

Capability Traps Impeding Homeless Services: A Community Based System Dynamics Evaluation

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Continuum of Care are the primary coordinating bodies for homeless services in the United States. However, the complexities involved in delivering homeless services across interagency networks challenges coordination and system improvement. Continuum of Care governance, planning, and service provision have received little attention in academic literature, and thus, continue attempt to manage complex systems with little guidance. This evaluation applied community based system dynamics with homeless consumers and service providers to 1) identify capability traps that impede services delivery, and to 2) engage stakeholders in a structured system improvement process. Results revealed organizational structures for governance and planning that inhibit system outcomes. Insights led to policy and practice recommendations for the homeless system.

Keywords: Continuum of Care, homelessness, network governance, collaboration, capability trap, community-based system dynamics

Introduction

The Department of Housing and Urban Development (HUD) governs several homeless services programs, the largest of which is the Continuum of Care (CoC) program. CoCs are geographically based groups of organizations that establish, plan, and coordinate local homeless assistance (Continuum of Care Program, 2012). CoCs were established in 1995 under the McKinney-Vento Homeless Assistance Act to streamline the homeless assistance funding process, increase coordination of homeless assistance within communities, and promote commitment to the goal of ending homelessness (Burt, 2002). They consist of representatives from organizations that serve or interact with homeless persons including, but not limited to, non-profit homeless providers, victim services providers, faith-based organizations, and governments (Continuum of Care Program, 2012).

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) sought to improve homeless services coordination by codifying the CoC planning process into law and consolidating three homeless assistance programs—the Supportive Housing program, the Shelter Plus Care program, and the Moderate Rehabilitation/Single Room Occupancy program—into the CoC program (Continuum of Care Program, 2012). HUD later published regulations, known as the CoC Program Interim Rule, detailing CoC responsibilities for operation, governance, planning, and evaluation (Continuum of Care Program, 2012). Subsequent HUD guidance has emphasized planning and coordination activities, especially coordination of the process for entry into the homeless services system (USICH, 2015).

Coordinated entry is a systematic process by which CoCs assess, prioritize, and assign homeless services to individuals and families (HUD, 2015) and substantially deviates from the fragmented processes previously used by many CoCs (Burt, 2002). Despite the emphasis on systematic entry processes, little research exists on CoC coordination or other CoC governance and planning methods. The existing research focuses on methods of policy implementation as opposed to policy efficacy. For instance, change strategies for homeless service system have been found to be more effective when utilizing a “bottom-up” rather than a “top-down” approach (Morrissey et al., 2002; McGuire, Rosenheck, & Burnette, 2002), and a content analysis of a homelessness symposium in Los Angeles, CA highlighted the need for the integration of homeless service systems planning, implementation, and evaluation not only among service providers but also among policymakers, administrators, and clients (Guerrero, Henwood, & Wenzel, 2014). Research concerning the relationship between homeless services policies and coordination and service integration has focused less on specific CoC governance structures or processes and more on generalized best practices (Greenberg & Rosenheck, 2010).

While existing research has not examined the in-

terplay between homeless service system performance and CoC governance structures or coordination methods, it has provided descriptive insights about CoC governance and organizational structures. Ivery (2007) described one CoC that functioned primarily through a core group of organizations while other organizations existed mostly on the periphery and did not view themselves as part of the CoC partnership or decision-making process. Lewis, Boulahanis, and Matheny (2009) attributed one homeless coalition's success to social and financial commitments developed through lengthy histories with the coalition but found that small and/or faith-based organizations tended to be excluded. Burt et al. (2002) found that highly rated CoCs tended not to provide efficient access to services and were mostly unsuccessful in integrating mainstream services, while about one-third conducted planning activities only to the degree necessary to complete the CoC application. Moreover, Wong, Park, and Nemon (2006) found that many homeless service programs operated in a manner inconsistent with CoC goals.

