions accommodate and respect cultural differences in relation to wellbeing through active engagement in cultural discourses. While distinctions between individualist and collectivist cultures provide a valuable comparison at community levels, application of such broad generalised concepts of culture are inadequate for developing responses to the occupational needs of people, groups and communities. The specific occupational needs, values and goals of people, groups and communities provide a more accurate basis for appropriate interventions, than assumptions based primarily on culture.

11.8.5 The Link between Occupation and Cognition

This study demonstrates that individuals who experienced higher subjective wellbeing could articulate how they achieved and sustained wellbeing through occupation (including mind management). The interplay between occupation and cognitive strategies is worthy of further investigation as this research suggests that having control over ones thoughts and deliberately engaging in positive behaviours and thoughts sustain wellbeing for people who are materially disadvantaged. For some people having a joke and a laugh was recognised as an important occupation that maintained wellbeing. Building on theoretical concepts of volition as the process of anticipation, making choices, experience and interpretation, further investigation is warranted to explore cognitive strategies can be adaptive responses to achieve wellbeing (Kielhofner, 2008). Individuals who are homeless and experience higher levels of subjective wellbeing know what they need to do to maintain positive thoughts and have the capability to achieve these needs despite their lack of resources. This finding suggests that individuals adapt to their circumstances through a process of redefining their needs according to the opportunities that are available to them. Therefore maintaining wellbeing through occupation is an ever-evolving process of adaptation of needs based on self-awareness.

11.9 Conclusion: The Journey Continues

In this final chapter, I have drawn together the main findings of the research to highlight the discoveries of meaning encountered through the research journey. These discoveries are presented as four themes, which, consistent with the constructivist paradigm utilised in this

study, illustrate some of the diversity of experiences and meanings of wellbeing arising from the experience of homelessness. Returning to the study aim and my original motivation for this research to discover the link between occupation and wellbeing for people experiencing homelessness in Townsville, it is important to note that these findings are not the whole story. There are others stories of homelessness, for example youth homelessness, that have not been part of this study as noted in the limitations of the study (Chapter 5). Further research could address the occupations of other people that are homeless and explore the outcomes of their occupational opportunities. As I come towards the end of this thesis, it is clear that this is not the end of the journey; there are further journey's to be taken in the future. The relationships I have developed with service providers and participants in Townsville will provide future opportunities for research and development of occupational services. There are also opportunities for other occupational therapy researchers in other locations to explore alternative perceptions of wellbeing and occupations of homeless people that are culturally and geographically determined.

As a personal journey, this study has challenged me in multiple ways to discover the knowledge and attributes required of a researcher. This journey involved drawing on past experiences and on the knowledge of others to discover and design a research path congruent to my beliefs and values, to conduct this research with integrity. Through prolonged engagement I have been able to establish relationships of trust and respect as the basis through which the research was conducted. These relationships do not end here and will provide opportunities to continue engagement with the people and services in Townsville with whom I have become a trusted friend. In this journey I have actively sought to ensure that my research will not add to the marginalisation experienced by people who are homeless though the use of a strengths perspective. In reporting the findings of the study to local funders and service providers and to the media my aim is to ensure that wherever possible this study will highlight the resilience and capacities of people experiencing homelessness to contribute to community through positive engagement opportunities. The future journey needs to address occupational injustice as it currently exists in Townsville through creating opportunities for community engagement.

For the occupational therapy profession this research contributes to the evolving theory of occupational justice through the discovery of place and space as a contributor to wellbeing. This discovery is related here to bylaws and practices that prevent people experiencing

homelessness access to public space and support discrimination against homeless people. The right to access place and space has received little attention in the occupational therapy literature despite the obvious consequences in relation to occupational opportunities and may have implications for other disadvantaged groups. This study contributes a new perspective of occupational justice that fits with concepts of alienation and apartheid while focusing on the ability to use space and place in order to participate in occupations of being and belonging. The dominant theories of occupation prioritise 'doing' and 'becoming' over 'being' and 'belonging' however this study suggests that for marginalised people survival and social relationships, achieved through being and belonging, are significant contributors to subjective wellbeing. The future professional research will involve further exploration of the importance of place and space to other occupationally deprived populations.

Similarly, a journey into culturally relative occupational therapy has already begun (Iwama, 2010). The growing interest in understanding the occupational therapy theory in relation to different cultural beliefs and values through the global professional discourses is predicted to result in the development of culturally relevant models over the next decade. There are currently no specific occupational therapy models that address the occupational needs and values of Indigenous peoples in colonised countries, although research in this area has begun (Frank, 2011). Occupational therapists and researchers in Canada, New Zealand, Australia, US and South America may benefit from working together to explore similarities and differences in occupation and wellbeing across Indigenous communities. This study has been the first Australian study to explore homelessness from an occupational perspective and has discovered differences between Indigenous Australians and other Australians. The occupational therapy journey of Indigenous wellbeing in Australia is in its early stages and further work is needed both for Australian Indigenous peoples and collectively for Indigenous people across colonised countries. As considered essential in this study the future journey will include Indigenous researchers, collaborators and mentors.

For homeless people in Townsville the journey continues. While the government policy and agenda has undoubtedly improved the range of services and increased housing opportunities the journey from marginalisation to community engagement continues. This study has shown that homelessness is a continuum of experiences; for those that were recently housed and engaged in the community, housing is necessary to re-establish the occupational routines and goals that will allow people to flourish. The availability of support to maintain hope and

empower those that are in crisis and temporarily homeless guards against further losses and psychologically descending into despair that results in more entrenched forms of homelessness. People who are chronically homeless require more active opportunities to reengage and it is this reengagement journey that I have termed as rebuilding lives of meaning that occupational therapy can contribute to. This journey of homelessness requires a step-by-step approach to community participation that is currently unavailable in Townsville. Through working with individuals and understanding the processes required for reengagement the future journey will help to identify key services and supports required.

Together these three journeys, the personal, the professional and the homelessness, have begun in this study. There is clearly much to do in the future and as an occupational therapy educator and researcher I see an important part of my future journey is to educate and inspire students and graduate occupational therapists to share this work with me and continue to discover new journeys of their own.

11.10 Summary

This research utilised a case study approach to investigate homelessness in Townsville using an ‘occupational lens’, and in this respect provides a distinctive and alternative view of homelessness in all of its complexity. The legitimacy of an occupational perspective of health has been confirmed through this investigation, which supports the principle that human beings are innately occupational, even when opportunities for engagement in socially valued and obligatory occupations are restricted. Further, this study demonstrates that when people are unable to access basic human rights due to external factors such as poverty, lack of housing, unemployment and loss of citizenship their occupations are increasingly centred on the satisfaction of basic survival needs on a day-to-day basis. Survival needs are not homogenous and people who experience homelessness communicate and fulfil their survival needs in diverse ways depending on their social situation, culture, gender, beliefs and aspirations.

An important finding of this study on wellbeing in homelessness demonstrates how perspectives of wellbeing are fundamentally individual and grounded in personal experience, relationships, opportunities and beliefs. This person-centred approach to wellbeing emphasises the conscious and reflective abilities of people to come to understand how

wellbeing is achieved and the constituent of personal wellbeing. The research demonstrates that individuals who experienced higher subjective wellbeing could clearly articulate how they achieved and sustained wellbeing through occupation (including mind management). From an occupational perspective human beings achieve wellbeing through both individual and collective occupations in coherent patterns of engagement, as supported by the opportunities available. When opportunities for engagement are restricted, meaning and purpose is actively created from the limited choices available, regardless of the values of the society from which participation is marginalised. Simply put we do what we can with the limited resources we have at our discretion to maintain our sense of wellbeing.

This study has highlighted differences between people in the range of occupations and their social and cultural meanings relative to the subjective experience of wellbeing. The use of collective narratives has demonstrated how individuals ascribe meaning and value to occupations in accordance with their individual, social and cultural needs and values. The findings of this study demonstrate cultural and social influences mediate the benefits and motivation for occupational engagement and provide strong evidence that 'doing' and 'becoming' is less relevant to Indigenous Australians than 'being' and 'belonging'. The primacy of belonging to 'the mob' identified in the collective Indigenous narrative of homelessness provides clear direction for intervention and policies that support opportunities for maintaining and sustaining relationships to meet this need. An application of the current research confirms that the occupations of Indigenous people who are homeless are potentially more appropriately understood through the perspective of collective occupations. Such occupations influence wellbeing through the negotiated and occupational interactions between members and are fundamental to the wellbeing of Indigenous people experiencing homelessness.

The importance of inclusion in community space and place to the wellbeing of people who are homeless has been highlighted. In the absence of a home, access to services such as the Drop In Centre and hostels provide an alternative space for eating, washing and sleeping, but lack the aspects of privacy and control normally associated with having a home. Therefore people who are homeless need to find other places where they can be alone or feel they belong. The study suggests that it is through occupation that the meaning of space is socially constructed both individually and collectively (Hamilton, 2010). Over time and through repeated use places become familiar, symbolic and distinctive territory, affirming identity and

power. Similarly banishment and exclusion from space and place is detrimental to individuals and groups, both personally and politically.

For people experiencing homelessness public spaces provide opportunities for chance encounters with homed members of society and a chance to feel 'normal' and connected to community. Opportunities for these positive encounters are rare and inhibited by negative perceptions of homeless people as dangerous or undeserving. There is a role for occupational therapists to encourage occupational justice at a systems level by working with local government and community organisations to promote and encourage opportunities for social participation in community. Such inclusive actions would encourage people experiencing homelessness to access public spaces and places and engage in socially accepted occupations alongside other community residents. Inclusion in community through occupational justice reduces marginalisation and provides an important step towards achieving the goal of housing the homeless.

References

- Aldrich, R. M. (2011). A review and critique of well-being in occupational therapy and occupational science. *Scandinavian Journal of Occupational Therapy*, 18(2), 93-100.
- Anaf, S., & Sheppard, L. (2007). Physiotherapy as a clinical service in emergency departments: A narrative review. *Physiotherapy*, 93, 233-292. doi: 10.1016/j.physio.2007.04.006
- Anderson, I. (2003). Synthesising homelessness research: Trends, lessons and prospects. *Journal of Community and Applied Social Psychology*, 13, 197-205.
- Ansell, D. I., & Casey Family Programs. (2005). Ansell Casey life skills assessment Retrieved 14th May 2010, from http://www.caseylifeskills.org/pages/assess/assess_aclsa.htm
- Antonovsky, A. (1979). *Health, stress and coping*. San Francisco: Jossey-Bass.
- Australia, C. O. A. G. (2008). *COAG Communique 29th November 2008* Canberra: Retrieved from http://www.coag.gov.au/coag_meeting_outcomes/2008-11-29/#housing.
- Australia. Homelessness Taskforce. (2008). *The road home: A national approach to reducing homelessness*. Canberra, ACT: Department of Families, Housing, Community Services and Indigenous Affairs Retrieved from http://www.fahcsia.gov.au/housing/homelessness_white_paper/the_road_home.pdf.
- Australia: Commonwealth Advisory Committee on Homelessness (CACH). (2006). *Indigenous homelessness within Australia*. Canberra: Commonwealth Department of Families, Community Services and Indigenous Affairs.
- Australian Bureau of Statistics. (2011). *Regional population growth 2011*.
- Aviles, A., & Helfrich, C. (2004). Life skills service needs: Perspective of homeless youth. *Journal of Youth and Adolescence*, 32(4), 331-338.
- Aviles, A., & Helfrich, C. (2006). Homeless youth: Causes, consequences and the role of occupational therapy. Homelessness in America: Perspectives, characterizations, and considerations for occupational therapy. *Occupational Therapy in Health Care*, 20, 99-114.
- Babidge, S. (2010). *Anthropology and Cultural History in Asia and the Indo-Pacific : Aboriginal Family and the State : The Conditions of History*. Farnham, Surrey, GBR: Ashgate Publishing Group.
- Barras, S. (2005). A systematic review of the literature: Effectiveness of occupational therapy home assessment on a range of outcome measures. *Australian Occupational Therapy Journal*, 52, 326-336. doi: 10.1111/j.1440-1630.2005.00496.x
- Bedding, S., & Sadlo, G. (2008). Retired People's Experience of Participation in Art Classes. *British Journal of Occupational Therapy*. *British Journal of Occupational Therapy*, 71(9), 371-378.
- Berry, M., MacKenzie, D., Briskman, L., & Ngwenya, T. (2001). *Victorian Indigenous homelessness study: Prepared for the Aboriginal Housing Board of Victoria*.
- Bhui, K., Shanahan, L., & Harding, G. (2006). Homelessness and mental illness: A literature review and a qualitative study of perceptions of the adequacy of care. *International Journal of Social Psychiatry*, 52(5), 152-165. doi: 10.1177/0020764006062096
- Birdsall-Jones, & Shaw. (2008). *Indigenous homelessness: Place, house and home*. AHURI positioning paper No. 107.
- Bishop, R. (2005). Freeing ourselves from neocolonial domination in research: A Kaupapa Maori approach to creating knowledge. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (3rd ed., pp. 109-138). Thousand Oaks: Sage Publications.

