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Using Expressions of Past, Present and Future Homelessness Pathways as a Linguistic Resource in Meeting Interaction in a Low-Threshold Outpatient Clinic

ABSTRACT

In homelessness research a range of metaphors have been developed to understand homelessness and housing transitions at the margins. The concept of homelessness pathways (later in the text also simply pathways), is said to offer a more advanced framework (compared to, e.g. the career metaphor) for constructing comprehensive, relational and temporal understanding of homelessness and housing transitions (see, e.g. Clapham 2005). The article's aim is to apply and combine the concept of pathways and ethnomethodological interaction research to illustrate how expressions of past, present and future homelessness and housing transitions are used as a linguistic resource of sense-making in a mental health and substance abuse work context. The naturally-occurring meeting data from a low-threshold outpatient clinic for people with severe drug abuse and mental health problems located in a large Finnish city was collected during three months in 2012. The results point out the importance of the micro-level, i.e. face-to-face negotiations of the welfare workers and clients in finding ways out of homelessness. Meetings are essential because they are arenas of sense and decision making. The analysis demonstrates how the interpretations of the past direct the construction of the future pathways in the interaction in situ. In the article interaction research is introduced as one option for developing the studies of pathways as well as for informing the battles against homelessness traps, circles and dead ends. The text is methodologically explorative: it demostrates one way of analysing expressions of pathways in interaction and in situ.

KEY WORDS: homelessness, pathways, interaction research, ethnomethodology, multi-party meetings

Introduction

In homelessness research a range of metaphors has been developed to understand (long-term) homelessness and housing transitions at the margins of society. Metaphors used include 'threshold', 'staircase', 'housing trap', 'double bind', 'career', 'safety nets', 'revolving door' and 'pathways' (Pinkney and Ewing 2006, 61; Fopp 2009; Wiesel 2014, 321; Ranta, Raitakari, and Juhila 2017). These metaphors indicate that homelessness has temporal and spatial dimensions. Accordingly, the homelessness phenomenon may be understood as a particular kind of movement (e.g. a circle) or as a difficulty to transfer from one spatiality to another (e.g. a trap) (see also Author). Homelessness pathways (later in the text also simply pathways), the concept reflected and utilised in this article, is said to offer a more advanced framework compared to, e.g. the career metaphor for constructing a comprehensive, relational and temporal understanding of homelessness (Clapham 2005; Pinkney and Ewing 2006, 70–72; Wiesel 2014; Chamberlain and Johnson 2013; Meeus and De Decker 2015). Yet, it too has its limitations especially when applied to making sense of the homeless persons' inner experiences (Fopp 2009).

The pathways metaphor emphasises firstly that the changes in homelessness pathways take place in a temporal-spatial continuum of past, present and future life events (Somerville 2013). Secondly, the metaphor captures the intertwined relations between structure and agency (macro-micro levels) and the necessity to scrutinise both of these aspects simultaneously (e.g. Skobba 2016). Thirdly, the interaction between welfare workers and clients is seen as profoundly important when tackling homelessness and housing transitions (Clapham 2005). These dimensions of pathways are concentrated on in the empirical part of this article. There, the article scrutinises the ways in which expressions of pathways become constructed and made relevant in a meeting interaction.

Homelessness, as understood in this text, includes fixed-term living in various housing services and institutionalised care, as well as periods of rough sleeping and staying with friends and relatives. Homelessness is approached as shifting transitions between public and private spaces in time. These transitions into, through and out of homelessness have been classified in various ways in previous homelessness research (e.g. Chamberlain and Johnson 2013; Somerville 2013).

For the clients to exit from homelessness and to make housing (service) choices requires negotiations with a range of welfare workers, such as social workers, housing support workers, commissioners of the housing services and medical professionals (see also Parsell and Parsell 2012). Welfare workers are often in a powerful position of decision-maker and 'gatekeeper'; they have the position to provide or disallow resources and possibilities for the clients (see Alden 2015; Ceannt et al. 2016).

The aim of the article is to apply and combine the concept of pathways and ethnomethodological interaction research to demonstrate how expressions of past, present and future homelessness transitions are used as linguistic resources in meeting interaction in a mental health and substance abuse work context. In this text, linguistic resources refer to concepts and wordings participants use in interaction to construct and make sense of the social reality. I collected the meeting data (seven tape-recordings) from a low-threshold outpatient clinic for people with severe drug use and mental health problems located in a large Finnish city during three months in 2012. Meetings are essential to study because they are arenas of sense and decision making concerning clients' future life courses, opportunities and special needs. In meetings pathways are directed in one direction as other directions are ruled out or constructed as unfavourable or impossible. So it is necessary to understand how they are constructed and understood in each client case.

The article proceeds in the following way: the concept of homelessness pathways is shortly introduced as a metaphor and as a particular theoretical and analytical approach. After that I explain briefly the main premises of ethnomethodological interaction research and how it is applied in this text. Yet before the analysis on meeting interaction, the setting and data will be introduced. In the concluding section I will discuss what possible methodological and practical relevance this study has for the pathways approach as well as for the battle against homelessness.