Research also has not analyzed how CoCs should distribute funding to different service types (e.g. emergency shelter, permanent housing, supportive services, and prevention). Instead, CoC guidance, while recommending permanent housing solutions, offers broad direction for CoCs to track, evaluate, and implement housing and homelessness solutions that meet the needs of their communities (USICH, 2015). Some research suggests that emphasis on emergency housing services can negatively impact communities' efforts to end homelessness and that communities should focus instead on homelessness prevention and moving homeless persons into permanent housing (Stroh & Goodman, 2007; Stroh, 2009). However, CoCs funds cannot be used for homelessness prevention activities apart from some special cases (Continuum of Care Program, 2012), and many communities do not have regional homelessness prevention strategies (Burt, Pearson, and Montgomery, 2007).

The lack of an evidence base for CoC governance and planning may, in some instances, lead CoCs to fall into a "capability trap" in which unreliable and ineffective procedures and processes cause organizations to manage problems as they occur rather than planning strategically and investing in procedures needed to improve (Repenning & Serman, 2002). Investing in long-term planning and organizational capabilities results in "win-win" scenarios when such investments improve organizational performance and external social benefits in the long-term (Lyneis & Serman, 2016). However, organizations must turn their procedures away from working harder (i.e. increasing em-

ployee time and performance demands) and towards working smarter (i.e. increasing activities designed to eliminate the root cause performance problems) to successfully accomplish win-win opportunities (Lyneis & Serman, 2016). Within CoCs, working harder strategies are likely to result in greater time-demands of board and committee members, higher utilization of current resources than previously planned for, and more corner-cutting in order to quickly stabilize and exit households from homeless services in attempts to free-up resources for those waiting for services. Working smarter would increase or create capabilities, and such CoC strategies might include efforts to increase cooperation, trust, and coordination across agencies, decrease in-flows to homeless services through prevention mechanisms, and improve development and implementation of strategic and funding plans.

To successfully exit capability traps, working smarter strategies must increase capabilities faster than they naturally decay and thus require increased investment in capability development. The initial investment in capabilities typically results in "worse-before-better" (WBB) behavior in which system performance decreases as resources are diverted from performance management to capability improvement (Lyneis & Serman, 2016). System performance only begins to improve when capability development reaches a tipping point and exceeds capability decay (Lyneis & Serman, 2016). WBB behavior may discourage CoCs from investing in capabilities because CoC funding is a competitive process that is partially determined by demonstrated improvements to system performance (Continuum of Care Program, 2012). Therefore, CoCs not only risk lower overall system performance when attempting to escape capability traps, they also risk losing funding, which could impact their ability to maintain investment at levels above the tipping point and prevent falling back into the capability trap.

Homelessness prevention represents a win-win for CoCs as it eases strain on providers by decreasing in-flows for services while also benefitting households by avoiding the social, emotional, and financial costs of homelessness. Because federal regulations prohibit use of CoC funding for prevention purposes except in limited circumstances (Continuum of Care Program, 2012), CoCs must collaborate with other resources (e.g. Emergency Solutions Grants recipients, affordable housing developers, and housing authorities) to create and implement homelessness prevention strategies through shared investment. However, many CoCs have not invested in homelessness prevention win-win opportunities apart from large federal initiatives (Cunningham et al., 2015). Collaboration between home-

less services providers and other relevant community organizations have been part of the original goal of the CoC program since its inception (Burt et al., 2002), yet many communities have not invested in capabilities that tip them from reacting to homelessness into proactively managing homelessness.

Failure to capitalize on win-win opportunities may be the result of governance structures that thwart CoCs' abilities to effectively provide and coordinate homeless services. CoCs are comprised of many distinct organizations, each of which has individual goals that align with those of their CoC to varying degrees. These network characteristics are most closely associated with the "network administrative organization" (NAO) form of governance (Provan & Kenis, 2008). An NAO is an administrative organization whose sole purpose is governing a network of autonomous organizations (Provan & Kenis, 2008). However, when governance structures are not mandated, many networks select a shared participant-governance structure that favors inclusiveness and participant control but over time can lead to "burn-out" and inefficiencies as the network grows and governance responsibilities take up more time (Provan & Kenis, 2008). An organizational network may choose to transition from shared, diffuse structures to more centralized structures like NAOs as the network matures, but networks that persist in mismatched governance structures are likely to fail or be ineffective.