- Biswas-Diener, R., & Diener, E. (2006). The subjective well-being of the homeless, and lessons for happiness. *Social Indicators Research*, 76, 185-205.
- Black, W., & Living, R. (2004). Volunteerism as an occupation and its relationship to health and wellbeing. *British Journal of Occupational Therapy*, 67(12), 526-532.
- Boland, L., & O'Mahony, P. (2002). A study of experiences and expectations of homeless men with schizophrenia. *Irish Journal of Occupational Therapy*, 32(1), 2-9.
- Bonder, B. R., Martin, L., & Miracle, A. W. (2004). Culture emergent in occupation. *American Journal of Occupational Therapy*, 58, 159-168.
- Bryne, D. (2005). *Social Exclusion*. Maidenhead: Open University Press.
- Bryne, P., Raphael, E., & Coleman-Wilson, A. (2010). Art as a transformative occupation. *OT Practice*, March 22nd, 2010, 13-17.
- Burt, M., Pearson, C., & Montgomery, A. (2005). Strategies for preventing homelessness. A report for U.S. Department of Housing and Urban Development.
- Canadian Association of Occupational Therapist (CAOT). (2002). *Enabling occupation: An occupational therapy perspective* (Revised ed.). Ottawa: CAOT publications ACE.
- Cantrill, H. (1965). *The patterns of human concern*. New Brunswick: N.J. Rutgers University Press.
- Casey, R., Goudie, R., & Reeve, K. (2008). Homeless women in public spaces: Strategies of resistance. *Housing Studies*, 23(6), 899-916.
- Cattell, V., Dines, N., Gesle, W., & Curtis, S. (2008). Mingling, observing, and lingering: Everyday public spaces and their implications for well-being and social relations. *Health and Place*, 14, 544-561.
- Chamberlain, C. (1999). Counting the homeless: Implications for policy development. Canberra: Australian Bureau of Statistics.
- Chamberlain, C., Johnson, G., & Theobald, J. (2007). *Homelessness in Melbourne: Confronting the challenge*. RMIT, Melbourne.
- Chamberlain, C., & MacKenzie, D. (2003). Counting the homeless 2001. Canberra: Australian Census Analytic Program, Australian Bureau of Statistics.
- Chamberlain, C., & MacKenzie, D. (2008). Counting the homeless 2006: Australian Bureau of Statistics.
- Chamberlain, K., Cain, T., Sheridan, J., & Dupuis, A. (2011). Pluralism in qualitative research: From multiple methods to integrated methods. *Qualitative Research in Psychology*, 8(2), 151-169.
- Chapleau, A. (2010). Voices from the street: How structural and individual factors influence homelessness. *Occupational Therapy in Mental Health*, 26(4), 387-400. doi: 10.1080/0164212X.2010.518310
- Chard, D., Faulkner, T., & Chugg, A. (2009). Exploring occupation and its meaning among homeless men. *British Journal of Occupational Therapy*, 72(3), 116-124.
- Charmaz, K. (2005). Grounded theory in the 21st century: Application for advancing social justice. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (3rd ed., pp. 507-545). Thousand Oaks: Sage.
- Christian, J., Clapham, D., & Abrams, D. (2011). Exploring homeless people's use of outreach services: Applying a social psychological perspective. *Housing Studies*, 26(5), 681-699.
- Christiansen, C. (2000). Identity, personal projects and happiness: Self-construction in everyday action. *Journal of Occupational Science*, 7(3), 98 - 107.
- Christiansen, C. (2007). Adolf Meyer revisited: Connections between lifestyles, resilience and illness. *Journal of Occupational Science*, 14(2), 63-76.

- Christiansen, R. C. (2009). Psychiatric street outreach to homeless people: Fostering relationship, reconnection and recovery. *Journal of Health Care for the Poor and Underserved, 20*(4), 1036-1040.
- Christie, M. (2006). Transdisciplinary research and Aboriginal knowledge. *Australian Journal of Indigenous Education, 35*, 78-89.
- Ciaranello, A., Molitor, F., Leamon, M., Kuenneth, C., Tancredi, D., Diamant, A., & Kravitz, R. (2006). Providing health care services to the formerly homeless: A quasi-experimental evaluation. *Journal of Health Care for the Poor and Underserved, 17*(2), 441-461.
- Clapham, D. (2003). Pathways approaches to homelessness research. *Journal of Community and Applied Social Psychology, 13*, 119-127.
- Cloke, P., May, J., & Johnsen, S. (2008). 'Performativity and affect in the homeless city'. *Environment and Planning: Society and Space, 26*(2), 241-263.
- Coffey, A., & Atkinson, P. (1996). *Making sense of qualitative data: Complimentary research strategies*. Thousand Oaks: Sage.
- Coldwell, C., & Bender, W. (2007). The effectiveness of assertive community treatment for homeless populations with severe mental illness: A meta-analysis. *American Journal of Psychiatry, 164*, 393-399. doi: 10.1176/appi.ajp.164.3.393
- Common Ground. (n.d.). Common Ground, from <http://www.commonground.org.au>
- Commonwealth of Australia. (1994). Supported accommodation services Act Retrieved 26th September, 2011, from <http://www-old.infoxchange.net.au/SAAP/saap3.htm>
- Commonwealth of Australia. (2006). Supported accommodation assistance program (SAAP). Annual national performance report 2004-2005.
- Commonwealth of Australia. (2008a). Closing the gap on indigenous disadvantage: The challenge for Australia Retrieved 15th December, 2009, from http://www.fahcsia.gov.au/sa/indigenous/pubs/general/documents/closing_the_gap/default.htm
- Commonwealth of Australia. (2008b). Which way home: A new approach to homelessness *Australian Government Green Paper*. Canberra.
- Commonwealth of Australia. (2009). A stronger, fairer Australia. A national statement on social inclusion.
- Connor, A., & Donohue, M. L. (2010). Integrating faith and health in the care of persons experiencing homelessness using the parish nursing faculty practice model. *Family and Community Health, 33*(2), 123-132.
- Conradson, D. (2003). Spaces of care in the city: the place of a community drop-in centre. *Social & Cultural Geography, 4*(4), 507-525.
- Cooperrider, D., & Whitney, D. (2005). *Appreciative inquiry: A positive revolution in change*. San Francisco: Berrett-Koehler.
- Cooperrider, D., Whitney, D., & Stavros, J. (2008). *Appreciative inquiry handbook for leaders of change* (2nd ed.). Brunswick: Crown Custom Publishing.
- Cosgrove, L., & Flynn, C. (2005). Marginalized mothers: Parenting without a home. *Analyses of Social Issues and Public Policy, 5*(1), 127-143.
- Costanza, R., Fishera, B., Alib, S., Beer, C., Bond, L., Boumansa, R., & Snappo, R. (2007). Quality of life: An approach integrating opportunities, human needs, and subjective well-being. *Ecological Economics, 61*, 267-276.
- Crane, M., Bryne, K., Fu, R., Lipman, B., Mirabelli, F., Rota-Bartelink, A., . . . Warnes, A. (2005). Causes of homelessness in later life: Finding from a 3-Nation study. *Journal of Gerontology B, 60*(3), S152-S159. doi: 10.1093/geronb/60.3.S152
- Creek, K. (2010). *The core concepts of occupational therapy: A dynamic framework for practice*. London: Jessica Kingsley Publishing.

- Crotty, M. (1998). *Foundations of social research: Meaning and perspectives in the research process*. London: Sage.
- CSDH. (2008). Closing the gap in a generation: Health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Geneva: World Health Organisation.
- Cummins, R. (2010). Subjective wellbeing: Homeostatically protected mood and depression: A synthesis. *Journal of Happiness Studies*, 11, 1-17. doi: 10.1007/s10902-009-9167-0
- Curtin, M., & Fossey, E. (2007). Appraising the trustworthiness of qualitative studies: Guidelines for occupational therapists. *Australian Occupational Therapy Journal*, 54(2), 88-94.
- D'Onise, K., Wang, Y., & McDermott, R. (2007). The importance of numbers: Using capture-recapture to make the homeless count in Adelaide. *Australian Journal of Primary Health*, 13(1), 89-96.
- Dade Smith, J. (2007). *Australia's rural and remote health: A social justice perspective* (2nd ed.). Croydon, Victoria: Tertiary Press.
- Davis, J., & Kutter, C. (1998). Independent living skills and post-traumatic stress disorder in women who are homeless: Implications for practice. *American Journal of Occupational Therapy*, 52(1), 39-44.
- De Verteuil, G., May, J., & Von Mahs, J. (2009). Complexity not collapse: Recasting the geographies of homelessness in a 'punative' age. *Progress in Human Geography*, 33(5), 646-666. doi: 10.1177/0309132508104995
- Dender, A. & Stagnitti, K. (2011) Development of the Indigenous child-initiated pretend play assessment: Selection of play materials and administration. *Australian Occupational Therapy Journal*, 58(1), 34-42.
- Denzin, N., & Lincoln, Y. (2005a). Introduction: The discipline and practice of qualitative research. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (3rd ed., pp. 1-32). Thousand Oaks: Sage Publications.
- Denzin, N., & Lincoln, Y. (2005b). *Sage Handbook of Qualitative Research* (3rd ed.). Thousand Oaks: Sage Publications.
- Department of Communities. (2010). Queensland strategy for reducing homelessness, 2010-20 background paper: Queensland Government.
- Dickie, V., Cutchin, M., & Humphrey, R. (2006). Occupation as transactional experience: A critique of individualism in occupational science. *Journal of Occupational Science*, 13(1), 83-93.
- Dixon, J., Levine, M., & McAuley, R. (2006). Locating impropriety: Street drinking, moral order, and the ideological dilemma of public space. *Political Psychology*, 27(2), 187-206.
- Dobel, S., & Santha, J. (2008). Occupational well-being: Rethinking occupational therapy outcomes. *Canadian Journal of Occupational Therapy*, 75(3), 184-190.
- Dockery, A. M. (2009). Culture and wellbeing: The case of Indigenous Australians: Centre for Labour Market Research Discussion Paper.
- Drake, M. (1992). Level 1 fieldwork in a day care for homeless children. *Occupational Therapy in Health Care*, 8(2/3), 215-224.
- Duff, C. (2011). Networks, resources and agencies: On the character and production of enabling places. *Health and Place*, 17(149-156).
- Dunbar, T., & Scrimgeour, M. (2006). Indigenous health research ethics in Australia: Applying guidelines as the basis for negotiating research agreements. *Monash Bioethics Review*, 25(2), 53-62.
- Dunton, W. (1919). *Reconstruction therapy*. Philadelphia: WB Saunders.