Housing pathways – an old metaphor and new analytical approach

As a general term 'pathways' ('paths' or 'routes') has an established position in housing and homelessness research, and many authors using the pathways metaphor have developed various typologies that characterize housing and homelessness narratives (Fitzpatrick 2000; Johnson et al. 2010, 20; Fitzpatrick, Bramley, and Johnson 2013; Chamberlain and Johnson 2013; Author). Pathways refer to transitions between different housing facilities and lived experiences and choices related to these facilities (e.g. Anderson and Tulloch 2000; Casey 2001; Anderson and Christian

2003; Colic-Peisker and Johnson 2012; Kras, Pleggenkuhle, and Huebner 2016). At times pathways are used in homelessness research concurrently with the career metaphor (see, e.g. May 2000; MacKenzie and Chamberlain 2003; Pinkney and Ewing 2006, 63; Robinson, Reeve, and Casey 2007), although it is also approached as a distinct analytical concept.

Although housing pathways as a metaphor has a long history, it has a relatively short history as a more precise analytical concept (Castro Campos et al. 2016, 228). However, there is a growing body of literature that develops and applies housing pathways as an analytical concept. This research branch takes as a reference and reflection point Clapham's (2002, 2003, 2005) housing pathways framework. Clapham has developed in a series of publications (2002, 2003, 2004, 2005) a housing pathways framework that is based on social constructionism and Anthony Giddens' (1984) theory of structuration; this makes it possible to recognise interactional, micro-level meaning making that is embedded within wider social structures (e.g. Mackie 2012, 809; Fitzpatrick, Bramley, and Johnsen 2013, 150; Christian, Clapham, and Abrams 2011; Wiesel 2014, 322–323). It is a comprehensive framework combining individual agency and societal structures (Johnson et al. 2010, 15, 20).

There is nowadays a significant body of literature that develops a pathways approach in the context of homelessness and housing services (Johnson et al. 2010; Christian, Clapham, and Abrams 2011; Netto 2011; Mackie 2012; Natalier and Johnson 2012; Severinsen 2013; Wiesel 2014; Ong, Wood, and Colic-Peisker 2015; Skobba 2016). Common to these publications is that they reflect individual meaning making and life courses related to homelessness within societal contexts and structures.

A typical way to carry out a pathways study is to construct typologies of homelessness pathways of a particular group of people (Fitzpatrick, Bramley, and Johnson 2013; Somerville 2013; see literature mentioned above). For example Chamberlain and Johnson (2013) identify five pathways into homelessness: housing crisis, family breakdown, substance abuse, mental health and youth to adult. As various pathway typologies do have some descriptive power, they have the tendency to be reductive and provide little space for the overlap of multiple pathways constructions that vary in time and interaction settings.

Contrary to the studies that make typologies of various homelessness routes, pathways are understood in this article as something constructed in the institutional meeting interaction of welfare workers and clients. Concentrating on interaction means that pathways are not examined as whole

narratives of persons' homelessness histories and experiences. Rather, they are interpreted from (sometimes minimal) language use that indicates past, present and future homelessness transitions. Accordingly, I demonstrate in the results section how homelessness pathways can be studied as interactive constructions made in a particular interactional setting. In order to accomplish this, I combine the pathways as an analytical concept and ethnomethodological interaction research to scrutinise snapshots of welfare workers-clients' meeting interaction. Although the importance of micro-level interaction is well recognised in the pathways research, to my knowledge there are not many studies that combine it and ethnomethodological interaction research. However, good examples of this way of doing research can be found in a Finnish book (Juhila and Kröger Eds. 2016) entitled "Transitions and Choices in Housing Pathways" (chapters six and nine).

Researching housing pathways as interactional and linguistic accomplishments

The face-to-face interaction between provider and user is where important structural processes are played out and possibly changed. Therefore, a key element of research on homelessness should be the analysis of these interactions (Clapham 2003, 125).

Especially relevant for the pathways analyses conducted in this study is Clapham's (2003, 2005) request to concentrate on analysing both the macro-level discourses that construct housing and welfare services for homeless people as well as the micro-level practices by which stakeholders respond to these discourses and modify their conduct in institutional welfare service settings (see also Johnson et al. 2010, 20). It is essential to scrutinise the encounters between welfare workers and clients as they comprise consequential negotiations of housing transitions, housing problems, needs and wants as well as agency and structures that affect the pathways.

Ethnomethodological interaction research (from this point on called interaction research) shares this ambition to scrutinise both macro-level discourses and micro-level practices and interactions. Accordingly, the intertwined relations between agency and structure are seen as significant analytical focus (Juhila, Raitakari, and Hall 2017; Hall et al. 2013a; de Montigny 2007, 2013). Also Clapham (2003, 22) states by referring to Giddens (1984) that, "Social practices thus have both an agency and a structural dimension". Actually, this way of doing research has a long history in social sciences. So-called micro-sociology has for decades been interested in human interaction and social constructions as relevant objects of sociological observations and theorizing (e.g. Garfinkel 1967, 1974; Goffman 1959, 1983; Firth 2009; Juhila and Abrams 2011, 278; Juhila, Mäkitalo, and

Noordegraaf 2013). However, as Juhila and Hall (2017, 57; see also Coulter 2001, 33) point out: "(---) EM (Ethnomethodology/author) cannot be rendered as micro-science as opposed to structurally oriented macro approaches. EM studies can focus attention on how 'macro' social phenomena are brought to life in particular encounters".