The present evaluation used a community based systems dynamics approach to identify and address gaps in delivery of homeless services through a CoC. Community based system dynamics represents a participatory method to engage communities in the process of understanding and improving systems from a feedback perspective (Hovmand, 2014). Feedback in service delivery assumes that gaps are caused by and effect other interrelated parts of a system (Levin & Roberts, 1976; Sterman, 2000). Capability traps reflect a type of feedback in which short-term gains reinforce actions that widen gaps in performance, and solutions require feedback to offset or balance these actions (Lyneis & Sterman, 2016; Repenning & Sterman, 2002). The complexity challenges the ability to locate and coordinate efforts to make system improvements (Hovmand, 2014; Levin & Roberts, 1976; Sterman, 2000). Community based system dynamics connects providers as well as consumers of homeless services into the process of mapping gaps and looking for places to intervene (Hovmand, 2014; Meadows, 1999). Similar approaches have been used within social services agencies that work with vulnerable families, including child welfare agencies and homeless services (Hovmand, 2014; Hovmand & Gillespie, 2010;

Stroh & Goodman, 2007). Thus, community based system dynamics represents a useful tool for assessing and addressing capability traps in the homeless system.

Methods

Evaluation Design

The evaluation engaged homeless system providers and consumers into a structured and iterative process that mapped perceived service delivery gaps in a Midwestern CoC. Community-based system dynamics generated system maps (Hovmand, 2014). Consumers included a group of currently homeless individuals using services convened by local homeless advocates. Service providers were invited from the CoC subcommittee on planning. Maps from the two groups were consolidated by evaluators, and a review of the federally mandated CoC governance charter was conducted to further explore CoC structures that guide operational policies and procedures. Initial system insights were presented at a planning subcommittee meeting that included other providers and homeless advocates. Committee members discussed insights, and written feedback was elicited after the presentation. The insights were included into a summary report with prioritized recommendations for system improvements that was presented at a full CoC convening for final comment. The final report was submitted to the CoC, while this evaluation further summarizes important themes from structured activities aimed at improving services.

Evaluation Methods

Community based system dynamics were implemented through an evidence-based process called group model building (Andersen & Richardson, 1997; Hovmand, 2014; Huz et al., 1997; Vennix, 1999). A facilitation manual was generated based on best practices and previously used scripts to identify gaps (Luna-Reyes & Anderson, 2003; Scriptapedia, 2017). The groups were conducted with a facilitator and co-facilitator trained in community based system dynamics. All evaluation activities occurred during the spring and summer of 2016.

A structured activity called 'Graphs Over Time' asked group members to envision how the homeless system could best help people in the area. Members individually generated ideas and plotted on graphs how the variable changed over time. In particular, the horizontal axis represented the appropriate time span (e.g., daily, yearly, decades), while the vertical axis

showed fluctuations in functioning. Lines represented perceived performance in the past to the present indicated by a dashed line. Then, forecasted trends showed desired and feared patterns for the future. Figure 1 illustrates an example of the data collection tool used to collect gaps.

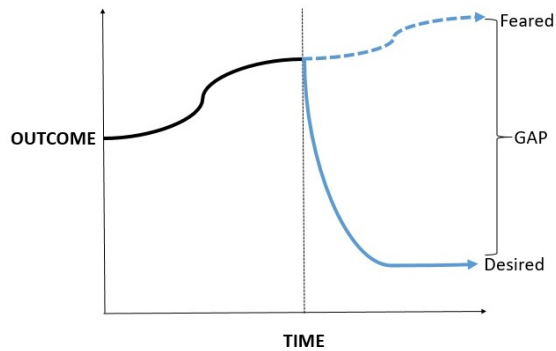


Figure 1: Example of data collection tool used for the community-based system dynamics graphs over time exercise

Members reported variables in a round-robin fashion until all variables were discussed. Graphs were organized into groups that reflected common themes, and group members provided additional input on how the indicators of system performance fit together. Themes and connection between themes were summarized and reflected back to the group to ensure accuracy of interpretation. Resulting themes were further informed through feedback from other CoC members. Identified themes were used in a content analyses of the CoC governance charter for further interpretation of system structures.