- Eakman, A. (2007). Occupation and social complexity. *Journal of Occupational Science*, 14(2), 82-91.
- Farber, R. (2004). Experience of mothers with disabilities: Learning from their voices. In S. A. Esdaile (Ed.), *Mothering occupations: Challenge, agency and participation* (pp. 93 -216). Philadelphia: F.A. Davis Company.
- Fawcett, B., & Reynolds, J. (2010). Mental health and older women: The challenges for social perspectives and community capacity building. *British Journal of Social Work*, 40(5), 1488-1502.
- Feen-Calligan, H., Washington, O. G., & Moxley, D. P. (2009). Homelessness among older African American women: Interpreting a serious social issue through the arts in community-based participation of action research. *New Solutions: A Journal of Environmental and Occupational Health Policy*, 19(4), 423-448.
- Fetterman, D. (2009). Ethnography. In Bickman & Rog (Eds.), *The Sage handbook of applied social science research methods* (pp. 543-587). Thousand Oaks: Sage Publications.
- Fieldhouse, J. (2003). The impact of an allotment group on mental health clients' health, wellbeing and social networking. *British Journal of Occupational Therapy*, 66(7), 286-296.
- Fien, J., Charlesworth, E., Lee, G., Baker, D., Grice, T., & Morris, D. (2010). Life on the edge : housing experiences in three remote Australian indigenous settlements. *Habitat International*. Draft accessed at <http://eprints.qut.edu.au/39325/1/c39325.pdf>.
- Fine, S. (1991). Resilience and human adaptability: Who rises above adversity. *American Journal of Occupational Therapy*, 45, 493-503.
- Fingeld-Connett, D. (2010). Becoming homeless, being homeless, and resolving homelessness among women. *Issues in Mental Health Nursing*, 31(7), 461-469. doi: 10.3109/01612840903586404
- Flick, U. (2007). Homelessness and health: Challenges for health psychology. *Journal of Health Psychology*, 12(5), 691-695.
- Foley, D. (2000). Indigenous research, Differing value systems. *Australian Journal of Indigenous Education*, 28(1), 17-30.
- Fossey, E., & Harvey, C. (2010). Finding and sustaining employment: A qualitative meta-synthesis of mental health consumer views. *Canadian Journal of Occupational Therapy*, 77(5), 303-314. doi: 10.2182/cjot.2010.77.5.6
- Frank, G. (2011). The transactional relationship between occupation and place: Indigenous cultures in the American Southwest. *Journal of Occupational Science*, 18(1), 3-20.
- Frankish, C. J., Hwang, S., & Quantz, D. (2005). Homelessness and health in Canada: Research lessons and priorities. *Canadian Journal of Public Health*, 96(Health Module), S23-S29.
- Fredericks, B. L. (2007). Utilising the concept of pathway as a framework for indigenous research. *Australian Journal of Indigenous Education*, 36(S), 15-22.
- Freeman, M., deMarrais, K., Preissie, J., Roulston, K., & St.Pierre, E. (2007). Educational Researcher, 36(1), 25-32.
- Gallaher, G., Zierch, A., Baum, F., Bentley, M., Palmer, C., Edmonson, W., & Winslow, L. (2009). *In our own backyard - Urban health inequities and Aboriginal experiences of neighbourhood life, social capital and racism*. Adelaide: Flinders University.
- Ganesharajah, C. (2009). Indigenous health and wellbeing: The importance of country *Native Title Research Report*: Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS).
- Gewirtz, A. H., DeGarmo, D. S., Plowman, E. J., August, G., & Realmuto, G. (2009). Parenting, parental mental health, and child functioning in families residing in supportive housing. *American Journal of Orthopsychiatry*, 79(3), 336-347.

- Gewurtz, R., Stergiou-Kita, M., Shaw, L., Kirsh, B., & Rappolt, S. (2008). Qualitative meta-synthesis: Reflections on the utility and challenges in occupational therapy. *Canadian Journal of Occupational Therapy, 75*(5), 301-308.
- Glass, R., Sevitz, B., Williamson, S., Wink, S., & Duncan, M. (2006). The occupational needs of homeless people at a place of renewal in Cape Metropole. *South African Journal of Occupational Therapy, 36*(1), 11-13.
- Gowan, T. (2009). New hobos or neo-romantic fantasy? Urban ethnography beyond the neoliberal disconnect. *Qualitative Sociology, 32*(3), 231-257. doi: 10.1007/s11133-009-9133-5
- Grandisson, M., Mitchell-Carvalho, M., Tang, V., & Korner-Bitensky, N. (2009). Occupational therapists' perceptions of their role with people who are homeless. *British Journal of Occupational Therapy, 72*, 491-498. doi: 0.4276/030802209x12577616538672
- Greenwood, D., & Levin, M. (2005). Reform of the social sciences and of universities through action research. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (pp. 43-64). Thousand Oaks: Sage.
- Griffiths, S., & Corr, S. (2007). The use of creative activities with people with mental health problems: A survey of occupational therapists. *British Journal of Occupational Therapy, 70*(3), 107-114.
- Grimer, K. (2006). Helping the homeless: An occupational therapy perspective. *Occupational Therapy in Mental Health, 22*(1), 49-61. doi: 10.1300/J004v22n01 04
- Guba, E., & Lincoln, Y. (2005). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *The sage handbook of qualitative research* (3rd ed., pp. 191-215). Thousand Oaks: Sage.
- Gutman, S., Diamond, H., Holness-Parchment, S., Brandofino, D., Jolly-Edouard, M., & Jean-Charles, S. (2004). Enhancing independence in women experiencing domestic violence and possible brain injury: An assessment of an occupational therapy intervention. *Occupational Therapy in Mental Health, 20*(1), 49-79. doi: 10.1300/J004v20n01 03
- Habibis, D., Birdsall-Jones, C., Dunbar, T., Scrimgeour, M., Taylor, E., & Nethercote, M. (2011). Improving housing responses to Indigenous patterns of temporary mobility *AHURI Final Report No. 162*. Melbourne: Australian Housing and Urban Research Institute.
- Hamilton, T. (2010). Occupation and places. In C. Christiansen & E. Townsend (Eds.), *Introduction to occupation: Art and science of living* (pp. 251-305). New Jersey: Pearson.
- Hale, S. (1996). *"This is where we all meet": Aboriginal park dwellers and local authority responses: A call for progressive leadership*. Townsville, Qld: Centre for Social and Welfare Research, James Cook University of North Queensland.
- Hammell, K. (2004). Dimensions of meaning in the occupations of daily life. *Canadian Journal of Occupational Therapy, 71*(5), 296-305.
- Hammell, K. (2008). Reflections on ... well-being and occupational rights. *Canadian Journal of Occupational Therapy, 75*(1), 61-64.
- Hansen, E. (2006). *Successful qualitative health research: A practical introduction*. Crows Nest: Allen and Unwin.
- Harnett, H., & Johnson, T. (2008). Anatomy of a mean city: Including people experiencing homelessness in the discussion. *Journal of Social Distress and the Homeless, 17*, 171-191.
- Harvey, D. (2009). Complexity and case. In D. Byrne & C. Ragin (Eds.), *The sage handbook of case-based methods* (pp. 15-38). London: Sage Publications.

- Hasselkus, B. (2006). The world of every day occupation: Real people real lives. *American Journal of Occupational Therapy*, 60(6), 627-640.
- Healy, K. (2005). *Social work theories in context: Creating frameworks for practice*. Hampshire: Healy, K. (2005). *Social Work Theories in Context; Creating frameworks for practice*. Hampshire: Palgrave MacMillan.
- Heatwole Shrank, K. & Cutchin, M. (2010). Transactional occupations of older women aging-in-place: Negotiating change and meaning. *Journal of Occupational Science*, 17(1), 4-13.
- Helfrich, C., Aviles, A., Bandiani, C., Walens, D., & Sabol, P. (2006). Life skills interventions with homeless youths, domestic violence victims and adults with mental illness. *Occupational Therapy in Health Care*, 20(3/4), 189-207. doi: 10.1300/J003v20n03 12
- Helfrich, C., & Fogg, L. (2007). Outcomes of a life skills intervention for homeless adults with mental health illness. *Journal of Primary Prevention*, 28, 313-326. doi: 10.1007/s10935-007-0103-y
- Helliwell, J., & Putnam, R. (2004). The social context of wellbeing. In F. Huppert, N. Baylis & B. Keverne (Eds.), *The science of wellbeing* (pp. 1435-1146). London: Oxford University Press.
- Herbert, S., & Beckett, K. (2010). "This is home for us": Questioning banishment from the ground up. *Social and Cultural Geography*, 11(3), 231-245. doi: 10.1080/14649361003637661
- Hernandez, B., Hidalgo, C., Salazar-Laplace, E., & Hess, S. (2007). Place attachment and place identity in natives and non-natives. *Journal of Environmental Psychology*, 27, 310-319. doi: 10.1016/j.jenvp.2007.06.003
- Herth, K. (1996). Hope from the perspective of homeless families. *Journal of Advanced Nursing*, 24, 743-753.
- Herzberg, G., Ray, S., & Swensson Miller, K. (2006). The status of occupational therapy: Addressing the needs of people experiencing homelessness. *Occupational Therapy in Health Care*, 20(3/4), 1-8. doi: 10.1300/J003v20n03 01
- Heubner, J., & Tryssenaar, J. (1996). Development of an occupational therapy practice perspective in a homeless shelter: A fieldwork experience. *Canadian Journal of Occupational Therapy*, 63(1), 24-32.
- Heuchemer, B., & Josephsson, S. (2005). Leaving homelessness and addiction: Narratives of an occupational transition. *Scandinavian Journal of Occupational Therapy*, 13, 160-169.
- Hicks, D. (2004). *Conceptual linkages and measurement challenges in development*. Paper presented at the UNU-WIDER Conference on Inequality, Poverty and Human Well-Being, Helsinki. Invited paper No. 2004/31 retrieved from
- Hidalgo, M. C., & Hernandez, B. (2001). Place attachment: Conceptual and empirical questions. *Journal of Environmental Psychology*, 21, 273-281.
- Hodgetts, D., Radley, A., Chamberlain, K., & Hodgetts, A. (2007). Health inequalities and homelessness: Considering material, spatial and relational dimensions. *Journal of Health Psychology*, 12(5), 709-725. doi: 10.1177/1359105307080593
- Hodgetts, D., Stolte, O., Chamberlain, K., Radley, A., Groot, S., & Nikora, L. (2010). The mobile hermit and the city: Considering links between places, objects, and identities in social psychological research on homelessness. *British Journal of Social Psychology*, 49, 285-303.
- Hodgetts, D., Stolte, O., Chamberlain, K., Radley, A., Nokora, L., Nabalarua, E., & Groot, S. (2008). A trip to the library: Homelessness and social inclusion. *Social and Cultural Geography*, 9(8), 933-953. doi: 10.1080/14649360802441432