The interaction between welfare workers and clients at the low-threshold outpatient clinic is influenced by a variety of structural and institutional factors such as for example (see Clapham 2005, 29–35 for classification of structural factors): material and physical circumstances (e.g. austerity, physical and mental constrains of the clients); governmental/institutional policies and practices (e.g. purchaser-provider model and existing service platter); social categories and cultural beliefs (e.g. stigma of homeless drug user and home owner culture as a norm) and professional discourses (e.g. participation and recovery discourses). In interaction participants act on, produce and resist these kinds of structural factors in their talk and thus construct particular expressions of homelessness pathways in situ.

In the interaction research it is stressed that in the analysis it is important to concentrate on those structural and institutional factors that the participants themselves make explicit and relevant during the interaction (see Juhila and Abrams 2011, 280–281). In interaction research this premise to concentrate on the ways participants themselves construct and make sense of realities in interaction is named as scrutinising 'members' methods' (Juhila, Mäkitalo, and Noordegraaf 2013). This is well displayed in Morris' (2015, 308) definition of ethnomethodology: "a study of the methods that members use to produce mutually recognisable social interaction. The interaction involves 'work' between members to accomplish a mutually intelligible orderly world. This 'work' is much to do with the perception that much of our world is constituted by competing social constructions and values" (see also Jayyusi 1991). Members' methods resonate with social constructionist methodology that emphasises that the social word is made reasonable through micro-level, cultural and temporal-spatial meaning making that is conducted in participants', i.e. members', interaction (see also Clapham 2002, 61). From this viewpoint past, present and future homelessness pathways are conceptualised differently depending on the particular setting and the purposes of the interaction.

Categorisation, one of the analytical concept of interaction research (Hester and Eglin 1997; Mäkitalo 2013; Juhila and Hall 2017; Raitakari et al. 2013), is particularly useful when analysing the intertwined connections of macro-level discourses and micro-level practices in different

contexts, because "a great deal of knowledge that members of a society have about the society is stored in terms of the categories" (Sacks 1992, 40). "Thus, categories are shared public cultural resources through which we construct our understanding of society, ourselves and others" (Juhila and Abrams 2011, 283).

Categories such as 'homeless person', 'the client' and 'the welfare worker' are culturally associated with particular characteristics, activities, responsibilities, moral expectation and societal values. By carefully analysing how subtle categorisation work is actively done in meeting interaction it is possible to grasp the ways participants reason and judge the client's homelessness situation in situ. Depending on this constructed knowledge the participants decide how to distribute responsibilities and act in the given situation. Hence language use is consequential and it creates practices and vice versa. This functionality and consequentiality justifies interaction and language use to be taken as important research topics in social sciences including homelessness research.

Following the above defined premises and analytical concepts in the analysis special attention is given to the situated linguistic resources of the participants; how they make sense and use the expressions of the past, present and future pathways. The data was read keeping in mind the theoretical discussions concerning pathways studies and the interest to capture how pathways are constructed in multi-party talk. When analysing the data examples the welfare worker and client categorisations as well as temporal-spatial modifiers were concentrated on. Analytically important points were underlined from the data extracts to make it easier to follow the analysis. No analysis programme for coding was used because the objective was to present client cases where 'pathway talk' was strongly present during the meeting interaction. Hence, the analytical unit was not a particular theme or code but a flow of meeting interaction more as a whole.

Considering the limited space and explorative and illustrative nature of the text two data examples are presented. The two selected client cases are from the data corpus of four client cases that include seven tape-recorded meetings. The corpus and number of presented data examples is rather small but sufficient enough for a study that focuses on enhancing theoretical-methodological discussion based on displaying data examples chosen by criteria that fit the research design (see for research examples Hall et al. 2013a; Juhila et al. 2015; Permin Berger and Eskelinen 2016; Juhila, Raitakari, and Hall 2017). The illustrative cases are chosen according to this aim. Firstly, the cases display distinct, yet common ways, of using expressions of homelessness pathways in the whole data. The cases represent well the form and structure of the interaction in the whole data corpus (see also

Ranta, Raitakari, and Juhila 2017). In the first example the meeting interaction and sense making are directed strongly by welfare workers, whereas in the second example interaction and reasoning have more of the characteristics of doing reasoning together. Secondly, both examples illustrate a sense making process where pathways turn out to be a 'homelessness traps', 'homelessness circles' and a 'dead ends'. Thus they illustrate difficulties welfare workers and clients come into contact on the homelessness pathways. The first example emphasises more the use of structural and institutional factors and the second individual agency in explaining homelessness, although both ways of explaining are present in both client cases. Thirdly, these data examples are selected because they demonstrate and reflect in a clear way how the homelessness pathways in meeting interaction are displayed by expressions of fragmented and hazardous shifts in time and place – in a way that does not resonate with the common view of pathways as 'grand narratives' of a solid, linear and progressive journey through well-planned housing choices (Fopp 2009).

Homelessness pathways are constructed differently in different settings such as for example in therapeutic interactions as well as at different points of the same encounter. The analysis aims at becoming sensitive to noticing the consequential use of expressions of the past, present and future homelessness pathways in the flow of welfare workers-clients interaction. The research design does not allow to comprehensively present the homelessness pathways of people with severe drug abuse and mental health problems.