Analysis

Findings and recommendations from the group process and content analysis were presented to the Continuum's Planning Committee in August of 2016. Eleven members from eleven different organizations involved with the CoC attended. Members provided feedback through group discussion, and written feedback was elicited after the presentation.

Results

System maps were generated from a group of consumers (n = 5) and a group of service providers (n = 6). Findings indicated organizational structures that

impeded the efficient delivery of services. Consumers discussed inconsistencies between service need and receipt, contributing to unmet need and enduring vulnerability over time. Service providers emphasized the problems of overwhelming need and recurring homelessness despite service provision; frequent meetings to address problems eroded time spent serving clients and exacerbated unmet need. Together, the themes pointed to a vicious cycle of unmet need.

Consumers

The consumer group identified feedback mechanisms that contributed to enduring vulnerability to homelessness and generated 21 ways to improve homeless services. Graphs created by the consumer group are presented in Figure 2. Themes identified by consumers related to lack of quality programming, affordable housing supply, and employment opportunities. Consumers also noted a need for innovation and evaluation of housing programs that better meet their needs and contribute to self-sufficiency over time. Table 1 presents themes and subthemes identified through analyses.

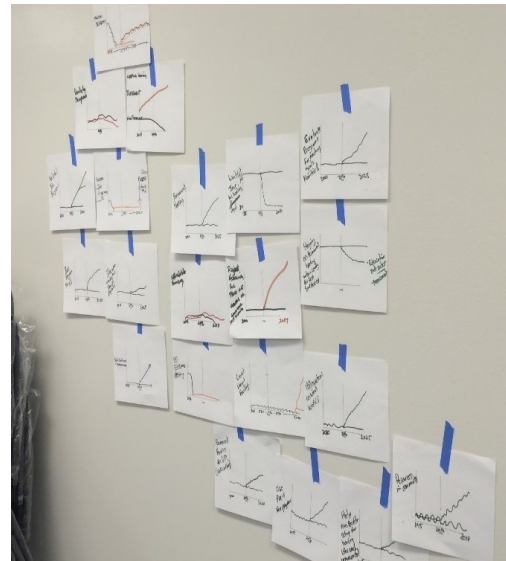


Figure 2: Consumers' desired and feared outcomes of homeless services as collected through community-based system dynamics

Affordable housing. A common theme was the lack of available affordable housing within and outside of the homeless system. Consumers expressed fear surrounding the possibility of low supply of available housing, though they hoped for significant increases in the number of affordable units. Consumers discussed

long waiting lists for permanent housing units. They hoped to see significantly reduced delays in obtaining housing, especially among individuals with no mental health or substance use problems, and among older adults. Consumers also felt there were not enough resources in communities, such that many people had to travel long distances to secure assistance. Consumers identified bottlenecks that were created when people in permanent supportive housing stayed indefinitely rather than moving on to achieve full self-sufficiency. The group discussed a need to assess self-sufficiency among those in permanent housing; those who continue to need support should remain in housing, while outreach and education on housing options outside of the homeless system should be provided.

Job Programs. Consumers discussed the importance of employment to affording housing, while also explaining that many job training programs did not lead to employment. They feared program quality would continue to suffer, and that it would become harder to find jobs that paid adequate wages to afford housing, transportation, and food. Consumers also emphasized the need to match individuals' skills and interests with job training programs, and improve outcomes such that training led to actual employment.

Other Service Programs. Consumers indicated that more easily accessible treatment for mental health and substance use disorders was necessary to help people maintain stable housing and avoid recurring homelessness. They feared that lack of necessary supports would create a backlog of unmet need and perpetuate a cycle of homelessness.