- Hognikii, D., & Horner, S. (1993). Homeless mothers' caring for children in a shelter. *Issues in Mental Health Nursing, 14*(4), 349-356.
- Horsell, C. (2006). Homelessness and Social Exclusion: A Foucauldian Perspective for Social Workers *Australian Social Work, 2*, 213-225.
- Humpage, L. (2006). An 'inclusive' society: A leap forward for Maori in New Zealand. *Critical Social Policy, 26*(1), 220-242.
- Hunter, B. (2000). Social exclusion, social capital and indigenous Australians: Measuring the social costs of unemployment. Canberra: Centre for Aboriginal Economic Policy Research, Australian National University.
- Hunter, B. (2008). *Indigenous social inclusion: Insights and challenges for the concept of social inclusion*. Paper presented at the Brotherhood of St Laurance, Social Inclusion Down Under Symposium. Accessed at: http://www.bsl.org.au/pdfs/Hunter_symposium_paper_26Jun08.pdf
- Hurley, M. (2007). Who's on whose margins? In M. Pitts & A. Smith (Eds.), *Researching the margins: Strategies for ethical and rigorous research with marginalised communities* (pp. 160-189). Hampshire, UK: Palgrave Macmillan.
- Hwang, S., Gogosis, E., Chambers, C., Dunn, J., Hoch, J., & Aubry, T. (2011). Health status, quality of life, residential stability, substance use, and health care utilization among adults applying to a supportive housing program. *Journal of Urban Health: Bulletin of the New York Academy of Medicine (online)*. Retrieved from doi:10.1007/s11524-011-9592-3
- Hwang, S., Tolomiczenko, G., Kouyoumdjian, F. G., & Garner, R. E. (2005). Interventions to improve the health of the homeless: A systematic review. *American Journal of Preventive Medicine, 29*(4), 311-319.
- Iannelli, S., & Wilding, C. (2007). Health enhancing effects of engaging in productive occupations: Experiences of young people with mental illness. *Australian Occupational Therapy Journal, 54*, 285-293.
- Ikiugu, M. N. (2005). Meaningfulness of occupation as an occupational life trajectory attractor. *Journal of Occupational Science, 12*(2), 102-109.
- Iwama, M. (2004). Meaning and inclusion: Revisiting culture in occupational therapy. *Australian Occupational Therapy Journal, 51*(1), 1-2.
- Iwama, M. (2007). Culture and occupational therapy: Meeting the challenge of relevance in a global world. *Occupational Therapy International, 14*(4), 183-187.
- Iwama, M. (2010). Cultural perspectives of occupational therapy. In C. Christiansen & E. Townsend (Eds.), *Introduction to occupation: The art and science of living*. New Jersey: Pearson.
- Jensen, H. (1993). What it means to get off sit-down money: Community development employment projects (CDEP). *Journal of Occupational Science, 1*(2), 12-19.
- Johnsen, S., Cloke, P., & May, J. (2005). Day centres for homeless people: Spaces of care or fear? *Social and Cultural Geography, 16*, 787-811.
- Johnson, G., & Chamberlain, C. (2009). *Are the homeless mentally ill?* Paper presented at the 6th National Housing Conference, Melbourne, Australia.
- Johnson, J. (2001). *Re-framing homelessness: An occupational adaptation perspective*. Unpublished doctoral thesis. Texas Womens' University. US.
- Johnson, J. (2006). Describing the phenomenon of homelessness through the theory of occupational adaptation. *Occupational Therapy in Health Care, 20*(3/4), 63-80. doi: 10.1300/J003v20n03 05
- Kannenberg, K., & Boyer, D. (1997). Occupational therapy evaluation and intervention in an employment program for homeless youths homeless. *Psychiatric Services, 48*(5), 631-633.

- Kantartzis, S., & Molineux, M. (2011). The influence of western society's construction of a healthy daily life on the conceptualisation of occupation. *Journal of Occupational Science*, 18(1), 62-80.
- Kashner, T. M., Rosenheck, R., Campinell, A. B., Suris, A., Crandall, R., Garfield, N. J., . . . Wicker, A. (2002). Impact of work therapy on health status among homeless, substance-dependent veterans: A randomized controlled trial. *Archives of General Psychiatry*, 59(10), 938-944.
- Kavanagh, J., & Fares, J. (1995). Using the model of human occupation with homeless mentally ill clients. *British Journal of Occupational Therapy*, 58(10), 419-422.
- Kemmis, S., & McTaggart, R. (2005). Participatory action research: Communicative action and the public sphere. In N. Denzin & Y. Lincoln (Eds.), *Handbook of Qualitative Research (3rd Ed.)*. London: Sage.
- Keys Young. (1998). Homelessness in the Aboriginal and Torres Strait Islander context and its possible implications for the Supported Accommodation Assistance Program (SAAP) (D. o. F. a. C. Services, Trans.). Sydney, NSW.
- Kidd, S., & Davidson, L. (2007). "You have to adapt because you have no other choice": Strength and resilience of 208 homeless youth in New York City and Toronto. *Journal of Community Psychology*, 35(2), 219-138.
- Kidd, S., Kirkpatrick, H., & George, L. (2011). Getting to know Mark. A homeless alcohol-dependant artist, as he finds his way out of the river. *Addiction Research and Theory*, 19(2), 102-111. doi: 10.3109/16066359.2010.500063
- Kidd, S. A. (2009). "A lot of us look at life differently": Homeless youth and art on the outside. *Cultural Studies - Critical Methodologies*, 9(2), 345-367.
- Kielhofner, G. (2008). *Model of human occupation: Theory and Application* (4th ed.). Baltimore: Lippencott, Williams and Wilkins.
- Kiepek, N., & Magalhaes, L. (2011). Addictions and impulse-control disorders as occupation: A selected literature review and synthesis. *Journal of Occupational Science*, 18(3), 254-276.
- Kincheloe, J., & McLaren, P. (2005). Rethinking critical theory and qualitative research. In N. Denzin & Y. Lincoln (Eds.), *Sage handbook of qualitative research* (3rd ed., pp. 303-342). Thousand Oaks: Sage Publications.
- Kinfu, Y. (2005). Spatial mobility among Indigenous Australians: Patterns and determinants *Working papers in demography No. 97: Demography and Sociology Program*, Research School of Social Sciences, Australian National University.
- Knight, J., Ball, V., Corr, S., Turner, A., Lowis, M., & Ekberg, M. (2007). An empirical study to identify older adults' engagement in productivity occupations. *Journal of Occupational Science*, 14(3), 145-153.
- Knowles, C. (2000). Burger King, Dunkin Donuts and community mental health care. *Health and Place*, 6(3), 213-225.
- Kryda, A., & Compton, M. (2009). Mistrust of outreach workers and lack of confidence in available services among individuals who are chronically street homeless. *Community Mental Health Journal*, 45(2), 144-150. doi: 10.1007/s10597-008-9163-6
- Kumar, R. (2011). *Research methodology: A step-by-step guide for beginners* (3rd ed.). London: Sage.
- Law, M., Stewart, D., Letts, L., Pollock, N., Bosch, J., Westmorland, M., & Philpot, A. (1998). *Guidelines for critical review of the literature: Qualitative studies*.
- Law, M., Stewart, D., Pollock, N., Letts, L., Bosch, J., Westmorland, M., & et al. (1998). *Guidelines for critical review of the literature: Quantitative studies*. Unpublished document. McMaster University. Hamilton, ON.

- Lee, B., & Farrell, C. (2003). Buddy, can you spare a dime? Homelessness, panhandling and the public. *Urban Affairs Review*, 18(3), 299-324. doi: 10.1177/1078087402238804
- Lefcowitz, M., & Wallston, B. (1973). Self-anchoring scale: Does it make a difference. *Sociological Methods and Research*, February 1973(1), 387-399. doi: 10.1177/004912417300100307
- Levin, M., & Helfrich, C. (2004). Mothering role identity and competence among parenting and pregnant homeless adolescents. *Journal of Occupational Science*, 11(3), 95-104.
- Lewicka, M. (2008). Place attachment, place identity, and place memory: Restoring the forgotten city past. *Journal of Environmental Psychology*, 28, 209-231.
- Liedberg, G., Bjork, M., & Hensing, G. (2010). Occupational therapists' perceptions of gender - A focus group study. *Australian Occupational Therapy Journal*, 57(5), 331-338. doi: 10.1111/j.1440-1630.2010.00856.x
- Liedberg, G., & Hensing, G. (2011). Occupational therapy students' choice of client activities: Does patients' gender matter? *British Journal of Occupational Therapy*, 74(6), 277-283. doi: 10.4276/030802211X13074383957904
- Lloyd, C., & Bassett, H. (2010). The role of an Australian homeless health outreach team Part 1: Background. *International Journal of Therapy and Rehabilitation*, 17(7), 376-381.
- Lloyd, C., & Papas, V. (1999). Art as therapy within occupational therapy in mental health settings: a review of the literature. *British Journal of Occupational Therapy*, 62(1), 31-35.
- Lloyd, C., Tse, S., & Deane, F. (2006). Community participation and social inclusion: How practitioners can make a difference. *AeJAMH*, 5(3), 1-10.
- Lloyd, C., Wong, S. R., & Petchkovsky, L. (2007). Art and recovery in mental health: a qualitative investigation. *British Journal of Occupational Therapy*, 70(5), 207-214.
- Ludwig, F. M. (1997). How routine facilitates wellbeing in older women. *Occupational Therapy International*, 4(3), 215-230.
- Lyons, M., Orozovic, N., Davis, J., & Newman, J. (2002). Doing-being-becoming: Occupational experiences of persons with life threatening illnesses. *American Journal of Occupational Therapy*, 56(3), 285-294.
- Lysack, C., Luborsky, M., & Dillaway, H. (2006). Gathering qualitative data. In G. Kielhofner, (Ed.), *Research methods in occupational therap* (pp.241-275). Thorofare: Slack.
- MacKnee, C., & Mervyn, J. (2002). Critical incidents that facilitate homeless peoples transition off the streets. *Journal of Social Distress and the Homeless*, 11(4), 293-306.
- Mallett, S. (2004). Understanding home: A critical review of the literature. *The Sociological Review*, 52(1), 62-89.
- Martin-McDonald, K., & McCarthy, A. (2008). 'Marking' the white terrain in indigenous health research: Literature review. *Journal of Advanced Nursing*, 61(2), 126-133. doi: 10.1111/j.1365-2648.2007.04438.x
- Martin, K. (2003). Ways of knowing, being and doing: A theoretical framework and methods for Indigenous and Indigenist research. In K. McWilliam, P. Stephenson & G. Thompson (Eds.), *'Voicing Dissent' New Talents 21C: Next Generation Australian Studies no 76* (pp. 203-214). St Lucia, Qld: University of Queensland Press.
- Martin, K. (2008b). *Please knock before you enter: Aboriginal regulation of outsiders and the implications for researchers*. Teneriffe, Qld: Post pressed.
- Martinez, T., & Burt, M. (2006). Impact of permanent supportive housing on the use of acute care health services by homeless adults. *Psychiatric Services*, 57, 992-999. doi: 10.1176/appi.ps.57.7.992
- Maslow, A. H. (1943). A Theory of Human Motivation. *Psychological Review*, 50, 370-396.
- Max-Neef, M. (1991). *Human scale development*. New York: Apex Press.