Setting and data

The low-threshold outpatient clinic for people with severe drug use and mental health problems is run by a non-profit organisation (NGO) that has a position of a service provider in a local service system based on a purchaser-provider model. Low-threshold refers to the institutional task of the outpatient clinic to offer easily reached, client-centred case management, social support, health consultation and treatment assessments on the bases of voluntariness and anonymity when a client chooses. The multi-professional work team includes social workers, psychiatrists, nurses and front desk workers. Relationships between the workers and clients are commonly long-term, which allow for the best supportive and confidential interaction processes. Both multi-party interaction examples analysed in the following section are based on long-term workers-clients' relationships. The clients have formed a supportive relationship especially with the clinic's staff.

Multi-party meetings are part of regular practices of the outpatient clinic. They imply features of institutional interaction such as task-orientated and asymmetrical communication (Drew and Heritage 1992; Juhila, Mäkitalo, and Noordegraaf 2013). The asymmetry of welfare worker-client interaction may be realised for instance when a welfare worker takes a position of a 'knowledgeable expert' and orientates to the client as one needing advice and guidance (Juhila, Mäkitalo, and Noordegraaf 2013, 20–22; Hall and Slembrouck 2013). Meetings take place in a particular institutional setting at the margins of welfare services that in itself shapes the aims, norms and possible moves of interaction. One of the core institutional tasks of the meetings is to try to find a solution to clients' homelessness situation and advance proper housing transitions by mapping local housing and welfare services and negotiating the participants' responsibilities to act in the difficult situations presented.

The data contain seven meetings that were tape-recorded during the field work. Meetings concentrate on the homelessness and housing issues of one female and three male young adults (the data include1–3 recordings on each client) In total the data consists of 630 minutes of meeting talk and the average length of the meetings is 60 minutes. The data corpus consists 117 transcribed pages. Homelessness or a risk of becoming homeless was on the agenda of all meetings. Meeting participants include the client and various combination of relatives, the clinic's workers, municipal's social workers, workers from psychiatric outpatient clinics and public housing companies. The researcher was present in some of the meetings and the staff independently recorded some of them. The researcher tried to be a silent and non-active participant. However, the presence of a tape-recorder and the researcher may have had some influence on the "naturalness" of the interaction data. The data used allow to study expressions of homelessness pathways as they are constructed and used in institutional, multi-party talk. So, the aim is not to disclose participants' inner emotions, sentiments, experiences of homelessness or complete narratives of homelessness pathways but instead 'pathways talk' in-action.

When studying service encounters at the margins of welfare services, ethical principles such as anonymity, self-determination, voluntariness and not causing any harm to participants require special consideration. The research followed the guidelines of the National Advisory Board on Research Integrity, which defines ethical principles of research in the humanities and social and behavioural sciences (http://www.tenk.fi/en). The study was reviewed by The Ethics Committee of the [name of the city] Region that provides ethical reviews on non-medical research in the field of the human sciences, and it was stated that the study does not have ethical problems. The Committee

is run by the University and the members represent all five higher education and research institutions in the region. An ethical review examines from the perspective of avoiding risks and harms, how the study will be conducted, what information will be given to subjects, and how data will be collected, processed and stored. In the study participants were informed about the study and both oral and written consents were obtained. The clinic's staff first introduced to the client's the possibility of taking part in the study, after which the researcher contacted them. As a small thank you for participation the clients were given a 10 euro gift card for a hamburger restaurant. The data is carefully stored in a locked cabinet and in the computer behind passwords. It is used in a way that respects the participants and their viewpoints.

Negotiating pathways in action: Example 1

The male client in this example has been using the low-threshold outpatient clinic's services for about 10 years. He is in his thirties. He has been using drugs and alcohol heavily and has also had periods in psychiatric care. It has been about 5 years since he last had his own apartment. Now he has been offered an apartment from the supported housing service targeted at people with substance abuse and mental health difficulties. The supported housing service has about 20 apartments scattered around the city and is a common meeting place for the clients. The clients are required to be committed to receiving home visits and being active in group activities.

In the meeting the participants are planning the client's assumed risky transition from homelessness to living in supported housing. Present in the meeting are the client, social worker from the low-threshold outpatient clinic (OSW), social worker from the municipality (MSW) and two support workers from the supported housing service (not talking in the extracts). The extracts demonstrate how the past homelessness pathways are constructed as a series of random transitions from one housing and/or treatment facility to an another and how this creates language use that indicates hesitation towards the success of the future plan of the client moving to scattered housing with quite un-intensive support.

Extract 1.1 Own place quite a few years ago...

1. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: We were talking with [the client] a bit about what kind of thoughts getting a flat has brought up, and I was thinking that would you now like to tell about your own thoughts?