Innovation. Consumers discussed a need to search for and test innovative solutions for addressing a lack of quality and innovation. Potential improvements proposed included converting vacant buildings into affordable housing, implementing more peer-led programs, and facilitating the development of new shelters or other non-profit organizations to help the homeless.

Evaluation. Consumers felt that organizations receiving HUD funding were not being held accountable to consumers, and they proposed more rigorous evaluation of services and outcomes to improve quality. They hoped to see housing and job programs that supported the development of self-sufficiency.

Service Providers

Service providers generated 39 variables representing five major themes related to growing need, reduced resources, and inability to effect systemic change. Table 1 presents themes and subthemes identified through analyses. Providers hoped for expanded housing sup-

ply, improved housing stability among consumers, and greater efficiency of agencies and committees to serve homeless individuals and families.

Need for Homeless Services. The rate of homeless consumers entering the system was identified as a major fear of service providers, who cited the economic climate and housing market as contributing to the size of the homeless population. Providers hoped to see a reduction in the number of newly homeless individuals needing services and improved accuracy of official homeless counts.

Vulnerable Populations. Service providers also expressed fears over an increase in the number of consumers experiencing chronic homelessness, who place additional strain on the system by reentering multiple times and using a disproportionate amount of resources without stabilizing. Other special needs included substance use disorders and reentry from incarceration. Providers hoped for improved specialized services and reduced repeat consumers.

Homeless Services. Providers also discussed discrepancies between need and availability of housing and other support services. A reduction in transitional housing units was reported in recent years, a trend many members feared would continue. Providers hoped for expanded transitional and permanent supportive housing that would reduce the gap between supply and demand of housing services.

System Outcomes. Service providers hoped for improvements across two main outcomes: financial stability and maintenance of stable housing. These outcomes related to the fear of increased chronic homelessness, which was regarded as a failure of services to stabilize individuals and continued to strain the homeless system. Unmet need contributed to the problem of people cycling through the homeless service system repeatedly, which strained the resources of agencies and providers. Re-serving former consumers was identified as a major systemic inefficiency that taxed agency and provider resources and impeded capacity to reduce the need for services.

Organizational Factors. Service providers identified lack of communication across committees and agencies as a barrier to effective service delivery and improvement. Members reported belonging to multiple work groups or committees, often with overlapping goals, and feared redundancy across groups. Many committee members felt powerless to effect systemic changes due to constant problem-solving, "fire-fighting," and chasing funding rather than developing strategic plans. Additionally, over-reliance on funding from the U.S. Department of Housing and Urban Development (HUD) was feared, and committee members discussed the importance of developing sustainable

non-HUD funding streams. Finally, providers commented on delays in contracts for HUD services. As described in an email communication by one provider:

Agencies are being asked to commit staff time to this and expand/improve services. However, an issue that has been raised in Planning Committee is the problem in the funding stream when there are delays in city contracts and delays in funds getting to agencies. Funds impact the staff available to provide a service and the type/amount of service that staff can do. To what extent could service delivery be improved if we addressed the funding mechanism?

Figure 3 reflects the system in which consumers are served. Unemployment and lack of affordable housing are endogenous factors that contribute to risk for homelessness. When consumers seek support from social services, their access, utilization, and outcomes are dependent on the availability, quality, and demand for those services. If needs are left unmet, the consumer may become homeless and thus enter the homeless service system. Again, availability, quality, and demand determine service receipt and outcomes. If needs are met, consumers exit the system; if not, they remain in a cycle of homelessness and service use.