- McAllister, F. (2005). Wellbeing concepts and challenges: Discussion paper, Accessed from http://www.sd-research.org.uk/wp-content/uploads/sdrnwellbeingpaper-final_000.pdf
- McDonald, A. (2006). The after-school occupations of homeless youth: Three narrative accounts. *Occupational Therapy in Health Care*, 20(3/4), 115-133.
- McGillivray, M., & Clarke, M. (2007). Human wellbeing: Concepts and measures. In M. McGillivray & M. Clarke (Eds.), *Understanding human wellbeing* (pp. 3-16). Tokyo: United Nations Press.
- McHugo, G., Bebout, R., Harris, M., Cleghorn, S., Herring, G., Xie, H., . . . Drake, R. (2004). A randomized controlled trial of integrated versus parallel housing services for homeless adults with severe mental health services. *Schizophrenia Bulletin*, 30(4), 969-982.
- Melnitzer, S. (2007). Marginalisation and the homeless: A prescriptive analysis. *Journal of Social Distress and the Homeless*, 16(3), 191-220.
- Memmott, P., & Chambers, C. (2005). Executive summary: Inner-city Sydney Aboriginal homeless research project. Brisbane: Aboriginal Environments Research Centre, University of Queensland.
- Memmott, P., Long, S., Chambers, C., & Spring, F. (2003). Categories of indigenous 'homeless' people and good practice responses to their needs: Australian Housing and Urban Research Institute (AHURI).
- Memmott, P., Long, S., Chambers, C., & Spring, F. (2004). Re-Thinking Indigenous Homelessness *AHURI Research and Policy Bulletin* (Vol. No 42). Melbourne: Australian Housing and Urban Research Institute.
- Memmott, P., Long, S., & Thomson, L. (2006). Indigenous Mobility in Rural and Remote Australia: Australian Housing and Urban Research Institute. Queensland Research Centre. AHURI.
- Merriam, S. (1988). *Case study research in education*. San Francisco: Jossey-Boss.
- Mitchell, H., & Jones, D. (1997). Homelessness a review of the social policy background and the role of occupational therapy. *British Journal of Occupational Therapy*, 60(7), 315-319.
- Mjøset, L. (2009). The Contextualist Approach to Social Science Methodology. In D. Bryne & C. Ragin (Eds.), *The Sage Handbook of Case-Based Methods*. London: Sage.
- Mobsby, I. (1996). A guide to the responsibilities of occupational therapists and their managers in regard to homeless people who use their services. *British Journal of Occupational Therapy*, 59(12), 557-560.
- Molineux, M. (2010). Occupational science and occupational therapy: Occupation at centre stage. In C. Christiansen & E. Townsend (Eds.), *Introduction to occupation: The art and science of living* (2nd ed., pp. 359-383). New Jersey: Pearson.
- Molineux, M., & Rickard, W. (2003). Storied approaches to understanding occupation. *Journal of Occupational Science*, 10, 52-60.
- Montgomery, C. (1994). Swimming upstream: The strengths of women who survive homelessness. *Advances in Nursing Science*, 16(3), 34-45.
- Moreton-Robinson, A. M., & Walter, M. (2009). Indigenous methodologies in social research. In M. Walter (Ed.), *Social research methods* (pp. 1-18). Australia: Oxford University Press.
- Morgan, D. (2005). Paradigms lost and pragmatism regained: Methodological implications of combining qualitative and quantitative methods. *Journal of Mixed Methods Research*, 1(1), 48-76. doi: 10.1177/2345678906292462
- Morris, P. (2002). The capabilities perspective: A frame work for social justice. *Families in Society*, 83(4), 365-373.

- Moses, D., Kresky-Wolff, M., Bassuk, E., & Bournstein, P. (2007). The promise of homelessness prevention. *Journal of Primary Prevention, 28*, 191-197.
- Munford, R., & Sanders, J. (2005). Working with families: strengths-based approaches. In M. Nash, R. Munford & K. O'Donoghue (Eds.), *Social Work Theories in Action*. London: Jessica Kingsley Publishers,.
- Munoz, J., Garcia, T., Lisak, J., & Reichenbach, D. (2006). Assessing the occupational performance priorities of people who are homeless. *Occupational Therapy in Health Care, 20*(3/4), 135-148. doi: 10.1300/J003v20n03 09
- Munoz, J., Reichenbach, D., & Witchenger Hanson, A. (2005). Project employ: Engineering hope and breaking down barriers to homelessness. *WORK: A Journal of Prevention, Assessment and Rehabilitation, 25*(3), 241-252.
- Murphy, S., Robinson, J., & Lin, S. (2009). Conducting systematic reviews to inform occupational therapy practice. *American Journal of Occupational Therapy, 63*, 363-368.
- Murtagh, L., Lloyd, C., & Bassett, H. (2010). The role of an Australian homeless health outreach team Part 2: A case study. *International Journal of Therapy and Rehabilitation, 17*(8), 436-439.
- Nakata, M. (2002). Indigenous knowledge and the cultural Interface: Underlying issues at the intersection of knowledge and information systems. *IFLA Journal, 28*(5/6), 281-291. doi: 10.1177/034003520202800513
- Nakata, M. (2007). The cultural interface. *Australian Journal of Indigenous Education, 36*(suppl.), 7-14.
- National Health and Medical Research Council. (1998). A guide to the development, implementation and evaluation of clinical practice guidelines (pp. 56). Canberra, ACT: NHMRC.
- Nelson, A. (2009). Learning from the past, looking to the future: Exploring our place with Indigenous Australians. *Australian Occupational Therapy Journal, 56*(2), 97-102.
- Nelson, A. & Allison, H. (2007). Relationships: The key to effective occupational therapy practice with urban Australian Indigenous children. *Occupational Therapy International, 14*(1), 57-70.
- Nelson, A., Allison, H., & Copley, J. (2006). Understanding where we come from: Occupational therapy with urban Indigenous Australians. *Australian Occupational Therapy Journal, 54*(3), 203-214. doi: 10.1111/j.1440-1630.2006.00629.x
- Nelson, A., Gray, M., Jensen, H., Thomas, Y., McIntosh, K., Oke, L., & Paluch, T. (2011). Closing the gap: Supporting occupational therapists to partner effectively with First Australians. *Australian Occupational Therapy Journal, 58*(1), 17-24. doi: 10.1111/j.1440-1630.2010.00912.x
- NHMRC. (2003). Values and ethics: Guidelines for ethical conduct in Aboriginal and Torres Strait Islander health research Retrieved 15th December 2009, from <http://www.nhmrc.gov.au/publications/synopses/e52syn.htm>
- Nilsson, I., & Townsend, E. (2010). Occupational justice – bridging theory and practice. *Scandinavian Journal of Occupational Therapy, 17*, 57-63.
- Nino, M., Loya, M., & Cuevas, M. (2010). Who are the chronically homeless? Social characteristics and risk factors associated with chronic homelessness. *Journal of Social Distress and the Homeless, 19*(1 & 2), 41-65.
- NVivo qualitative data analysis software; QSR International Pty Ltd. Version 8, 2010.
- Norweg, A., Bose, P., Snow, G., & Berkowitz, M. E. (2008). A pilot study of a pulmonary rehabilitation programme evaluated by four adults with chronic obstructive pulmonary disease. *Occupational Therapy International, 15*(2), 114-132.

- Nunn, K. P. (1996). Personal hopefulness: a conceptual review of the relevance of the perceived future in psychiatry. *British Journal of Medical Psychology*, 69, 227-245.
- O'Brian, M., & Madden, A. (2007). Knowledge, relationships and identity in research on drug use. In M. Pitts & A. Smith (Eds), *Researching the margins: Strategies for ethical and rigorous research with marginalised communities*. Hampshire: Palgrave Macmillan.
- O'Connell, M., Rosenheck, R., Kaspro, W., & Frisman, L. (2006). An examination of fulfilled housing preference and quality of life among homeless persons with mental illness and/or substance abuse. *Journal of Behavioural Health Services and Research*, 33(3), 354-365.
- Paluch, T., Boltin, S., & Howie, L. (2009). Individual blame or systematic failure? Re-evaluating occupational disengagement in an indigenous community. In N. Pollard, D. Sakellariou & F. Kronenberg (Eds.), *A political practice of occupational therapy* (pp. 155-161). Edinburgh: Churchill Livingstone.
- Park Lala, A., & Kinsella, E. A. (2011). A phenomenological inquiry into the embodied nature of occupation at end-of-life. *Canadian Journal of Occupational Therapy*, 78(4), 246-254.
- Parsell, C. (2010). "Homeless is what I am, not who I am": Insights from an inner-city Brisbane study. *Urban Policy and Research*, 28(2), 181-194. doi: 10.1080/08111141003793966
- Parsell, C. (2011). Responding to people sleeping rough: Dilemmas and opportunities for social work. *Australian Social Work*, online. Retrieved from doi:10.1080/0312407X.2010.538705
- Parsons, M. (2008). Fantome Island Lock Hospital and Aboriginal Venereal Disease Sufferers 1928-45. *Health and History*, 10(1), 41-62.
- Partis, M. (2003). Hope in homeless people: A phenomenological study. *Primary Health Care and Research Development*, 4(1), 9-19.
- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks: Sage.
- Pentland, W. & McColl, M. (2008). Living a life of occupational integrity: Another perspective on life balance. *Canadian Journal of Occupational Therapy*, 75(3), 135-138.
- Perruzza, N., & Kinsella, E. A. (2010). Creative arts occupations in therapeutic practice: a review of the literature. *British Journal of Occupational Therapy*, 73(6), 261-268.
- Peterson, N. (2004). Myth of the "walkabout". Movement in the Aboriginal domain. In J. Taylor & M. Bell (Eds.), *Population mobility and indigenous peoples in Australasia and North America* (pp. 223-238). London: Routledge.
- Petrenchik, T. (2006). Homelessness: Perspectives, misconceptions and considerations for occupational therapy. *Occupational Therapy in Health Care*, 20(3/4), 9-30. doi: 10.1300/J003v20n03 02
- Philippot, P., Lecocq, C., Sempoux, F., Nachtergaeel, H., & Galand, B. (2007). Psychological research on homelessness in western Europe: A review from 1970 to 2001. *Journal of Social Issues*, 63(3), 483-503. doi: 10.1111/j.1540-4560.2007.00520.x
- Phillips, R., Parsell, C., Seage, N., & Memmott, P. (2010). Assertive Outreach, Positioning Paper. . . In Q. R. Centre: (Ed.): Australian Housing and Urban Research Centre (AHURI).
- Pink, B. (2011). Methodological Review of Counting the Homeless, 2006. Canberra: Australian Bureau of Statistics.
- Pitts, M., & Smith, A. (2007). *Researching at the margins*. New York: Palgrave Macmillan.