(a four-second silence)

- 2. CLIENT: Not really. Maybe there will become some pressure that can I keep it (indistinct). Not major pressure, but those kind of thoughts.
- 3. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: More like concerns about whether or not you can do it?
- 4. CLIENT: Yeah. (an eight-second silence)
- 5. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Do you remember the last time you had your own place, it probably was in [a district] then, right?
- 6. CLIENT: Yes.
- 7. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: That was quite a few years ago.
- 8. CLIENT: It was.
- 9. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Do you remember how <u>long</u> <u>ago</u>?
- 10. CLIENT: Probably four or five.
- 11. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Yes. You've since been homeless in all kinds of transitional housing services, and I tried to dig up from our computer all of those. I saw that the first time you came to our [outpatient clinic] was back in 2002. This may describe this, well, your situation (a two-second silence) how should I put it, of how difficult or troublesome your situation is from the point of view of authorities, maybe not so much from your (point of view), but from authorities' view point, because here has been also "kicking around" your treatment in the A-Clinic organisation. Sometimes you've been at the A-Clinic and sometimes here [outpatient clinic], going "eeny meeny" on which place is ultimately responsible for your treatment and who is responsible in the end. That's what it's been like, right?
- 12. CLIENT: Yes.

OSW makes it known that she has been talking with the client already before the meeting, and now she invites the client to share his thoughts with the other participants (turn 1). The client is thus categorised as a knowledgeable agent who has valuable thoughts for the others to hear. A four-second silence is a long pause in the interaction that is usually a sign of uncertainty, resistance or hesitation. Interestingly, the client first expresses that he does not want to tell his thoughts or take a turn in the interaction "Not really", but then keeps the turn to construct the housing transition as a situation that may cause pressure in the future: "Maybe there will become some pressure that can I keep it (indistinct). Not major pressure, but that kind of thoughts" (turn 2). For the client having an apartment means a risk; he may well lose a possession if he does not succeed in supported housing. But he lessens the possible feeling of pressure by saying "not major". However, the future pathways are seen to cause concerns and to be dependent on the client's micro-level "doings" i.e. can he manage independent living despite his homelessness past. This uncertainty is next talked into being by the OSW in turn 3. The client accepts the interpretation of the worrying situation with the minimal response "yeah" (turn 4).

Then in the meeting interaction starts a sequence where particularly the OSW in a worker-driven way constructs the client's past homelessness pathway (from turn 5 on). In this way she probably tries to make perceivable why having an apartment, which would usually be seen as a positive change in the homelessness pathways, is causing pressure and uncertainties for the client. The temporal dimension is made relevant and present by expressions such as: "do you remember" (turn 5); "last time" (turn 5); "quite a few years ago" (turn 7); "how long ago" (turn 9) and "probably four or five" (turn 10).

The time without an apartment is constructed as being essential by the OSW especially because the client has been homeless for the whole time and moving from one place to another: "You've since been homeless in all kinds of transitional housing services" (turn 11). The OSW describes fragments of the client's past pathways by referring to the organisation's client records. Based on that knowledge, in the meeting interaction the client becomes categorised as a long-term homeless person, who has had several shifts between different housing and treatment services, and this in turn is displayed as evidence of "how difficult or troublesome your situation is from the point of view of authorities, maybe not so much from your (point of view)" (turn 11). The OSW negotiates explicitly between the client's micro-level experiences and macro-level structures when trying to make sense of what is making the homelessness so difficult to solve. The welfare worker points out structural, welfare service system-level factors that she sees as hampering the stabilisation of the client's pathways. Hence, in the difficult situation it is not only a question of the client's 'doings' but also of the authorities' 'doings'. The client becomes categorised as a victim of "kicking around" between drug and alcohol treatment and the organisation as not taking responsibility for achieving sustained treatment.

The OSW's language use makes visible an important question related to the categorisation and construction of homelessness pathways: it makes a difference to stakeholders who or what (if anything) is named responsible for events taking place in the pathways. In the end of the extract the OSW verifies from the client the validity of her interpretation of the situation and thus gives the client the possibility to display his own view on the situation. However, the client just agrees with the worker's interpretation by giving a minimal response of "yes".

In the following turns OSW emphasises several periods in various treatment and housing services and they are seen to constitute a 'random homelessness circle' for a person that "has both substance abuse and mental health problems". It can be seen from the extract how using particular treatment

and housing services and random shifts between them are seen to indicate the client having a 'double trouble' situation (see Raitakari et al. 2013).

Extract 1.2 ... and after that random homelessness circle

- 1. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Yeah, and then you've been in [outpatient rehabilitation], [a housing unit], [community care], the Salvation Army's [unit], [alcohol and substance abuse treatment], and [assisted 24/7 housing]. I'm not sure, but were you ever in [assisted 24/7 housing]?
- 2. CLIENT: No, I haven't.
- 3. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: I mean you were supposed to go to [assisted 24/7 housing], no I mean [a sheltered housing unit], and things like that. And this has all been somehow very, like, who's organising this and who's somehow administering this? As for the treatment facilities it's awful how randomly it is where ever, and you can notice that this is if a person has both substance abuse and mental health problems. If it's alcohol plus drugs, then it's like this. I would've liked if someone from the [comissioners' organisation] was here to listen to this.
- 4. WORKER FROM THE SUPPORTED HOUSING UNIT: Yes, that would've been nice.