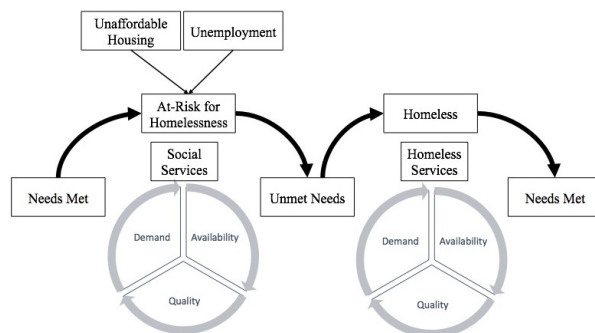


Figure 3: Cycle for homelessness risk and unmet net

Charter Review

A review of the CoC’s Governance Charter indicated potential barriers to high performance. Inconsistencies within the charter create confusion and suggest a lack of transparency. In particular, one article of the

charter created a hierarchical structure overseen by a department of local government while another article detailed diffusion of responsibilities to committees. Moreover, it was unclear whether the local government department must request final permissions from other local government agencies to execute contracted responsibilities.

HUD regulations recommend CoCs facilitate a collaborative approach to decision-making (Continuum of Care Program, 2012), reflecting assumptions that a top-down communication structure hinders rapid sharing of information necessary for committees to complete tasks. Current reporting policies and practices appeared to channel information and responsibilities through a department of local government rather than between committees, which could hinder information-sharing and delay decision-making. As committees become more responsible for program performance review, inefficiencies will become increasingly problematic.

Planning Committee Feedback

Members of the CoC’s planning committee generally voiced agreement, and expansion of themes generated from the group model building and charter review. The term “growing pains” was used to contextualize the role of committee versus CoC Collaborative Applicant responsibilities in decision making. Members described a history of “control” of policies and procedures by the previous local government department administration which bred a culture of mistrust and resentment among CoC members toward governance. Recent efforts by local government to share responsibility were delayed by misgivings, as well as a lack of clarity regarding local government’s role in CoC decision making. Members reported that the dynamics were made worse by HUD policy initiatives that do not allow for local control regarding activities and information sharing. These dynamics and HUD initiatives have perpetuated perceptions that CoC committees serve to “rubber-stamp” policies and procedures. Members recognized that the local government department must ensure compliance with minimal HUD guidelines, and perceived inconsistencies among agencies impeded efforts to share decision-making responsibilities.

Planning Committee members also recognized ongoing collaborations that illustrate the potential for future CoC collaborations. For example, members commended one workgroup as a high-performing collaboration. One member stated, “I recently had the honor and pleasure to participate in a transitional housing workgroup. How often do people say that

about committee meetings?!” Another member described key contributors to success, including distribution of agendas before every meeting, assignment of responsibilities to be completed by the next scheduled meeting, and shared development of a product that summarized the workgroup’s process and recommendations. Members agreed that potential exists, and there will be “growing pains” in improving the functioning of committees.

Discussion

The consumer group identified feedback mechanisms that contributed to enduring vulnerability to homelessness. Providing more rapid housing to individuals without mental health or substance use treatment needs could alleviate the backlog of people waiting for assistance. Improving service quality and increasing the affordable housing supply could allow people to achieve self-sufficiency more quickly, and emphasis on innovative and effective solutions could improve efficiency across the entire system of homeless services.

Both service providers and consumers identified gaps that left needs unmet and contributed to ongoing service-seeking and homelessness. Providers felt the homeless service system was being overwhelmed by the number of people needing services. Consumers felt that services did not adequately meet their needs; services were delivered in a “one size fits all” manner that was not appropriate for everyone, failing to stabilize housing and mitigate homelessness risk over time. Consumers felt that services were not matched to individual needs, abilities, and preferences. Unmet need was exacerbated by lack of preventive services through the homeless system, such that services were not received until an individual was literally homeless and required more intensive intervention.

Results indicated four areas of need to address systemic gaps: committee structure and meeting practices, quality assurance procedures, governance and decision making, and prevention. Two key leverage points emerge from this conceptualization of the homeless service delivery system. First, an improved quality assurance process should be established by which systemic problems are identified, solutions generated, and an efficient decision-making mechanism selects the most effective option, with ongoing evaluation to assess changes in system performance. Second, homelessness prevention strategies should be given greater emphasis to address the overwhelming influx of consumers seeking services, reducing system-wide resource burdens, and allowing providers to better meet consumer needs.