- Pluck, G., Lee, K., Lauder, H., Fox, J., Spence, S., Parks, R. (2008). Time perspective, depression, and substance misuse among the homeless. *Journal of Psychology, 142*(2), 159-168.
- Polatajko, H., Backman, C., Baptiste, S., Davis, J., Eftekhar, P., Harvey, A., & et al. (2007). Human occupation in context. In E. Townsend & H. Polatajko (Eds.), *Enabling occupation in context II: Advancing an occupational therapy vision for health, wellbeing and justice through occupation* (pp. 37-61). Ontario: CAOT.
- Pollard, N., Kronenberg, F., & Sakellariou, D. (2009). Occupational apartheid. In N. Pollard, D. Skellariou & F. Kronenberg (Eds.), *A political practice of occupational therapy* (pp. 55-67). Edinburgh: Churchill Livingstone.
- Pollard, N., Skellariou, D., & Kronenberg, F. (2009). Political competence in occupational therapy. In N. Pollard, D. Skellariou & F. Kronenberg (Eds.), *A political practice of occupational therapy* (pp. 21-38). Edinburgh: Elsevier.
- Porsanger, J. (2005). An essay about Indigenous methodology. Retrieved from <http://uit.no/getfile.php?PageId=977&FileId=188>
- Prout, S. (2009). Security and belonging: Reconceptualising Aboriginal spatial mobilities in Yamatji country, Western Australia. *Mobilities, 4*(2), 177-202.
- Queensland Government. (2007). Responding to homelessness: Service hub for homeless people.
- Radley, A., Chamberlain, K., Hodgetts, D., Stole, O., & Groot, S. (2010). From a means to occasion: Walking in the life of homeless people. *Visual Studies, 25*(1), 36-45. doi: 10.1080/14725861003606845
- Radley, A., Hodgetts, D., & Cullen, A. (2006). Fear, romance and transience in the lives of homeless women. *Social and Cultural Geography, 7*(3), 437-461. doi: 10.1080/14493060600715193
- Ramugondo, E., & Kronenberg, F. (2010). *Collective occupations: A vehicle for building and maintaining working relationships*. Paper presented at the WFOT Congress of Occupational Therapists, Chile.
- Reclink Website. Accessed September, 27, 2011 at http://www.reclink.org/index.php?option=com_content&view=article&id=87&Itemid=199
- Reed, J. (2007). *Appreciative inquiry: Research for change*. Thousand Oaks: Sage Publications.
- Reid, K., Vittinghoff, E., & Kushel, M. (2008). Association between the level of housing instability, economic standing and health care access: A meta progression. *Journal of Health Care for the Poor and Underserved, 19*, 1212-1228.
- Reid, P. (1999). Young homeless people and service provision. *Health and Social Care in the Community, 7*(1), 17-24.
- Reynolds, F. (2003). Reclaiming a positive identity in chronic illness through artistic occupation. *Occupational Therapy Journal of Research (OTJR): Occupation, Participation and Health, 23*(3), 118-127.
- Reynolds, F. (2004). Textile art promoting well-being in long term illness: Some general and specific influences. *Journal of Occupational Science, 11*(2), 58-67.
- Reynolds, F., & Prior, S. (2003). 'A coat-hanger lifestyle': A phenomenological study of the meaning of artwork for women coping with chronic illness and disability. *Disability and Rehabilitation, 25*(14), 785-794.
- Reynolds, F., Vivat, B., & Prior, S. (2011). Visual art-making as a resource for living positively with arthritis: An interpretative phenomenological analysis of older women's accounts. *Journal of Aging Studies, 25*, 328-337. doi: 10.1016/j.jaging.2010.12.001

- Rice, P., & Ezzy, D. (1999). *Qualitative research methods: A health focus*. Melbourne: Oxford Press.
- Richardson, L. (1990). *Writing Strategies: Reaching Diverse Audiences*. California: Sage.
- Rickards, L., McGraw, S., Araki, L., Casey, R., High, C., Hombs, M., & Raysor, R. (2010). Collaborative initiative to help end chronic homelessness: Introduction. *Journal of Behavioral Health Services & Research*, 37(2), 149-167.
- Rigney, L. (1999). Internationalization of an Indigenous anticolonial cultural critique of research methodologies: A guide to Indigenist research methodology and its principles. *Wicazo Sa Review*, 12(2), 109-121.
- Robinson, C. (2003). Understanding iterative homelessness: The case of people with mental disorders. Sydney: UNSW-USW Research Centre, Sydney: AHURI.
- Robinson, C. (2005). Grieving home. *Social & Cultural Geography*, 6(1), 47-60.
- Roe, Y., Fredericks, B., Coffin, J., & Adams, M. (2010). Building Indigenous research capacity: A personal perspective. *Aboriginal and Islander Health Worker Journal*, 34(5), 33-35.
- Rokach, A. (2005). Private lives in public places: Loneliness of the homeless. *Social Indicators Research*, 72, 99-114.
- Rosenthal, R. (2000). 'Imaging homelessness and homeless people: visions and strategies within the movement'. *Journal of Social Distress and the Homeless*, 9(2), 111-126.
- Roulston, K. (2010). Considering quality in qualitative interviewing. *Qualitative Research*, 10(2), 199-228. doi: 10.1177/1468794109356739
- Rowe, S., & Wolch, J. (1990). Social networks in time and space: homelessness women in Skid Row, Los Angeles. *Annals of the Association of American Geographers*, 80, 184-204.
- Rubin, H., & Rubin, I. (2005). *Qualitative interviewing: The art of hearing data*. Thousand Oaks: Sage.
- Ryan, R., & Deci, E. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52, 141-166.
- Ryff, C., & Singer, B. (2008). Know thyself and become what you are: A eudaimonic approach to psychological wellbeing. *Journal of Happiness Studies*, 9, 13-39. doi: 10.1007/s10902-9019-0
- Saleeby, D. (2009). *The strengths perspective in social work practice* (5th ed.). Boston: Allyn and Bacon.
- Scheerer, C., Cahill, L., Kirby, K., & Lane, J. (2004). Cake decorating as occupation: Meaning and motivation. *Journal of Occupational Science*, 11(2), 68-74.
- Schiffer, K., & Schatz, E. (2008). *Marginalisation, social inclusion and health. Experiences based on the work of correlation - European Network Social Inclusion and Health*. Amsterdam: Foundation Regenboog AMOC.
- Schmotkin, D. (2005). Happiness in the face of adversity: Reformulating the dynamic and modular bases of subjective well-being. *Review of General Psychology*, 9(4), 291-325. doi: 10.1037/1089-2680.9.4.291
- Schostak, J. (2006). *Interviewing and representation in qualitative research*. Berkshire, UK: Open University Press.
- Schultz-Krohn, W. (2004). The meaning of family routines in a homeless shelter. *American Journal of Occupational Therapy*, 58(5), 531-542.
- Sen, A. (1993). Capability and well-being. In M. Nussbaum & A. Sen (Eds.), *The Quality of Life* (pp. 30-53). Oxford: Clarendon Press.
- Sen, A. (2000). *Social exclusion: Concept, application and scrutiny*. Manila: Asian Development Bank.
- Sen, A. (2009). *The idea of justice*. London: Allen Lane.

- Sheehan, R. (2011). I'm protective of this yard: Long term homeless persons construction of home, place and workplace in a historical public place. *Social and Cultural Geography*, 11(6), 539-558. doi: 10.1080/14649365.2010.4897912
- Shelton, K., Taylor, P., Bonner, A., & van den Bree, M. (2009). Risk factors for homelessness: Evidence from a population-based study. *Psychiatric Services*, 60(4), 465-472.
- Sherry, E. (2010a). The big issue community street soccer program – Longitudinal research Report 2006-2009: Centre for Sport and Social Impact: La Trobe University.
- Sherry, E. (2010b). (Re)engaging marginalized groups through sport: The homeless world cup. *International Review for Sociology of Sport*, 45(1), 59-71. doi: 10.1177/1012690209356988
- Shinn, M. (2010). Homelessness, poverty and social exclusion in the United States and Europe. *European Journal of Homelessness*, 4, 19-44.
- Shinn, M., Gottlieb, J., Wett, J. L., Bahl, A., Cohen, A., & Baron Ellis, D. (2007). Predictors of homelessness among older adults in New York City: Disability, economic, human and social capital and stressful events. *Journal of Health Psychology*, 12(5), 696-708.
- Shinn, M., Schteingart, J., Williams, N., Carlin-Mathis, J., Bialo-Karagis, N., Becker-Klein, R., & Weitzman, B. (2008). Long-term associations of homelessness with children's wellbeing. *American Behavioural Scientist*, 51, 789-809.
- Siddiqui, N., Astone-Twerell, J., & Hermitche, T. (2009). Staff perspectives on modified therapeutic services for homeless dually diagnosed clients: An exploratory pilot study. *Journal of Psychoactive Drugs*, 41(4), 355-361.
- Silverman, D. (2006). *Interpreting qualitative data* (3rd ed.). London: Sage.
- Silverman, D., & Marvasti, A. (2008). *Doing qualitative research: A comprehensive guide*. Thousand Oaks: Sage Publications.
- Simmons, H. (2009). *Case study research in practice*. London: Sage Publications Ltd.
- Sixsmith, J. (1986). The meaning of home: An exploratory study of environmental experience. *Journal of Environmental Psychology*, 6, 281-298.
- Skellariou, D. & Pollard, N. (2009). Three sites of conflict and co-operation : class, gender, and sexuality. In N. Pollard, D. Skellariou & F. Kronenberg (Eds.), *A political practice of occupational therapy* (pp. 69-87). Edinburgh: Churchill Livingstone.
- Smith, A. & Pitts, M. (2007). Researching the margins: An introduction. In M. Pitts & A. Smith (Eds.), *Researching the margins: Strategies for ethical and rigorous research with marginalised communities*. Hampshire: Palgrave MacMillan.
- Snow, D. A., Anderson, L., Quist, T., & Cress, D. (1996). Material Survival strategies on the street: Homeless people as Bricoleurs. In J. Baumohl (Ed.), *Homelessness in America* (pp. 86-96). Phoenix, Arizona: Oryx.
- Snyder, C., Clark, F., Masunaka-Noriega, M., & Young, B. (1998). Los Angeles street kids: New occupations for life program. *Journal of Occupational Science*, 5(3), 133-139.
- Solberg, E. C., Diener, E., Wirtz, D., Lucas, R. E., & Oishi, S. (2002). Wanting, having, and satisfaction: Examining the role of desire discrepancies in satisfaction with income. *Journal of Personality & Social Psychology*, 83, 725-734.
- Somerville, P. (1992). Homelessness and the meaning of home: Rooflessness or rootlessness? *International Journal of Urban and Regional Research*, 16(4), 529-539.
- Spreck-Kittler, T. (2002). Homelessness and numbers: Between fact and fiction.
- Stadnyk, R., Townsend, E., & Wilcock, A. (2010). Occupational justice. In C. Christiansen & E. Townsend (Eds.), *Introduction to occupation: The art and science of living* (2nd ed., pp. 329-358). New Jersey: Pearson.
- Stake, R. (2005). Qualitative case studies. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (3rd ed., pp. 443-466). Thousand Oaks: Sage.