In the above the OSW lists the client's past to comprise seven periods in inpatient care and a total of eight periods in rehabilitation, 24/7 assisted living, community care, residential care and substance abuse treatment. She questions who is responsible for such a shattered and random set of transitions between rehabilitation and housing facilities (turn 3). The great number of unplanned shifts from one place to another is judged to be an unbearable feature of the macro-level welfare service system: "it's awful how randomly it is where ever" (turn 3). This is seen as being especially true when the client is categorised as a person who has both substance abuse and mental health problems: "If it's alcohol plus drugs, then it's like this" (turn 3). It is the macro-level factors that are defined to create the random homelessness 'circle'. From the interaction it can be seen (turns 3 and 4) how the OSW displays the client's past pathways to inform the participants from the commissioning organisation about the grass-roots level dysfunctions of the welfare service system and thus for advocating structural changes – even though the expected participants cancelled their attendance at the meeting.

The OSW turns back to the micro-level experiences by expressing understanding towards the client's hardship in life. The client's pathways are defined as one that does not enhance recovery but instead is a "hassle":

1.3 ... and slim chances to recover

2. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: And I guess, I could think, [the client], that it's very <u>difficult to recover</u> in any sense considering all the <u>hassle that has been</u> going on in your life.

(a four-second silence)

- 3. CLIENT: I guess so. (a four-second silence) I've at least tried to recover, way back when.
- 4. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Hmm-mm. When was the time, you do recall that you would have tried [to recover].

(a five-second silence)

- 5. CLIENT: <u>I at least gave it a shot last autumn</u>.
- 6. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Mm. Would you like to tell more about that?

(a six-second silence)

7. CLIENT: Well, there at the [psychiatric hospital] things kind of went alright for some time, but then I get these feelings, lest that, my chances of recovering are very slim. (a three-second silence) Kind of like that.

The client picks up the issue of recovery and also talks into being his past pathways: "way back then" he has tried to make a change for the better (turn 3). He "at least gave it a shot last autumn" (turn 5). The OSW supports the client to expand his telling by asking time-related questions (turns 4 and 6). The client recognises a better phase in his pathways: "there at the [psychiatric hospital] things kind of went alright for some time", but also a turning point for the worst: "but then I get these feelings, lest that, my chances of recovering are very slim" (turn 7). It can be interpreted that the client sees his pathways as hopeless and is about to give up.

In sum, expressions of past homelessness, transfers between different rehabilitation and treatment facilities are used in meeting interaction as an "evidence" for the current risks in transition from homelessness to housing as well as for frail future prospects for recovery. The past random homelessness circle and macro-level structures are seen to explain current micro-level risks in moving to supported housing. The client becomes constructed as valued and a knowledgeable participant of the meeting. He takes part in the interaction by mostly uttering minimal responses and by accepting the OSW's interpretations of his homelessness pathways. In addition, he is approached as an actor that needs to take responsibility and succeed in future supported housing.

Negotiating pathways in action: Example 2

In the second example the male client is under thirty and has had a long-term relationship with all of the meeting's participants. During the field work he was categorised by the clinic's workers as having ADHD (attention deficit hyperactivity disorder), a traumatic past and severe substance abuse problems. Present at this multi-party meeting are the client, the outpatient clinic's psychiatrist (OP), the social worker (OSW) and also the social worker from the municipality (MSW). At the meeting, the client's homelessness raises concerns. Also this example makes visible the difficulties for the clinic to help the clients to find ways out of homelessness.

Extract 2.1 Living alone has been terrifying...

- 1. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Well. And when it comes to your daily life, how it's going, yeah. <u>Last time</u> we had [the social housing landlord] here and we talked about this homelessness. [The client] <u>has now been homeless for more than six months, right?</u>
- 2. CLIENT: Mm-hmm.
- 3. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: And you told us in a very touching way what it means then when you have to ask a lodging around, where ever.
- 4. CLIENT: Yeah. One night I slept in the railway station's disabled toiled because I was not able to get any other place as my phone (a deep sigh), even my phone didn't work. So that's where I slept.
- 5. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: I'm sure that there are more comfortable places.
- 6. CLIENT: Yes. (indistinct speech) (a five-second silence). An <u>own home would of course be</u> the best, but.

(a five-second silence)

- 7. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: There's kind of a conflict or difficulty as you said that living alone would be a bit terrifying for you.
- 8. CLIENT: Well, yeah. <u>I'm afraid that things will get out of hand for me</u> and <u>then it becomes</u> very difficult especially to keep my home clean and maintain other things.
- 9. SOCIAL WORKER FROM THE MUNICIPALITY: I do agree on that, yeah, as we've tried that.
- 10. PSYCHIATRIST FROM THE OUTPATIENT CLINIC: Exactly.

The OSW starts by asking about the client's present life situation but then continues by referring to past discussions and in this way constructs the client's past pathways. The temporality is made relevant by using expressions like "last time", "has now been homeless for more than six months" (turn 1). The client's past pathway is made relevant in interaction by the OSW by referring to the client's previous description of what it means for him to be homeless (turn 3). The client continues by telling a story of how he has once slept in a railway station's disabled toilet. In the story the client is categorised as an 'occasional rough sleeper' without any other options (turn 4). However, the OSW raises the question about better, more comfortable options (turn 5), and due to that the client expresses the wish for the future pathway out of homelessness: "an own home would of course be the best, but" (turn 6). "Of course" implies that the wish for one's own home is culturally self-evident, whereas "but" indicates that there are obstacles in achieving this self-evidence.