While meetings may be the most effective way to plan and implement system change, providers cited frequent meetings as a barrier to efficient practice, as they reduced time available to serve consumers. Meetings were the most common way to address systemic issues, but unstructured and inefficient meeting practices contributed to problems. Effective meeting practices should generate solutions to identified systemic problems, as well as incorporate a decision-making strategy to select the best solution, implementation, and ongoing evaluation of outcomes to observe system improvements.

Breakdowns at any step in the process could inhibit system improvement, particularly regarding solution generation and decision-making. This process depends upon effective and efficient communication at all levels: HUD, local government, agency leadership, providers, and technical assistance. Quality solutions generation may require more efficient communication between HUD and agencies, as well as greater insight from providers and technical assistance.

Implications

Committee Structure and Meeting Practices. CoCs should implement smaller and more structured committees, ideally limited to no more than 10 individuals from different organizations to monitor quality assurance. CoCs should seek to avoid membership on multiple committees by individuals and organizations, establish term limits and consistently rotate committee membership while emphasizing diversity in knowledge and experience when assembling committees. Committee meetings should be limited to 30 or 60 minutes to encourage efficient use of time and prioritization of tasks. Use of virtual meetings should be considered when responsibilities can be efficiently achieved through Skype, Yahoo Messenger, Google Hangout, GoToMeeting, or other means. Committee leadership should disseminate agendas before meetings as well as meeting minutes following the meeting. Responsibilities should be delegated evenly to committee members with a clear expectation that progress on tasks and responsibilities will be reported at the next meeting. CoCs should develop a method to review the success of committee meetings on an ongoing basis including metrics to monitor start and end time, use a clear agenda, monitor member participation, assess reporting on previous tasks, and measure member comfort. CoCs should create an infrastructure to report committee performance and on key objectives to the CoC Collaborative Applicant and broader continuum while concurrently developing a mechanism to support underperforming committees

and committee members. CoCs should also design a procedure to improve committee performance and communication and assemble a task force to lead efforts for developing and testing procedures. The task force should re-evaluate current committee membership to maximize diversity of knowledge and skills and create clear definitions of committee membership tasks and responsibilities while emphasizing incentives for individual and agency involvement.

Quality Assurance Procedures. CoCs should develop ways to efficiently identify high- and low-performing programs and target low-performing programs for training and support. High-performing agencies should train and support low-performing agencies rather than delivering broad trainings that consume time and resources. CoCs should design efficient methods of system performance review and collect feedback on the utility of performance reports. Performance reports should clearly present the most important information, and unambiguous action steps should accompany reports with performance issues. Specific individuals should be tasked with reviewing and reporting findings to committees. CoCs should test the effectiveness of interventions with poor performing programs and discontinue interventions that do not improve performance. Efforts to identify and measure key metrics of homeless system performance, including prevention, should continue, and design, testing, and improvement of data collection and analysis should be reviewed on a continual basis. CoCs should implement gaps analyses in the future that collect qualitative information on system functioning in addition to ongoing quantitative assessments by training selected CoC service providers, homeless advocates, and homeless consumers on specific methods to create a sustainable and scalable approach to gaps assessment.

Governance and Decision-making. CoCs should revise their Governance Charter to clarify the decision-making process for the continuum. In particular, policies and procedures should clearly describe the activities for which each CoC entity is responsible. This includes defining whether decision-making should be made at the committee level and the actions and responsibilities required by each committee. CoCs should share information on committee decisions with all CoC members, including the voting process and results. Roles and responsibilities of the Collaborative Applicant, a CoC lead agency, or any other highly influential entity should be clearly defined including which entity is responsible for final decision-making.

Prevention. CoCs should create a standalone CoC committee on homelessness prevention to develop aims and responsibilities, as well as design initial

strategies to prevent homelessness. Committee members should comprise service providers, consumers, and other members of the community to provide multiple perspectives on how best to design services. This diverse group of community members should document current initiatives that address prevention and identify existing gaps, develop and test ways to slow the in-flow of people into the homeless system, and identify and monitor key metrics of homelessness prevention.

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