- Stedman, A., & Thomas, Y. (2011). Reflecting on our effectiveness: Occupational therapy interventions with Indigenous clients. *Australian Occupational Therapy Journal*, 58(1), 43-49.
- Stedman, R. (2003). Is it really just a social construction? The contribution of the physical environment to sense of place. *Society and Natural Resources*, 16(8), 671-685.
- Steel, D., & Gray, M. A. (2009). Baby boomers' and assistive technology: A systematic review. *Disability and Rehabilitation - Assistive Technology*, 4, 129-136.
- Stefancic, A., & Tsemberis, S. (2007). Housing first for long term shelter dwellers with psychiatric disabilities in a suburban county: A four year study of housing access and retention. *Journal of Primary Prevention*, 28, 265-279.
- Stone, S. (2005). Being as doing: Occupational perspective of women survivors of hemorrhagic stroke. *Journal of Occupational Science*, 12(1), 17-25.
- Stone, S. D. (2005). Being as doing: Occupational perspectives of women survivors of hemorrhagic stroke. *Journal of Occupational Science*, 12(1), 17-25.
- Stronach, I., Garratt, D., & Piper, H. (2007). Reflexivity, the picturing of selves, the forging of method *Qualitative Inquiry*, 13(2), 179-203.
- Sutton, P. (2009). *The Politics of Suffering: Indigenous Australia and the End of the Liberal Consensus*. Melbourne: Melbourne University Press.
- Swenson-Miller, K., Bunch-Harrison, S., Brunbuugh, B., Kutty, R., & Fitzgerald, K. (2005). The meaning of computers to a group of men who are homeless. *American Journal of Occupational Therapy*, 59(1), 191-197.
- Swensson Miller, K., Hertzberg, L., & Ray, S. (2006). *Homelessness in America: Perspectives, characterizations, and considerations for occupational therapy*: Haworth Press.
- Symons, J., Clark, H., Williams, K., Hansen, E., & Orpin, P. (2011). Visual art in physical rehabilitation: experiences of people with neurological conditions. *British Journal of Occupational Therapy*, 74(1), 44- 52. doi: . *British Journal of Occupational Therapy* 74(1), 44-52. doi: 10.4276/030802211X12947686093729
- Taylor, C. (2007). *Evidence-based practice for occupational therapists*. Oxford, UK: Blackwell Publishing.
- Taylor, J., & Bell, M. (2004). Continuity and change in Indigenous Australian population mobility. In J. Taylor & M. Bell (Eds.), *Population mobility and Indigenous peoples in Australia and North America* (pp. 13-46).
- Taylor, M., & Walsh, T. (2006). Nowhere to go: The impact of police move-on powers on homeless people in Queensland.
- Thomas, Y., Gray, M., & McGinty, S. (2010). Homelessness and the right to occupation and inclusion: An Australian perspective. *WFOT Bulletin*, 62, 19-25.
- Thomas, Y., Gray, M., & McGinty, S. (2011a). Occupational therapy at the cultural interface: Lessons from research with Aboriginal and Torres Strait Islander Australians. *Australian Occupational Therapy Journal*, 58, 11-16.
- Thomas, Y., Gray, M., & McGinty, S. (2011b). A systematic review of occupational therapy interventions with homeless people. *Occupational Therapy in Health Care*, 25(1), 38-53.
- Thomas, Y., Gray, M., & McGinty, S. (under review). Participation in occupation: Using meta-synthesis to reframe evidence regarding the value of occupation with homeless persons. *Australian Occupational Therapy Journal*.
- Thomas, Y., Gray, M., McGinty, S., & Ebringer, S. (2011). Homeless adults engagement in art: Identity, recovery and social inclusion *Australian Occupational Therapy Journal*, 58, 429-436.

- Thomas, Y., Gray, M., McGinty, S., & Miles, D. (under review). An exploration of subjective wellbeing among people experiencing homelessness: A strengths-based approach. *Social Work and Health Care*.
- Toro, P. (2007). Towards an international understanding of homelessness. *Journal of Social Issues*, 63, 461-481.
- Toro, P., Tompsett, C., Lombardo, S., Philippot, P., Nachtergaeel, H., Galand, B., . . . Harvey, K. (2007). Homelessness in Europe and the United States: A Comparison of Prevalence and Public Opinion. *Journal of Social Issues*, 63(3), 505-524. doi: 10.1111/j.1540-4560.2007.00521.x
- Tov, W., & Diener, E. (2009). Culture and subjective well-being. In E. Diener (Ed.), *Culture and Well-Being: The collected works of Ed Diener* (pp. 9-41): Social Indicators Research Series:Springer.
- Townsend, E., & Polatajko, H. (2007). *Enabling occupation II: Advancing an occupational therapy vision for health, well-being & justice through occupation*. Ottawa, Ontario: CAOT Publications ACE.
- Townsend, E., & Wilcock, A. (2004). Occupational justice and client-centred practice: A dialogue in progress. *Canadian Journal of Occupational Therapy*, 71(2), 75-87.
- Trickett, E. M., & Chung, D. (2007). Brickbats and bouquets: Health services, community and police attitudes and the homeless experiences of women 45 years and over living in rural South Australia. *Rural Social Work and Community Practice*, 12(2), 5-15.
- Tryssenaar, J., Jones, E., & Lee, D. (1999). Occupational performance needs of a shelter population. *Canadian Journal of Occupational Therapy*, 66(4), 188-196.
- Tsemberis, S., & Eisenberg, R. (2000). Pathways to housing: supported housing for street-dwelling homeless individuals with psychiatric disabilities. *Psychiatric Services*, 51(4), 487-493.
- Tuhiwai Smith, L. (1999). *Decolonizing methodologies: Research and Indigenous people*. Dunedin: University of Otago Press.
- Tuhiwai Smith, L. (2005). On tricky ground: researching the native in the age of uncertainty. In N. Denzin & Y. Lincoln (Eds.), *The sage handbook of qualitative research* (3rd ed., pp. 85-107). Thousand Oaks: Sage Publications.
- Turnbull, J., Muckle, W., & Masters, C. (2007). Homelessness and health. *Canadian Medical Association Journal*, 177(9), 1065-1066.
- van Leit, B., Starrett, R., & Crowe, T. (2006). Occupational concerns of women who are homeless and have children: An occupational justice critique. *Occupational Therapy in Health Care*, 20(3/4), 47-62.
- Veness, A. (1993). Neither homed nor homeless: Contested definitions and the personal worlds of the poor. *Political Geography*, 12(4), 319-340.
- Vinson, T. (2009). Social inclusion: The origins, meaning, definition and economic implications of the concept social inclusion/exclusion: Paper prepared for Australian Department of Education, Employment and Workplace Relations (DEEWR).
- Wada, M., Backman, C., & Forwell, S. (2010). Theoretical perspectives of balance and the influence of gender ideologies. *Journal of Occupational Science*, 17(2), 92-103.
- Walsh, K. (2010). *Townsville Vulnerability Index Findings*. Paper presented at the Presentation provided by Micah Projects to Townsville Homelessness Taskforce.
- Watson, J. (1994). *Becoming Bwngcolman: Exile and survival on Palm Island Reserve, 1981 to the present*. PhD, The University of Queensland, Brisbane.
- Watson, R. (2006). Being before doing: The cultural identity (essence) of occupational therapy. *Australian Occupational Therapy Journal*, 53(3), 151-158.

- Waugh, E., & Mackenzie, L. (2011). Ageing well from an urban Indigenous Australian perspective. *Australian Occupational Therapy Journal*, 58, 25-33. doi: 10.1111/j.1440-1630.2010.00914.x
- White, J., & Drew, S. (2011). Collecting data or creating meaning? Troubling authenticity in ethnographic research. *Qualitative Research Journal*, 11(1), 3-11.
- White, W. L. (2008). The mobilization of community resources to support long term addiction recovery. *The Journal of Substance Abuse Treatment*, 36, 146-158.
- Whiteford, G. (2000). Occupational deprivation: Global challenge in the new millennium. *British Journal of Occupational Therapy*, 63(5), 200-204.
- Whiteford, G. (2007). Artistry in everyday occupations: Connection, continuity and context. *Journal of Occupational Science*, 14(2), 78-81.
- Whiteford, G., & Townsend, E. (2011). Participatory occupational justice framework (PEOJ, 2010). In F. Kronenberg, N. Pollard & D. Sakellariou (Eds.), *Occupational therapy without borders* (Vol. 2). Edinburgh: Churchill Livingstone Elsevier.
- Wilcock, A. (1999). Reflections of doing, being and becoming. *Australian Occupational Therapy Journal*, 46, 1-11.
- Wilcock, A. (2006). *An occupational perspective of health* (2nd ed.). Thorofare, NJ: Slack.
- Wilcock, A., & Steedan, B. (1999). Reflecting the creative roots of the profession. *British Journal of Occupational Therapy*, 62(1), 1-1.
- Wilding, C., May, E., & Muir-Cochrane, E. (2005). Experience of spirituality, mental illness and occupation: A life-sustaining phenomenon. *Australian Occupational Therapy Journal*, 52, 2-9.
- Williams, S., & Stickley, T. (2011). Stories from the streets: People's experiences of homelessness. *18*, 432-439.
- World Federation of Occupational Therapists. (2010). Statement on occupational therapy Retrieved 26th September, 2011, from http://www.wfot.org/office_files/STATEMENT%20ON%20OCCUPATIONAL%20THERAPY%20300811.pdf
- World Federation of Occupational Therapy (WFOT). (2006). World Federation of Occupational Therapy position statement on human rights Retrieved 26th November, 2008, from http://www.wfot.org/office_files/Human%20Rights%20Position%20Statement%20Final%20NLH%281%29.pdf
- Wronski, I., Stronach, P., & Felton-Busch, C. (2011). Indigenous health: Can occupational therapy respond to the challenge to 'Close the Gap'? *Australian Occupational Therapy Journal*, 58(1), 1-2. doi: 10.1111/j.1440-1630.2010.00920.x
- Wu, C. H. (2008). The role of perceived discrepancy in satisfaction evaluation. *Social Indicators Research*, 88, 423-436. doi: 10.1007/s11205-007-9200-9
- Wu, C. H., Tsai, Y., & Chen, L.H. (2009). How do positive views maintain life satisfaction? *Social Indicators Research*, 91, 269-281. doi 10.1007/s11205-008-9282-z
- Yarcheski, A., Scholoveno, M., Mahon, N., (1994). Social Support and wellbeing in adolescents: The mediating role of hopefulness. *Nursing Research*, 43(5), 288-292.
- Yerxa, E. J., Clark, F., Frank, G., Jackson, J., Parham, D., Pierce, D., . . . Zemke, R. (1990). An introduction to occupational science: A foundation to occupational therapy in the 21st century. *Occupational Therapy in Health Care*, 6(4), 1-17.
- Yin, R. (1993). *Application of case study research*. California: Sage Publications.
- Yin, R. (2009). How to do better case studies. In L. Bickman & D. Rog (Eds.), *The sage handbook of applied social research methods* (pp. 254-282). Thousand Oaks: Sage Publications.

- Zikmund, V. (2003). Health, well-being, and the quality of life: Some psychosomatic reflections. *Neuroendocrinol Lett*, 24(6), 401-403.
- Zisberg, A., Young, H., Schepp, K., & Zysberg, L. (2007). A concept of routine: relevance to nursing. *Journal of Advanced Nursing*, 57(4), 442-453.
- Zufferey, C. (2008). Responses to homelessness in Australian cities: Social worker perspectives. *Australian Social Work*, 61, 356-370.
- Zufferey, C. (2009). Making gender visible: Social work responses to homelessness. *Affilia: Journal of Women and Social Work*, 24(4), 382-393.
- Zufferey, C., & Chung, D. (2006). Representations of homelessness in the Australian print media: Some implications for social policy. *Just Policy*, 42, 32-38.
- Zufferey, C., & Kerr, L. (2004). Identity and everyday experience of homelessness: Some implications for social work. *Australian Social Work*, 57(4), 343-353.