The OSW makes it known to others that the client has told her previously about the obstacle that makes it difficult for the client to shift from homelessness to having a home: "There's kind of a

conflict or difficulty as you said that living alone would be a bit terrifying for you" (turn 7). The future pathways are seen to be affected by the client's psychological issues and difficult emotions. The client accepts this interpretation. He also sees the psychological issues as a risk for failure in the future housing: "well, yeah. I'm afraid that things will get out of hand for me and then it becomes very difficult especially to keep my home clean and maintain other things" (turn 8). There exists among the participants a common concern of future failure that is strengthened also by the MSW. She states how in the past independent living has been tried without success (turn 9). Accordingly, in the interaction the homelessness is defined as an individual agency issue, and the client is approached within the category of 'mental health client'.

For the future homelessness pathways it is essential to assess whether the client's condition has possibly changed for the better. Hence, next the OP seeks to get a perception of how the client's situation has possibly changed over the six-month period, which is an aspect that is seen as vital for deciding the future housing solution. Simultaneously, he questions the constructed a 'deterministic' relation between past and future (failure) pathways:

Extract 2.2 ... and still is. No proper options for exiting from homelessness ...

- 1. PSYCHIATRIST FROM THE OUTPATIENT CLINIC: Right. And do you think that the situation is still the same so that if you lived alone you might end up in such situations? Or, would it be safer if someone else was there (indistinct)?
 - (a six-second silence)
- 2. CLIENT: <u>I wouldn't say that it has changed a lot or, well, I can't really know</u> because all the time I have been dwelled at someone's place.
- 3. PSYCHIATRIST FROM THE OUTPATIENT CLINIC: Yes, right. There's no way of knowing that, but that [what you told] alone tells that you aren't very certain to start living alone.
- 4. SOCIAL WORKER FROM THE MUNICIPALITY: <u>There was also always some kind of support</u>: first from [the youth housing counselor] and then from [the floating support service], but even with that help it didn't work out.
- 5. PSYCHIATRIST FROM THE OUTPATIENT CLINIC: Right.
- 6. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: <u>How often did you get support</u> from [the floating support service]? How often did they visit there your [place]?
- 7. CLIENT: At least once a week.
- 8. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Right, so it just didn't start to work out. Then you spent some time in [assisted 24/7 housing], but that wasn't for you either.
- 9. CLIENT: Yes, it really wasn't for me, [assisted 24/7 housing]. It felt like it wasn't at all my cup of tea. It was too restrictive.
- 10. SOCIAL WORKER FROM THE MUNICIPALITY: <u>As far as I can remember the only time after you started seeing me</u> was when you were living with your friend on [street], <u>the only time you were doing alright.</u>

11. CLIENT: Yeah.

The OP reaches to the future by using a hypothetical question: "so that if you lived alone you might end up in such situations?" (turn 1). In this way, she invites the client to reflect on how things might have changed from the past. The client expresses that the situation has probably not changed much, yet he cannot be totally sure (turn 2). So, the past pathways are seen to mirror the present with at least some probability. The OP responds by showing acceptance and understanding to the client: as the client says, there is no way of knowing the future. However, the OP concludes from the interaction that the client is not that confident about the future option of living alone (turn 3).

From turn 4 on in the interaction participants jointly start to map the client's previous transitions and choices between different housing services, and in this way they construct the housing options that have so far been tried. The temporal dimension of the homeless pathways is made a relevant frame of reference by several utterances: "always some kind of support" (turn 4); "How often did you get support"; "At least once a week" (turn 7); "it just didn't start to work out" (turn 8); "Then you spent some time" (turn 8); "As far as I can remember the only time after you started seeing me" (turn 10); and "the only time you were doing alright" (turn 10).

The homeless pathways are described to be consisted by choosing, testing and changing between less and more intensive support services: from a once a week floating support service to assisted 24/7 housing (turns 4–9). Both the client and welfare workers become categorised as 'choice and opinion makers'. The welfare workers lead the interaction, but despite this it resembles a dialog where the client is invited to become involved in the discussion by asking questions (turns 1 and 6), but the client is an active participant also spontaneously (turns 9 and 11). There is shared understanding that the existing housing services do not include good options for the client (turns 8 and 9). Hence the client's homelessness is seen to be maintained by structural, macro-level factors i.e. the shortages of the housing service system. From the past pathways only one good life phase is brought up and an option for the client's recovery and housing. The only good time for the client was when he had his friend living with him as a roommate: "the only time you were doing alright" (turn 10). The secure transition from homelessness to housing is seen to require an informal solution to the risks of living alone.

As in the first example, also in this example the participants do identify the problem of homelessness in a particular way and established a common understanding of the macro-micro level

reasons for it. However, the negotiations are in a stalemate when it comes to finding a way out of homelessness:

2.3 ... and thus homelessness is a difficult equation

- 1. SOCIAL WORKER FROM THE MUNICIPALITY: Well, this is a difficult equation. I've thought it over many times.
- 2. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: It is, yes. (a three-second silence)
 SOCIAL WORKER FROM THE OUTPATIENT CLINIC: This also isn't a good situation.
 - 3. SOCIAL WORKER FROM THE MUNICIPALITY: No. Definitely not.
 - 4. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: Not under any circumstances.
 - 5. SOCIAL WORKER FROM THE OUTPATIENT CLINIC: This <u>has been going</u> on longer than necessary. All the stuff is still in the warehouse, <u>being stored for</u> the sixth month.

The MSW recognises and defines the client's present circumstance as a "difficult equation", where it is not easy to find a solution, even it has been thought over many times (turn 1). The MSW and OSW jointly judge the client's present homelessness as not a good situation "under any circumstances" (turns 3 and 5). Welfare workers state that there are no good justifications or reasons for homelessness, and it cannot be accepted. The temporal dimension is brought up by stating that homelessness has lasted for too long (turn 6) and is thus probably seen as a more urgent problem. Nevertheless, this meeting ends without any decisions made on how the client could safely exit from the homelessness or in which direction his future pathways should be directed.

Conclusion and discussion

Like Sosin, he [Clapham] sees detailed interaction with service providers as a promising area for future research that can inform both policy and service delivery (...) (Pinkney and Ewing 2006, 70).

The quotation describes well the mission of this paper, which is to apply the concept of pathways to studying naturally-occurring welfare workers-clients' institutional interaction. But what relevance does this article have for the pathways approach or for tackling homelessness in practice?

Firstly, the analysis reveals the complexity of expressions of past, present and future pathways and how these fragmented utterances are use to create a situational understanding of homelessness: it

concretises the richness of temporal-spatial modifiers put to use in this interactive 'work' (see also Juhila, Günther, and Raitakari 2015). In addition it shows that making sense of the pathways produces and is bound to particular client categorisations (see also Author). In the data examples clients are portrayed for instance as victims of 'kicking around' between drug and alcohol treatment, occasional rough sleepers and having psychological issues that prevent living alone. These kinds of interpretations direct for their part how plausible housing choices and transitions are constructed and responsibilities managed in welfare workers-clients interaction. Accordingly, the interaction research gives valuable conceptual tools (e.g. members' methods and categorisation) to study in detail the micro-macro dynamics and complexities of homelessness as they are talked about and made relevant by the participants in different contexts.

Secondly, the analysis shows that references to past, present and future pathways may not only be captured from autobiographies or longitudinal research designs but also from snapshots of the flow of naturally occurring multi-party talk. It is noticeable that the participants in the data examples try to make sense of the past pathways and through this to reason with the difficulties of the present and the (scarce) probabilities for the future. Thus, the past is not behind us but is in front of us: used as an incomplete stock of knowledge when making decisions about the present and trying to foresee the future. The past functions as an essential frame of reference when navigating and constructing pathways 'here and now'. There is a risk that constructions of the past make the future pathways seem only as a tiring gauntlet with a dead end, even though the future cannot really be known.

Thirdly, the analysis gives grounds to reflect on the purposefulness of the concept of pathways in the first place. How well do the pathways actually resonate with the ways participants themselves make sense of the past, present and future homelessness and housing transitions (Fopp 2009)? Are pathways just a construction made and used by the researchers? I would answer yes and no. The usefulness of the concept is bound to how it is interpreted and applied in practice in different research traditions and designs. As Fopp (2009, 287) states, the pathway metaphor comprises meanings that do not necessarily fit well with the experiences of homeless persons. As seen in the analysis homelessness pathways can turn out to be random homelessness circles, which are dead ends without real options to exit homelessness or an unsolvable situation that brings about concerns and hopelessness. For a homeless person there are often a great number of transitions: but do they comprise a pathway for him/her? In the meeting interaction participants utilise temporality, macromicro relations and changing categories when they try to combine fragmented life events together - but it is the researcher that names this interactive work by the theoretical term 'pathways'.

But how then does interaction research benefit the battle against homelessness in practice? Interaction research does not take as a starting point the question of whether participants address homelessness in a 'right' or 'wrong' way. Rather, it is focused on more basic questions, such as how theoretical concepts like pathways and temporality are oriented to and put into practice by different ways of reasoning and acting (Author et al. forthcoming). At its best interaction research makes grass-roots level actors' meaning making and activities visible and available to be used in developing policies and practices. Interaction research informs the practices and policies by conceptualising the macro-level factors and micro-level practices at play in a given context.

Interaction research, as all research methods and methodological frameworks, has both strengths and limitations. As Clapham (2002, 57) has stated, "The assumption is that any framework offers only a partial insight into any social phenomenon and may obscure as much as it clarifies". An example of this partiality is that interaction research does not capture participants' inner emotions, sentiments or experiences of homelessness. When using small data corpuses and illustrative data examples, one needs to be cautious not to make extensive generalisation. In addition, there is always a certain distance between macro-level factors and discourses and micro-level practices, and it is not an easy task to demonstrate without doubts the mechanisms that bring them together (see e.g. Somerville and Bengtssons 2002; Fitzpatrick 2005). Hence, there remains the need to further develop methodological solutions for conducting micro-macro analysis. As I see it, future homelessness research and practice would become enriched by engaging more with methodologies that concentrate on scrutinising language use, grass-roots level practices and interaction in different societal settings (see, e.g. Hastings 2000). In this article interaction research is introduced as one option for developing the studies of pathways as well as for informing the battles against homelessness traps, circles and dead ends.

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