Publications on Homelessness and Occupational Therapy

Aviles, A. Helfrich, C. (2004). Life skills service needs: perspective of homeless youth. <i>Journal of Youth and Adolescence</i> , 32(4), 331-338.
Aviles, A. Helfrich, C. (2006). Homeless youth: Causes, consequences and the role of occupational therapy. <i>Occupational Therapy in Health Care</i> , 20(3/4), 99-114.
Boland, L. O'Mahony, P. (2002). A study of experiences and expectations of homeless men with schizophrenia. <i>Irish Journal of Occupational Therapy</i> , 32(1), 2-9.
Chapleau, A., (2010). Voices from the Street: How structural and individual factors influence homelessness. <i>Occupational Therapy and Mental Health</i> , 26, 387-400.
Christ, P. Munoz, J. Witchenger Hansen, A. Benson, J. Provident, I. (2005). The practice-scholar program: An academic-practice partnership to promote the scholarship of best practice. <i>Occupational Therapy in Health Care</i> , 19(1/2), 71-93.
Davis, J. Kutter, C. (1998). Independent living skills and post-traumatic stress disorder in women who are homeless: Implications for practice. <i>American Journal of Occupational Therapy</i> , 52(1), 39-44.
Drake, M. (1992) Level 1 Fieldwork in a day care for homeless children. <i>Occupational Therapy in Health Care</i> , 8(2/3), 215-224.
Finlayson, M, Baker, M, Rodman, L. and Herzberg, G. (2002). The process and outcomes of a multi-method needs assessment at a homeless shelter. <i>American Journal of Occupational Therapy</i> 56(3), 313-321.
Fleming, J. Christenson, J. Franz, D. Letourneau, L. (1996) A fieldwork model for non traditional community practice. <i>Occupational Therapy in Health Care</i> , 19(2) 15-35.
Glass, R. Sevitz, B. Williamson, S. Wink. S, Duncan, M. (2006). The occupational needs of homeless people at a place of renewal in Cape Metropole. <i>South African Journal of Occupational Therapy</i> , 36(1), 11-13.
Grandisson, M., Mitchell-Cavalho, M., Tang, V., Korner-Bitensky, N. (2009). Occupational therapists' perceptions of their role with people who are homeless. <i>British Journal of Occupational Therapy</i> , 72(11), 491-498.
Grimer, K (2006). Helping the homeless: An occupational therapy perspective. <i>Occupational Therapy in Mental Health</i> , 22(1), 49-61.
Gutman, S. Diamond, H. Holness-Parchment, S. Brandofino, D. Jolly-Edouard, M. Jean-Charles, S. (2004). Enhancing independence in women experiencing domestic violence and possible brain injury: An assessment of an occupational therapy intervention. <i>Occupational Therapy in Mental Health</i> , 20(1), 49-79.
Helfrich, C. Aviles, A. Bandiani, C. Walens, D. Sabol, P. (2006) Life skills interventions with homeless youths, domestic violence victims and adults with mental illness. <i>Occupational Therapy in Health Care</i> , 20(3/4), 189-207.
Herzberg, G. Finlayson, M. (2001) Development of occupational therapy in a homeless shelter. <i>Occupational Therapy in Health Care</i> , 13(3/4), 133-147.
Herzberg, G. Ray, S. Miller, K. (2006) The status of occupational therapy: Addressing the needs of people experiencing Homelessness. <i>Occupational Therapy in Health Care</i> , 20(3/4), 1-8
Heubner, J. Tryssenaar, J. (1996) Development of an occupational therapy practice perspective in a homeless shelter: A fieldwork experience. <i>Canadian Journal of Occupational Therapy</i> , 63(1), 24-32.
Heuchemer, B. Josephsson, S. (2006). Leaving homelessness and addiction: Narratives of an occupational transition. <i>Scandinavian Journal of Occupational Therapy</i> , 13, 160-169.
Johnson, J. (2006). Describing the phenomenon of homelessness through the theory of occupational adaptation. <i>Occupational Therapy in Health Care</i> , 20(3/4), 63-80.
Johnson, J. (2001). Re-Framing Homelessness: An occupational adaptation perspective. Dissertation Texas Womens University.
Kannenber, K. Boyer, D. (1997). Occupational therapy evaluation and intervention in an employment program for homeless youths homeless. <i>Psychiatric Services</i> , 48(5), 631-633.
Kavanagh, J. Fares, J. (1995). Using the model of human occupation with homeless mentally ill clients. <i>British Journal of Occupational Therapy</i> , 58(10), 419- 422.
Kearney, P. (1991). Occupational therapy intervention with homeless women. <i>Occupational Therapy Practice</i> , 2(4), 75-81.
Levin, M. Helfrich, C. (2004). Mothering role identity and competence among parenting and pregnant homeless adolescents. <i>Journal of Occupational Science</i> , 11(3), 95-104.
Livingston, B. Swenson-Miller, K. (2006). Systems of Care for persons who are homeless in the United States <i>Occupational Therapy in Health Care</i> , 20(3/4), 31-46.

Lloyd, C., Bassett, H. (2010). The role of an Australian homeless health outreach team Part 1: Background. <i>International Journal of Therapy and Rehabilitation</i> , 17(7), 376-381.
McDonald, A. (2006). The after-school occupations of homeless youth: Three narrative accounts. <i>Occupational Therapy in Health Care</i> , 20(3/4), 115-133.
Mitchell, H. Jones, D. (1997). Homelessness a review of the social policy background and the role of occupational therapy. <i>British Journal of occupational Therapy</i> , 60(7), 315-319.
Mobsby, I (1996). A guide to the responsibilities of occupational therapists and their managers in regard to homeless people who use their services. <i>British Journal of occupational Therapy</i> , 59(12), 557-560.
Munoz, J. Garcia, T. Lisak, J. Reichenbach, D. (2006). Assessing the occupational performance priorities of people who are homeless. <i>Occupational Therapy in Health Care</i> , 20(3/4), 135-148.
Munoz, J. Reichenbach, D. Witchenger Hansen, A. (2005). Project Employ: Engineering hope and breaking down barriers to homelessness. <i>WORK; Journal of Prevention, Assessment and Rehabilitation</i> 25, 241-252.
Munoz, J. Dix, S. Reichenbach, D. (2006). Building productive roles: Occupational therapy in a homeless shelter. <i>Occupational Therapy in Health Care</i> , 20(3/4), 167-187.
Murtagh, L., Lloyd, C., Bassett, H. (2010). The role of an Australian homeless health outreach team Part 2: A case study. <i>International Journal of Therapy and Rehabilitation</i> , 17(8), 436-439.
Petrenchik, T. (2006). Homelessness: Perspectives, misconceptions and considerations for occupational therapy. <i>Occupational Therapy in Health Care</i> , 20(3/4), 9-30.
Ray, S (2006). Mother-toddler interactions during child-focussed activity in transitional housing. <i>Occupational Therapy in Health Care</i> , 20(3/4), 81-97.
Schultz-Kron, W. (2004). The meaning of family routines in a homeless shelter. <i>American Journal of Occupational Therapy</i> , 58(5), 531-542,
Schultz-Krohn, W. Drnek, S. Powell, K. (2006). Occupational therapy intervention to foster goal setting skills for homeless mothers. <i>Occupational Therapy in Health Care</i> , 20(3/4), 149-166.
Shoredike, A. Howell, D. (2001). The reindeer of hope: An occupational therapy program in a homeless shelter. <i>Occupational Therapy in Health Care</i> , 15(1/2), 57-68.
Snyder, C. Clark, F. Masunaka-Noriega, M. Young, B. (1998). Los Angeles street kids: New occupations for life program. <i>Journal of Occupational Science</i> , 5(3), 133-139.
Swenson-Miller, K. Bunch-Harrison, S. Brumbaugh, B. Kutty, R. Fitzgerald, K. (2005). The meaning of computers to a group of men who are homeless. <i>American Journal of Occupational Therapy</i> , 59(1), 191-197.
Totten, C. Pratt, J. (2001). Innovation in fieldwork education: working with members of the homeless population in Glasgow. <i>British Journal of occupational Therapy</i> , 64(11), 559-563.
Tryssenaar, J. Jones, E. Lee, D. (1999). Occupational performance needs of a shelter population. <i>Canadian Journal of Occupational Therapy</i> , 66(4), 188-196.
Van Leit, B. Starrett, R. Crowe, T. (2006). Occupational concerns of women who are homeless and have children: An occupational justice critique. <i>Occupational Therapy in Health Care</i> , 20(3/4), 47-62.

List of Abbreviations

ABS	Australian Bureau of Statistics
AHURI	Australian Housing and Research Institute
AIHW	Australian Institute of Health and Wellbeing
ATODS	Health Alcohol, Tobacco and Other Drugs Service
CACH	Commonwealth Advisory Committee on Homelessness
COAG	Council of Australian Governments
COPM	Canadian Occupational Performance Measure
DEEDI	Department of Employment, Economic Development and Industry
DEEWR	Department of Education, Employment and Workplace Relations
DoC	Department of Communities
DoCS	Department of Community Safety
FEAT	Family Emergency Accommodation Townsville
JAG	Department of Justice and Attorney General
JCU	James Cook University
NAHA	National Affordable Housing Agreement
NHMRC	National Health & Medical Research Council
PPRA	Police Powers and Responsibilities Act 2000 (Qld)
PW	Psychological wellbeing
QAIDP	Queensland Indigenous Alcohol and Drug Program
QH	Queensland Health
SAAP	Supported Accommodation Assistance Program
SWB	Subjective Wellbeing

Glossary

Indigenous Australians

People of Aboriginal and Torres Strait Islander Descent

Occupation

All that people need, want and are obliged to do; what it means to them and its ever present potential as an agent of change

Occupational Alienation

When people and communities are denied opportunities to experience occupations that are meaningful and enriching, at a population level this includes the physical removal of people from their cultural occupations (Townsend & Wilcock, 2004)

Occupational Apartheid

When groups of people are restricted or denied access to dignified and meaningful participation in occupation on the basis of colour, race, disability, national origin, age, gender, sexual preference, political belief, status in society, or other characteristic. Occasioned by political forces, its systemic and pervasive social cultural and economic consequences jeopardise the health and wellbeing of individuals, communities and societies (Pollard, Skellariou, & Kronnenberg, 2009)

Occupational Deprivation

When people are unable to engage in meaningful or necessary occupations for prolonged periods due to external factors outside their control, people who experience disabilities, poverty, refugee-ism, and geographic isolation may experience occupational deprivation (Stadnyk, Townsend, & Wilcock, 2010).

Occupational Imbalance

When people are under or over-occupied and have decreased opportunity for satisfaction or to maximise potential. Occupational imbalance at a population level relates to market returns and privileges distributed for work ,for example the situation for unpaid carers (Townsend & Wilcock, 2004).

Occupational Justice

Justice related to opportunities and resources required for occupational participation sufficient to satisfy personal needs and full citizenship (Townsend & Wilcock, 2004)

Occupational Marginalisation

When people are excluded from opportunities to engage in occupations and are relegated to less visible or less valued occupations in which they have little choice or control. At a population level the issue of power to make decisions regarding occupations as opposed to limitation of discrimination and stigma (Stadnyk et al., 2010).

Primary Homelessness

All people who have no conventional accommodation, such as people living on the street, sleeping in parks, squatting in derelict buildings, or using cars, railway carriages for temporary shelter.

SAAP Definition of inadequate housing

If the only housing that a person has access to:

- damages, or is likely to damage, the person's health; or
- threatens the person's safety; or
- marginalises the person through failing to provide access to:
 - adequate personal amenities; or
 - the economic and social supports that a home normally affords; or
 - places the person in circumstances that threaten or adversely affect the adequacy, safety, security and affordability of that housing (Commonwealth of Australia, 1994, Section 4).

Secondary Homelessness

People who move frequently from one form of temporary shelter to another. On census night, it includes all people staying in emergency or transitional accommodation provided by the Supported Accommodation Assistance Program (SAAP). Secondary homelessness also includes people residing temporarily with other households because they have no

accommodation of their own and people staying in boarding houses on a short-term basis, operationally defined as 12 weeks.

Spiritual Homelessness

Spiritual forms of homelessness may derive from:

- separation from traditional land
- separation from family and kinship networks
- a crisis of personal identity wherein one's understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused or lost (Memmott, Long, Chambers, & Spring, 2003, p. 15).

Tertiary Homelessness

People who live in boarding houses on a medium to long-term basis, operationally defined as 13 weeks or longer. They are homeless because their accommodation situation is below the minimum community standard of a small self contained flat.

Wellbeing

The satisfaction of material, biological, psychological, social and cultural needs and demands of an individual, which are necessary for his satisfaction with life (Zikmund, 2003, p.402).